1. Name and Address of Reporting Person
   **HAINES DANIEL**
   (Last) (First) (Middle)
   4400 BISCAYNE BOULEVARD, SUITE 888
   C/O THE FEMALE HEALTH COMPANY
   MIAMI FL  33137

2. Issuer Name and Ticker or Trading Symbol
   **FEMALE HEALTH CO [ FHCO ]**

3. Date of Earliest Transaction (Month/Day/Year)
   **05/15/2017**

4. If Amendment, Date of Original Filed (Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer
   (Check all applicable)
   - Director
   - 10% Owner
   - Officer (give title below)
   - **Chief Financial Officer**
   - Other (specify below)

6. Individual or Joint/Group Filing (Check Applicable Line)
   - Form filed by One Reporting Person
   - Form filed by More than One Reporting Person

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Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

<table>
<thead>
<tr>
<th>1. Title of Security (Instr. 3)</th>
<th>2. Transaction Date (Month/Day/Year)</th>
<th>3. A. Deemed Execution Date, if any (Month/Day/Year)</th>
<th>4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>7. Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock, par value $.01 per share</td>
<td>05/15/2017</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>P</strong></td>
<td><strong>5,000</strong></td>
<td><strong>A</strong></td>
<td><strong>$1.0263</strong></td>
<td><strong>62,931</strong></td>
<td><strong>D</strong></td>
<td></td>
</tr>
</tbody>
</table>

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

<table>
<thead>
<tr>
<th>1. Title of Derivative Security (Instr. 3)</th>
<th>2. Conversion or Exercise Price of Derivative Security</th>
<th>3. Transaction Date (Month/Day/Year)</th>
<th>4. Transaction Code (Instr. 8)</th>
<th>5. Number of Derivative Securities Acquired (A) or disposed of (D) (Instr. 3, 4 and 5)</th>
<th>6. Date Exercisable and Expiration Date (Month/Day/Year)</th>
<th>7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)</th>
<th>8. Price of Derivative Security (Instr. 5)</th>
<th>9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)</th>
<th>10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>11. Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Code</strong></td>
<td><strong>V</strong></td>
<td><strong>(A)</strong></td>
<td><strong>(D)</strong></td>
<td><strong>Date Exercisable</strong></td>
<td><strong>Expiration Date</strong></td>
<td><strong>Amount or Number of Shares</strong></td>
<td><strong>Title</strong></td>
<td><strong>Price</strong></td>
<td><strong>Number of Shares</strong></td>
<td><strong>Ownership Form</strong></td>
</tr>
</tbody>
</table>

**Explanation of Responses:**
1. The price reported above is the weighted average transaction price. The range of prices for such transactions is $1.025 to $1.029. Upon request by the Commission staff, the reporting person will provide full information regarding the number of shares sold at each separate price.

/s/ Kevin J. Gilbert, Attorney-in-fact 05/15/2017

**Signature of Reporting Person Date**

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).


Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.