

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Olin Corporation Good Government Fund

ADDRESS (number and street) 600 Powder Mill Road

Check if different than previously reported. (ACC) East Alton IL 62024 1273

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00002790

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(d) 30-Day Post -Election Report for the:

<input checked="" type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on 11 02 2010 in the State of \_\_\_\_\_

5. Covering Period 10 01 2010 through 11 22 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Todd A Slater

Signature of Treasurer Electronically Filed by Mr. Todd A Slater Date 12 02 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only								
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FEC FORM 3X  
(Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Olin Corporation Good Government Fund

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		31968.76
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	20944.95									
(c) Total Receipts (from Line 19) .....	1916.45	8992.64								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	22861.40	40961.40								
7. Total Disbursements (from Line 31) .....	10500.00	28600.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	12361.40	12361.40								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Olin Corporation Good Government Fund

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	1252.95	5120.70
(ii) Unitemized .....	663.50	3871.94
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1916.45	8992.64
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	1916.45	8992.64
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1916.45	8992.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1916.45	8992.64

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	100.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	100.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10500.00	25500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	3000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	10500.00	28600.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10500.00	28600.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	1916.45	8992.64
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1916.45	8992.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	100.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	100.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Olin Corporation Good Government Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeffrey A Brantley	Date of Receipt MM / DD / YYYY 11 / 15 / 2010
	Mailing Address 187 Champion Drive N.W.	<b>Transaction ID:</b> SA11AI.4817
	City Cleveland State TN Zip Code 37312	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
	Name of Employer Olin Chlor Alkali Products Occupation Dir.; Information Sys. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Norma G Holm	Date of Receipt MM / DD / YYYY 11 / 15 / 2010
	Mailing Address 2278 Tennessee Nursery Road	<b>Transaction ID:</b> SA11AI.4820
	City Cleveland State TN Zip Code 37311	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
	Name of Employer Olin Chlor Alkali Products Occupation Dir.; Human Resources-Operation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) John L McIntosh	Date of Receipt MM / DD / YYYY 10 / 31 / 2010
	Mailing Address 516 Anatole LN NW	<b>Transaction ID:</b> SA11AI.4799
	City Cleveland State TN Zip Code 37312	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
	Name of Employer Olin Corporation Occupation Senior V.P., Chemicals Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	120.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 15		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
Olin Corporation Good Government Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) John L McIntosh	Date of Receipt MM / DD / YYYY 11 / 15 / 2010
	Mailing Address 516 Anatole LN NW	<b>Transaction ID:</b> SA11AI.4836
	City Cleveland State TN Zip Code 37312	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
	Name of Employer Olin Corporation Occupation Senior V.P., Chemicals Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Thomas J O'Keefe	Date of Receipt MM / DD / YYYY 10 / 31 / 2010
	Mailing Address 336 Westminster	<b>Transaction ID:</b> SA11AI.4874
	City Glen Carbon State IL Zip Code 62034	Amount of Each Receipt this Period 65.29
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
	Name of Employer Olin Corporation - Winchester Occupation V.P.; Mfg. Oper & Planning Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 630.42	

<b>C.</b>	Full Name (Last, First, Middle Initial) Thomas J O'Keefe	Date of Receipt MM / DD / YYYY 11 / 15 / 2010
	Mailing Address 336 Westminster	<b>Transaction ID:</b> SA11AI.4845
	City Glen Carbon State IL Zip Code 62034	Amount of Each Receipt this Period 32.65
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
	Name of Employer Olin Corporation - Winchester Occupation V.P.; Mfg. Oper & Planning Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 663.07	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>147.94</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Olin Corporation Good Government Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Elaine K Patterson	Date of Receipt MM / DD / YYYY 10 / 31 / 2010
	Mailing Address 7708 Ashley Oaks Dr	<b>Transaction ID:</b> SA11AI.4804
	City State Zip Code Chattanooga TN 37421	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
Name of Employer Olin Corporation	Occupation Director, Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Elaine K Patterson	Date of Receipt MM / DD / YYYY 11 / 15 / 2010
	Mailing Address 7708 Ashley Oaks Dr	<b>Transaction ID:</b> SA11AI.4826
	City State Zip Code Chattanooga TN 37421	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
Name of Employer Olin Corporation	Occupation Director, Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Joseph D Rupp	Date of Receipt MM / DD / YYYY 10 / 31 / 2010
	Mailing Address 10918 Conway Road	<b>Transaction ID:</b> SA11AI.4815
	City State Zip Code Frontenac MO 63131	Amount of Each Receipt this Period 293.34
	FEC ID number of contributing federal political committee. <b>C</b>	Contribution
Name of Employer Olin Corporation	Occupation Chairman; President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2933.40	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>443.34</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Olin Corporation Good Government Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Joseph D Rupp	Date of Receipt MM / DD / YYYY 11 / 15 / 2010
	Mailing Address 10918 Conway Road	<b>Transaction ID:</b> SA11AI.4837
	City State Zip Code Frontenac MO 63131	Amount of Each Receipt this Period 146.67
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer Olin Corporation	Occupation Chairman; President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3080.07	

<b>B.</b>	Full Name (Last, First, Middle Initial) Julia T Saunders	Date of Receipt MM / DD / YYYY 10 / 31 / 2010
	Mailing Address 1600 Leeland Way	<b>Transaction ID:</b> SA11AI.4805
	City State Zip Code Knoxville TN 37919	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer Olin Chlor Alkali Products	Occupation Mgr.; Logistics	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Julia T Saunders	Date of Receipt MM / DD / YYYY 11 / 15 / 2010
	Mailing Address 1600 Leeland Way	<b>Transaction ID:</b> SA11AI.4827
	City State Zip Code Knoxville TN 37919	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Contribution
Name of Employer Olin Chlor Alkali Products	Occupation Mgr.; Logistics	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	221.67
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Olin Corporation Good Government Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) David A Scholes		Date of Receipt
	Mailing Address 8725 Briar Patch Ln		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 3 1 / 2 0 1 0
	City	State	Zip Code
	Ooltewah	TN	37363
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4807
Name of Employer Olin Corporation		Occupation V.P., Manufacturing Technology	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 200.00
		<input type="text"/> 700.00	Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) David A Scholes		Date of Receipt
	Mailing Address 8725 Briar Patch Ln		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 5 / 2 0 1 0
	City	State	Zip Code
	Ooltewah	TN	37363
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4829
Name of Employer Olin Corporation		Occupation V.P., Manufacturing Technology	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 800.00	Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Jon E Thorstenson		Date of Receipt
	Mailing Address 57 Middle Creek		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 5 / 2 0 1 0
	City	State	Zip Code
	Signal Mountain	TN	37377
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4838
Name of Employer Olin Chlor Alkali Products		Occupation V.P.; Sales & Marketing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 10.00
		<input type="text"/> 210.00	Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 310.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 15	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Olin Corporation Good Government Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas E Tirabassi		Date of Receipt																					
	Mailing Address 3153 Reflection Lane		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	5	/	2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	1	5	/	2	0	1	0														
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4833																				
	Ooltewah	TN	37363	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		<b>C</b>	10.00																					
Name of Employer Olin Chlor Alkali Products		Occupation Dir.; Logistics	Contribution																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	210.00																					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1252.95

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Olin Corporation Good Government Fund

A.	Full Name (Last, First, Middle Initial) Marsha Blackburn	Transaction ID: SB23.4853 Date of Disbursement 10 / 15 / 2010
	Mailing Address Blackburn for Congress 700 12th St., N.W., Ste. 700	Amount of Each Disbursement this Period 1000.00
	City: Washington State: DC Zip Code: 20005	
	Purpose of Disbursement: Contribution Candidate Name: Marsha Blackburn Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: DC District: 07	Category/Type: 011

B.	Full Name (Last, First, Middle Initial) BOB CORKER FOR SENATE	Transaction ID: SB23.4852 Date of Disbursement 10 / 15 / 2010
	Mailing Address PO BOX 848	Amount of Each Disbursement this Period 1000.00
	City: CHATTANOOGA State: TN Zip Code: 37401	
	Purpose of Disbursement: Contribution Candidate Name: BOB CORKER FOR SENATE Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 00	Category/Type: 011

C.	Full Name (Last, First, Middle Initial) Chuck Fleishman	Transaction ID: SB23.4849 Date of Disbursement 10 / 15 / 2010
	Mailing Address Chuck Fleishman for Congress 700 Market Street	Amount of Each Disbursement this Period 1000.00
	City: Chattanooga State: TN Zip Code: 37402	
	Purpose of Disbursement: Contribution Candidate Name: Chuck Fleishman Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 03	Category/Type: 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Olin Corporation Good Government Fund

A.	Full Name (Last, First, Middle Initial) Phil Gingrey	Transaction ID: SB23.4859 Date of Disbursement 10 / 15 / 2010
	Mailing Address Gingrey for Congress 700 12th St., N.W., Ste 700	Amount of Each Disbursement this Period 1000.00
	City: Washington State: DC Zip Code: 20005	
	Purpose of Disbursement: Contribution Candidate Name: Phil Gingrey Category/Type: 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: DC District: 11	

B.	Full Name (Last, First, Middle Initial) Bill Haslam	Transaction ID: SB23.4847 Date of Disbursement 10 / 15 / 2010
	Mailing Address Bill Haslam for Governor 1701 West End Av., Ste. 300	Amount of Each Disbursement this Period 2000.00
	City: Nashville State: TN Zip Code: 37203	
	Purpose of Disbursement: Contribution Candidate Name: Bill Haslam Category/Type: 011	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District:	

C.	Full Name (Last, First, Middle Initial) Jan Cook Campaign	Transaction ID: SB23.4863 Date of Disbursement 10 / 19 / 2010
	Mailing Address P.O. Box 124	Amount of Each Disbursement this Period 500.00
	City: Dozier State: AL Zip Code: 36102	
	Purpose of Disbursement: Contribution Candidate Name: Jan Cook Campaign Category/Type: 011	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AL District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Olin Corporation Good Government Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Marc Keahey</p> <p>Mailing Address Marc Keahey for Senate 3511 Montlimar Plaza Dr.</p> <p>City State Zip Code Mobile AL 36616</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name Marc Keahey</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AL District: 22</p>	<p><b>Transaction ID:</b> SB23.4861 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">500.00</span></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Susan Parker</p> <p>Mailing Address Susan Parker for PSC 655 York Drive</p> <p>City State Zip Code Rogersville AL 35652</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name Susan Parker</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AL District:</p>	<p><b>Transaction ID:</b> SB23.4866 <b>Date of Disbursement</b> 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">1500.00</span></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Republican State Senate Campaign Committee (RSSCC)</p> <p>Mailing Address P.O. Box 3422</p> <p>City State Zip Code Springfield IL 62708</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name Republican State Senate Campaign Committee (RSSCC)</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p><b>Transaction ID:</b> SB23.4855 <b>Date of Disbursement</b> 10 / 08 / 2010</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">1000.00</span></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**3000.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Olin Corporation Good Government Fund

A.

Full Name (Last, First, Middle Initial)  
David Vitter

Transaction ID: SB23.4857  
Date of Disbursement

Mailing Address Vitter for Senate  
2644 North Causewa Blvd.

10 / 15 / 2010

City Metairie State LA Zip Code 70002

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement  
Contribution

011  
Category/  
Type

Candidate Name  
David Vitter

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: LA District:

SUBTOTAL of Disbursements This Page (optional) ..... ▶

1000.00

TOTAL This Period (last page this line number only) ..... ▶

10500.00