

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) 427 N. Shamrock Street
Check if different than previously reported. (ACC) East Alton IL 62024

2. **FEC IDENTIFICATION NUMBER** 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:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2007 through 12 31 2007

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 Edward J. Krygier, Jr.

Signature of Treasurer Electronically Filed by Edward J. Krygier, Jr. Date 01 28 2008

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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
OLIN CORPORATION GOOD GOVERNMENT FUND

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		33908.33
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	38590.35									
(c) Total Receipts (from Line 19)	5034.44	9816.46								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	43624.79	43724.79								
7. Total Disbursements (from Line 31)	1142.98	1242.98								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	42481.81	42481.81								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
OLIN CORPORATION GOOD GOVERNMENT FUND

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	2904.11	4768.38
(i) Itemized (use Schedule A)	2130.33	5048.08
(ii) Unitemized	5034.44	9816.46
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	5034.44	9816.46
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))	5034.44	9816.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5034.44	9816.46

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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.....	1142.98	1242.98
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))..	1142.98	1242.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1142.98	1242.98

DETAILED SUMMARY PAGE
of Disbursements

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)	5034.44	9816.46
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5034.44	9816.46
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
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	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 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

A. Full Name (Last, First, Middle Initial)
Mr. Hassan Arabghani

Mailing Address 5535 Mountain Breeze Drive

City State Zip Code
Chattanooga TN 37421

FEC ID number of contributing federal political committee. **C**

Name of Employer: Olin Corporation, Chlor Alkali
Occupation: VP, Bus Dev & Strategy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt: 12 / 31 / 2007
Transaction ID: SA11AI.4630
 Amount of Each Receipt this Period: 18.00
 Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Dennis R. McGough

Mailing Address 13319 Fairfield Circle Drive

City State Zip Code
Town and Country MO 63017

FEC ID number of contributing federal political committee. **C**

Name of Employer: Olin Corporation
Occupation: VP Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 07 / 31 / 2007
Transaction ID: SA11AI.4446
 Amount of Each Receipt this Period: 50.00
 Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Dennis R. McGough

Mailing Address 13319 Fairfield Circle Drive

City State Zip Code
Town and Country MO 63017

FEC ID number of contributing federal political committee. **C**

Name of Employer: Olin Corporation
Occupation: VP Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 08 / 31 / 2007
Transaction ID: SA11AI.4488
 Amount of Each Receipt this Period: 50.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► 118.00

TOTAL 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 / 19
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Dennis R. McGough		Date of Receipt
	Mailing Address 13319 Fairfield Circle Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 30 / 2007
	City	State	Zip Code
	Town and Country	MO	63017
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4531
Name of Employer Olin Corporation		Occupation VP Human Resources	Amount of Each Receipt this Period <input type="text"/> 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 450.00	Payroll Deduction

B.	Full Name (Last, First, Middle Initial) Mr. Dennis R. McGough		Date of Receipt
	Mailing Address 13319 Fairfield Circle Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 10 / 31 / 2007
	City	State	Zip Code
	Town and Country	MO	63017
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4572
Name of Employer Olin Corporation		Occupation VP Human Resources	Amount of Each Receipt this Period <input type="text"/> 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 500.00	Payroll Deduction

C.	Full Name (Last, First, Middle Initial) Mr. Dennis R. McGough		Date of Receipt
	Mailing Address 13319 Fairfield Circle Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 11 / 30 / 2007
	City	State	Zip Code
	Town and Country	MO	63017
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4611
Name of Employer Olin Corporation		Occupation VP Human Resources	Amount of Each Receipt this Period <input type="text"/> 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 550.00	Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.00
TOTAL 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 8 / 19
(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"/> 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

A. Full Name (Last, First, Middle Initial)
Mr. Dennis R. McGough

Mailing Address 13319 Fairfield Circle Drive

City State Zip Code
Town and Country MO 63017

FEC ID number of contributing federal political committee. **C**

Name of Employer: Olin Corporation
Occupation: VP Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: MM / DD / YYYY
12 / 31 / 2007

Transaction ID: SA11AI.4643

Amount of Each Receipt this Period: 50.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Daniel O'Keefe

Mailing Address 1800 Lincoln Knolls

City State Zip Code
Edwardsville IL 62025

FEC ID number of contributing federal political committee. **C**

Name of Employer: Olin Corporation, Brass Div.
Occupation: Dir., Mill Prod Mfgr.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: MM / DD / YYYY
11 / 30 / 2007

Transaction ID: SA11AI.4590

Amount of Each Receipt this Period: 20.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Thomas J. O'Keefe

Mailing Address 336 Westminster

City State Zip Code
Glen Carbon IL 62034

FEC ID number of contributing federal political committee. **C**

Name of Employer: Olin Corporation - Winchester
Occupation: VP, Manufacturing Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 383.25

Date of Receipt: MM / DD / YYYY
07 / 31 / 2007

Transaction ID: SA11AI.4457

Amount of Each Receipt this Period: 54.75

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► 124.75

TOTAL 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: PAGE 9 / 19
(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"/> 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

A.

Full Name (Last, First, Middle Initial)
Mr. Thomas J. O'Keefe

Mailing Address 336 Westminster

City State Zip Code
Glen Carbon IL 62034

FEC ID number of contributing federal political committee. **C**

Name of Employer
Olin Corporation - Winchester

Occupation
VP, Manufacturing Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
438.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2007

Transaction ID: SA11AI.4500

Amount of Each Receipt this Period
54.75

Payroll Deduction

B.

Full Name (Last, First, Middle Initial)
Mr. Thomas J. O'Keefe

Mailing Address 336 Westminster

City State Zip Code
Glen Carbon IL 62034

FEC ID number of contributing federal political committee. **C**

Name of Employer
Olin Corporation - Winchester

Occupation
VP, Manufacturing Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
494.94

Date of Receipt
MM / DD / YYYY
09 / 30 / 2007

Transaction ID: SA11AI.4542

Amount of Each Receipt this Period
56.94

Payroll Deduction

C.

Full Name (Last, First, Middle Initial)
Mr. Thomas J. O'Keefe

Mailing Address 336 Westminster

City State Zip Code
Glen Carbon IL 62034

FEC ID number of contributing federal political committee. **C**

Name of Employer
Olin Corporation - Winchester

Occupation
VP, Manufacturing Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
551.88

Date of Receipt
MM / DD / YYYY
10 / 31 / 2007

Transaction ID: SA11AI.4583

Amount of Each Receipt this Period
56.94

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► **168.63**

TOTAL 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 / 19
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Thomas J. O'Keefe		Date of Receipt
	Mailing Address 336 Westminster		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Glen Carbon	IL	62034
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Olin Corporation - Winchester		Occupation VP, Manufacturing Ops	Transaction ID: SA11AI.4622
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="608.82"/>	<input type="text" value="56.94"/>
			Payroll Deduction

B.	Full Name (Last, First, Middle Initial) Mr. Thomas J. O'Keefe		Date of Receipt
	Mailing Address 336 Westminster		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Glen Carbon	IL	62034
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Olin Corporation - Winchester		Occupation VP, Manufacturing Ops	Transaction ID: SA11AI.4653
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="665.76"/>	<input type="text" value="56.94"/>
			Payroll Deduction

C.	Full Name (Last, First, Middle Initial) Mr. Juan R. Perez		Date of Receipt
	Mailing Address Calle 45 Bloque 72 #28		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Bayamon	PR	00961
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer A.J. Oster Caribe, Inc.		Occupation VP General Mgr.	Transaction ID: SA11AI.4487
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="207.72"/>	<input type="text" value="28.85"/>
			Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="142.73"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
OLIN CORPORATION GOOD GOVERNMENT FUND

A. Full Name (Last, First, Middle Initial)
Mr. Juan R. Perez

Mailing Address Calle 45 Bloque 72 #28

City Bayamon State PR Zip Code 00961

FEC ID number of contributing federal political committee. **C**

Name of Employer A.J. Oster Caribe, Inc. Occupation VP General Mgr.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.80

Date of Receipt 09 / 30 / 2007
Transaction ID: SA11AI.4530
Amount of Each Receipt this Period 23.08
Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Juan R. Perez

Mailing Address Calle 45 Bloque 72 #28

City Bayamon State PR Zip Code 00961

FEC ID number of contributing federal political committee. **C**

Name of Employer A.J. Oster Caribe, Inc. Occupation VP General Mgr.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 253.88

Date of Receipt 10 / 31 / 2007
Transaction ID: SA11AI.4571
Amount of Each Receipt this Period 23.08
Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Juan R. Perez

Mailing Address Calle 45 Bloque 72 #28

City Bayamon State PR Zip Code 00961

FEC ID number of contributing federal political committee. **C**

Name of Employer A.J. Oster Caribe, Inc. Occupation VP General Mgr.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 288.50

Date of Receipt 11 / 30 / 2007
Transaction ID: SA11AI.4610
Amount of Each Receipt this Period 34.62
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► 80.78

TOTAL 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: PAGE 12 / 19
(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"/>	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

A. Full Name (Last, First, Middle Initial)
Mr. Juan R. Perez

Mailing Address Calle 45 Bloque 72 #28

City Bayamon State PR Zip Code 00961

FEC ID number of contributing federal political committee. **C**

Name of Employer A.J. Oster Caribe, Inc. Occupation VP General Mgr.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.04

Date of Receipt: 12 / 31 / 2007

Transaction ID: SA11AI.4627

Amount of Each Receipt this Period: 11.54

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Mr. Joseph D. Rupp

Mailing Address 10918 Conway Road

City Frontenac State MO Zip Code 63131

FEC ID number of contributing federal political committee. **C**

Name of Employer Olin Corporation Occupation Chmn., Pres. & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1873.36

Date of Receipt: 07 / 31 / 2007

Transaction ID: SA11AI.4447

Amount of Each Receipt this Period: 273.34

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Mr. Joseph D. Rupp

Mailing Address 10918 Conway Road

City Frontenac State MO Zip Code 63131

FEC ID number of contributing federal political committee. **C**

Name of Employer Olin Corporation Occupation Chmn., Pres. & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2146.70

Date of Receipt: 08 / 31 / 2007

Transaction ID: SA11AI.4489

Amount of Each Receipt this Period: 273.34

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 558.22

TOTAL 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: PAGE 13 / 19
(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"/> 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

A.

Full Name (Last, First, Middle Initial) Mr. Joseph D. Rupp		Date of Receipt MM / DD / YYYY 09 / 30 / 2007
Mailing Address 10918 Conway Road		Transaction ID: SA11AI.4532
City Frontenac	State MO	Zip Code 63131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 273.34
Name of Employer Olin Corporation	Occupation Chmn., Pres. & CEO	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2420.04	

B.

Full Name (Last, First, Middle Initial) Mr. Joseph D. Rupp		Date of Receipt MM / DD / YYYY 10 / 31 / 2007
Mailing Address 10918 Conway Road		Transaction ID: SA11AI.4573
City Frontenac	State MO	Zip Code 63131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 273.34
Name of Employer Olin Corporation	Occupation Chmn., Pres. & CEO	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2693.38	

C.

Full Name (Last, First, Middle Initial) Mr. Joseph D. Rupp		Date of Receipt MM / DD / YYYY 11 / 30 / 2007
Mailing Address 10918 Conway Road		Transaction ID: SA11AI.4612
City Frontenac	State MO	Zip Code 63131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 273.34
Name of Employer Olin Corporation	Occupation Chmn., Pres. & CEO	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2966.72	

SUBTOTAL of Receipts This Page (optional)	▶	820.02
TOTAL 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 14 / 19
	<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

A.	Full Name (Last, First, Middle Initial) Mr. Joseph D. Rupp		Date of Receipt
	Mailing Address 10918 Conway Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 1 / 2 0 0 7
	City	State	Zip Code
	Frontenac	MO	63131
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4644
Name of Employer Olin Corporation		Occupation Chmn., Pres. & CEO	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 ▼ 3240.06	<input type="text"/> 273.34
Payroll Deduction			

B.	Full Name (Last, First, Middle Initial) Ms. Julia T. Saunders		Date of Receipt
	Mailing Address 1600 Leeland Way		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 7 / 3 1 / 2 0 0 7
	City	State	Zip Code
	Knoxville	TN	37919
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4440
Name of Employer Olin Corporation, Chlor Alkali		Occupation Mgr., Transportation	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 ▼ 250.00	<input type="text"/> 50.00
Payroll Deduction			

C.	Full Name (Last, First, Middle Initial) Ms. Julia T. Saunders		Date of Receipt
	Mailing Address 1600 Leeland Way		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 3 1 / 2 0 0 7
	City	State	Zip Code
	Knoxville	TN	37919
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4482
Name of Employer Olin Corporation, Chlor Alkali		Occupation Mgr., Transportation	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 ▼ 300.00	<input type="text"/> 50.00
Payroll Deduction			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 373.34
TOTAL 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 15 / 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
OLIN CORPORATION GOOD GOVERNMENT FUND

A. Full Name (Last, First, Middle Initial)
Ms. Julia T. Saunders

Mailing Address 1600 Leeland Way

City State Zip Code
Knoxville TN 37919

FEC ID number of contributing federal political committee. **C**

Name of Employer: Olin Corporation, Chlor Alkali
Occupation: Mgr., Transportation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 09 / 30 / 2007
Transaction ID: SA11AI.4525
 Amount of Each Receipt this Period: 50.00
 Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Ms. Julia T. Saunders

Mailing Address 1600 Leeland Way

City State Zip Code
Knoxville TN 37919

FEC ID number of contributing federal political committee. **C**

Name of Employer: Olin Corporation, Chlor Alkali
Occupation: Mgr., Transportation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 31 / 2007
Transaction ID: SA11AI.4566
 Amount of Each Receipt this Period: 50.00
 Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Ms. Julia T. Saunders

Mailing Address 1600 Leeland Way

City State Zip Code
Knoxville TN 37919

FEC ID number of contributing federal political committee. **C**

Name of Employer: Olin Corporation, Chlor Alkali
Occupation: Mgr., Transportation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 11 / 30 / 2007
Transaction ID: SA11AI.4605
 Amount of Each Receipt this Period: 50.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► 150.00

TOTAL 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: PAGE 16 / 19

(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"/> 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

A.

Full Name (Last, First, Middle Initial)
Ms. Julia T. Saunders

Mailing Address 1600 Leeland Way

City State Zip Code
Knoxville TN 37919

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Olin Corporation, Chlor Mgr., Transportation
Alkali

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.4638

Amount of Each Receipt this Period
50.00

Payroll Deduction

B.

Full Name (Last, First, Middle Initial)
Yekaterina Torban

Mailing Address 437 Westland Avenue

City State Zip Code
Cheshire CT 06410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Metals Resh Lab, Olin Bra- Research Scientist
ss

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 212.46

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.4449

Amount of Each Receipt this Period
30.48

Payroll Deduction

C.

Full Name (Last, First, Middle Initial)
Yekaterina Torban

Mailing Address 437 Westland Avenue

City State Zip Code
Cheshire CT 06410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Metals Resh Lab, Olin Bra- Research Scientist
ss

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 242.94

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.4491

Amount of Each Receipt this Period
30.48

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

110.96

TOTAL 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: PAGE 17 / 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
OLIN CORPORATION GOOD GOVERNMENT FUND

A. Full Name (Last, First, Middle Initial)
Yekaterina Torban

Mailing Address 437 Westland Avenue

City State Zip Code
Cheshire CT 06410

FEC ID number of contributing federal political committee. **C**

Name of Employer: Metals Resh Lab, Olin Brass
Occupation: Research Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 273.42

Date of Receipt: 09 / 30 / 2007
Transaction ID: SA11AI.4534
 Amount of Each Receipt this Period: 30.48
 Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Yekaterina Torban

Mailing Address 437 Westland Avenue

City State Zip Code
Cheshire CT 06410

FEC ID number of contributing federal political committee. **C**

Name of Employer: Metals Resh Lab, Olin Brass
Occupation: Research Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 303.90

Date of Receipt: 10 / 31 / 2007
Transaction ID: SA11AI.4575
 Amount of Each Receipt this Period: 30.48
 Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Yekaterina Torban

Mailing Address 437 Westland Avenue

City State Zip Code
Cheshire CT 06410

FEC ID number of contributing federal political committee. **C**

Name of Employer: Metals Resh Lab, Olin Brass
Occupation: Research Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 334.38

Date of Receipt: 11 / 30 / 2007
Transaction ID: SA11AI.4595
 Amount of Each Receipt this Period: 30.48
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► 91.44

TOTAL 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: PAGE 18 / 19
(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"/>	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

A.

Full Name (Last, First, Middle Initial)
Yekaterina Torban

Mailing Address 437 Westland Avenue

City State Zip Code
Cheshire CT 06410

FEC ID number of contributing federal political committee. **C**

Name of Employer
Metals Resh Lab, Olin Brass

Occupation
Research Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
349.62

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.4629

Amount of Each Receipt this Period
15.24

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	15.24
TOTAL This Period (last page this line number only)	▶	2904.11

**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)

PAGE 19 / 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" 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) Citizens for Frank Watson	Transaction ID: SB29.4658 Date of Disbursement
	Mailing Address P.O. Box 391	<input type="text" value="12"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Greenville State IL Zip Code 62246	Amount of Each Disbursement this Period
	Purpose of Disbursement Non-federal contribution to Frank Watson	<input type="text" value="1000.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Global Brass and Copper, Inc.	Transaction ID: SB29.4656 Date of Disbursement
	Mailing Address 427 N. Shamrock Street	<input type="text" value="12"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City East Alton State IL Zip Code 62024	Amount of Each Disbursement this Period
	Purpose of Disbursement Reimburse for inadvertent wire transfer	<input type="text" value="142.98"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1142.98"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1142.98"/>