

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
OLIN CORPORATION GOOD GOVERNMENT FUND

ADDRESS (number and street) **190 CARONDELET PLAZA**
SUITE 1530
 Check if different than previously reported. (ACC) **CLAYTON MO 63105**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C 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 Year-End 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 (12S)
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 / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
SLATER, TODD, , ,
Type or Print Name of Treasurer

Signature of Treasurer SLATER, TODD, , , [Electronically Filed] Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

OLIN CORPORATION GOOD GOVERNMENT FUND

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>	<input type="text" value="44746.50"/>	<input type="text" value="44746.50"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="37339.97"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="8281.20"/>	<input type="text" value="51348.95"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="45621.17"/>	<input type="text" value="96095.45"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2500.00"/>	<input type="text" value="52974.28"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="43121.17"/>	<input type="text" value="43121.17"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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: / / To: / /

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).....	7961.20	40309.95
(ii) Unitemized	320.00	11039.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8281.20	51348.95
(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)	8281.20	51348.95
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 Transfers (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)).....▶	8281.20	51348.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	8281.20	51348.95

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	474.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	474.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	47500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	5000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	2500.00	52974.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2500.00	52974.28

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

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)	8281.20	51348.95
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8281.20	51348.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	474.28
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	474.28

**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 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. COSMI, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13109 HARBORVIEW DR
 City LINDEN State MI Zip Code 48451-9496
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE CUBE OPERATIONS Occupation (for Individual) VP GLOBAL EPOXY R&D/MID/DOWN
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 960.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A08ADA290BB6D4E5B9F0
 Amount of Each Receipt this Period 160.00
 Memo Item
 PAYROLL DEDUCTION: \$80.00/MONTHLY

B. VERMILLION, TERESA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12984 FIDDLE CREEK LN
 City SAINT LOUIS State MO Zip Code 63131-1721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) VP & TREASURER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2120.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A44DEDA6E01C94BC2981
 Amount of Each Receipt this Period 500.00
 Memo Item
 PAYROLL DEDUCTION: \$250.00/MONTHLY

C. LEDOUX, STEPHEN, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22767 LIGON RD
 City ZACHARY State LA Zip Code 70791-6919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE CUBE OPERATIONS LLC Occupation (for Individual) MFG DIRECTOR LAO/MCINTOSH
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 600.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A391DBF7B84504705906
 Amount of Each Receipt this Period 100.00
 Memo Item
 PAYROLL DEDUCTION: \$50.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	760.00
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 OF 24
	<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. ANZIANO, CHRISTOPHER, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 181 ABSHIRE LN NE
 City CLEVELAND State TN Zip Code 37323-4427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS Occupation (for Individual) DIRECTOR C/A TECH CENTER DEVL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 31 / 2022
Transaction ID : AC53E6D400DDC4CDBA9
 Amount of Each Receipt this Period 100.00
 Memo Item
 PAYROLL DEDUCTION: \$50.00/MONTHLY

B. TRAGER, RICHARD, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11191 EVERGREEN LN
 City CHARLEVOIX State MI Zip Code 49720-8513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE CUBE OPERATIONS LLC Occupation (for Individual) VP, GLOBAL SERVICES & REAL EST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 31 / 2022
Transaction ID : AEB98298DAFA146FFB0E
 Amount of Each Receipt this Period 0.00
 Memo Item
 PAYROLL DEDUCTION: \$0.00/MONTHLY

C. SLATER, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6229 TIMBERWOLFE DR
 City GLEN CARBON State IL Zip Code 62034-1381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) SVP CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3600.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A8F1A726D0C194753A86
 Amount of Each Receipt this Period 800.00
 Memo Item
 PAYROLL DEDUCTION: \$400.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	900.00
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 8 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. AUDET, MARC, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2428 UNIVERSITY CLUB DR
 City BATON ROUGE State LA Zip Code 70810-0442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS Occupation (for Individual) MFG DIRECTOR REGION BLEACH/QI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 12 / 31 / 2022
Transaction ID : AB3A5D174BEBC42A69E0
 Amount of Each Receipt this Period 60.00
 Memo Item
 PAYROLL DEDUCTION: \$30.00/MONTHLY

B. CASHWELL, JAMES, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7335 LAZY BROOK CT
 City OOLTEWAH State TN Zip Code 37363-9477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) DIRECTOR ENVIROMENTAL REMED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 31 / 2022
Transaction ID : ACA919136F48A45B0949
 Amount of Each Receipt this Period 200.00
 Memo Item
 PAYROLL DEDUCTION: \$100.00/MONTHLY

C. MEENAN, JOHN, MICHAEL, , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3501 SHEPHERD ST
 City CHEVY CHASE State MD Zip Code 20815-3221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) DIRECTOR GLOBAL GOVERNMENT A
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 12 / 31 / 2022
Transaction ID : AB6E1962AC39741FD992
 Amount of Each Receipt this Period 300.00
 Memo Item
 PAYROLL DEDUCTION: \$150.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	560.00
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 9 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. MEISTER, MATTHEW, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 338 CAROLINE AVE
 City KIRKWOOD State MO Zip Code 63122-5645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) DIRECTOR DOMESTIC TAX PLNG & C
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2022
Transaction ID : AF58FBDFBD5C4AE183C
 Amount of Each Receipt this Period 40.00
 Memo Item
 PAYROLL DEDUCTION: \$20.00/MONTHLY

B. FIEHLER, KURT, JOSEPH, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1233 LAVEN DEL LN
 City SAINT LOUIS State MO Zip Code 63122-1131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) SR. COUNSEL- EPOXY AND INTERN.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A881C5B3B864B483090A
 Amount of Each Receipt this Period 40.00
 Memo Item
 PAYROLL DEDUCTION: \$20.00/MONTHLY

C. WHIGHAM, LESLIE, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 SWAFFORD CEMETERY RD
 City GEORGETOWN State TN Zip Code 37336-4649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS Occupation (for Individual) VP GLOBAL CHLOR ALKALI
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A908E8778A3644C5BAE6
 Amount of Each Receipt this Period 100.00
 Memo Item
 PAYROLL DEDUCTION: \$50.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	180.00
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 10 OF 24
	<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. WERTS, JODI, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 633 PLEASANT VIEW DR
 City LANCASTER State NY Zip Code 14086-1506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS Occupation (for Individual) DIRECTOR HR EAST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A7FF31E6528504E878C7
 Amount of Each Receipt this Period 80.00
 Memo Item
 PAYROLL DEDUCTION: \$40.00/MONTHLY

B. PFEIFER, CRAIG, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 HOLLINGERS IS
 City KATY State TX Zip Code 77450-8594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE CUBE OPERATIONS LLC Occupation (for Individual) SR DIRECTOR PROC/DOW SVS/REA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2022
Transaction ID : AC4A85FD1372740899B3
 Amount of Each Receipt this Period 40.00
 Memo Item
 PAYROLL DEDUCTION: \$20.00/MONTHLY

C. GUTERMUTH, MICHELLE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1016 SHADY OAK DR
 City ANGLETON State TX Zip Code 77515-7044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE CUBE OPERATIONS Occupation (for Individual) MFG DIRECTOR GCO/VINYLS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A23402667F2AC4B8FAD3
 Amount of Each Receipt this Period 80.00
 Memo Item
 PAYROLL DEDUCTION: \$40.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	200.00
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 11 OF 24
<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. PETERS, VALERIE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1347 SHOREWINDS TRL
 City SAINT CHARLES State MO Zip Code 63303-4835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) VP HUMAN RESOURCES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2022
Transaction ID : AC954ED7C38E2449CAE6
 Amount of Each Receipt this Period 300.00
 Memo Item
 PAYROLL DEDUCTION: \$150.00/MONTHLY

B. CAGLE, PAUL, A, , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 CHERRYWOOD CT
 City LAKE JACKSON State TX Zip Code 77566-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE CUBE OPERATIONS Occupation (for Individual) SENIOR DIRECTOR GLOBAL EHS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2022
Transaction ID : AD820B6CA529E4E11AF9
 Amount of Each Receipt this Period 200.00
 Memo Item
 PAYROLL DEDUCTION: \$100.00/MONTHLY

C. ALLEN, DENNIS, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 780 WATSON RD
 City SULLIVAN State MO Zip Code 63080-2237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) SENIOR DIRECTOR - INFO & CYBERS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2022
Transaction ID : A7C6781E2F14248E28F6
 Amount of Each Receipt this Period 80.00
 Memo Item
 PAYROLL DEDUCTION: \$40.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	580.00
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 12 OF 24
	<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"/>	<input type="checkbox"/> 17

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

A. BARKER, CHRISTINA, MARIE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1314 WILTON LN
 City KIRKWOOD State MO Zip Code 63122-6941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) VP & CHIEF INFORMATION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 401.25

Date of Receipt 12 / 31 / 2022
Transaction ID : A0A10EB819B0C487FB8D
 Amount of Each Receipt this Period 60.00
 Memo Item
 PAYROLL DEDUCTION: \$30.00/MONTHLY

B. BAILEY, DENNIS, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 W ROSE HILL AVE
 City KIRKWOOD State MO Zip Code 63122-5943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) DIRECTOR IT WINCHESTER SOLUTI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 31 / 2022
Transaction ID : AE353A85406884F298EA
 Amount of Each Receipt this Period 0.00
 Memo Item
 PAYROLL DEDUCTION: \$0.00/MONTHLY

C. WEBB, LLOYD, BYRON, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3152 LAKEWOOD DR NW
 City CLEVELAND State TN Zip Code 37312-2090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS Occupation (for Individual) DIRECTOR COMMERCIAL ENERGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A7BC4B90535A34390921
 Amount of Each Receipt this Period 100.00
 Memo Item
 PAYROLL DEDUCTION: \$50.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	160.00
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 13 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. KIRKPATRICK, ANGIE, S.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4449 MCCOY RD
 City BETHALTO State IL Zip Code 62010-2513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN WINCHESTER Occupation (for Individual) DIRECTOR CUSTOMER FULFILLMEN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 31 / 2022
Transaction ID : AEE5E729B1EB142018EC
 Amount of Each Receipt this Period 100.00
 Memo Item
 PAYROLL DEDUCTION: \$50.00/MONTHLY

B. HASKINS, DAVID, W.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 232 ELLINGTON CT
 City GLEN CARBON State IL Zip Code 62034-1464
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINCHESTER AMMUNITION INC. Occupation (for Individual) VP - HUMAN RESOURCES WINCHES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A1306AF553A60447E8D8
 Amount of Each Receipt this Period 200.00
 Memo Item
 PAYROLL DEDUCTION: \$100.00/MONTHLY

C. CLUCAS, BRIAN, J.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 S BRENTWOOD BLVD APT 12F
 City CLAYTON State MO Zip Code 63105-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) VP AUDIT/ETHICS & COMPLIANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 12 / 31 / 2022
Transaction ID : ACBB30B67F6964229B6B
 Amount of Each Receipt this Period 80.00
 Memo Item
 PAYROLL DEDUCTION: \$40.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	380.00
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 14 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. SHARE, DAVID, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9101 MOUNTAIN SHADE DR
 City CHATTANOOGA State TN Zip Code 37421-7439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) VP ENVIRONMENTAL REMEDIATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A0A603000410E495491C
 Amount of Each Receipt this Period 100.00
 Memo Item
 PAYROLL DEDUCTION: \$50.00/MONTHLY

B. WILSON, GREGORY, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2127 WINDPORT LN
 City SAINT LOUIS State MO Zip Code 63146-2225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE CUBE OPERATIONS LLC Occupation (for Individual) FINANCE DIRECTOR BUSINESS STR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A85EC1FBDBB60402E92C
 Amount of Each Receipt this Period 200.00
 Memo Item
 PAYROLL DEDUCTION: \$100.00/MONTHLY

C. WHITE, LARRY, CHRISTOPHER, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 807 OAK GROVE LN
 City OXFORD State MS Zip Code 38655-0219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN WINCHESTER Occupation (for Individual) DIRECTOR SH&E AND MAINTENNAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A0E21DA9A5C4248C7B05
 Amount of Each Receipt this Period 60.00
 Memo Item
 PAYROLL DEDUCTION: \$30.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	360.00
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 15 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. SCOTT, LEONARD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9234 MOUNTAIN SHADE DR
 City CHATTANOOGA State TN Zip Code 37421-7430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) VP BUSINESS INTERGRATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A030C59CAE2174775BB0
 Amount of Each Receipt this Period 200.00
 Memo Item
 PAYROLL DEDUCTION: \$100.00/MONTHLY

B. CAGLE, DANA, FEAK, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 CHERRYWOOD CT
 City LAKE JACKSON State TX Zip Code 77566-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS Occupation (for Individual) SENIOR DIRECTOR, GLOBAL EHS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 12 / 31 / 2022
Transaction ID : AFAD7E762FFA941879EB
 Amount of Each Receipt this Period 160.00
 Memo Item
 PAYROLL DEDUCTION: \$80.00/MONTHLY

C. KEENAN, STEPHEN, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1516 MISSISSIPPI AVE
 City SAINT LOUIS State MO Zip Code 63104-2512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) DIRECTOR INVESTOR RELATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 12 / 31 / 2022
Transaction ID : AB2C2D87F3BA046AEB5C
 Amount of Each Receipt this Period 80.00
 Memo Item
 PAYROLL DEDUCTION: \$40.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	440.00
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 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. SZOTS, FRANCOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 FIALA WOODS CT
 City NAPERVILLE State IL Zip Code 60565-6369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS Occupation (for Individual) SENIOR DIRECTOR CONTROLLER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A29375B9D143942CCBF5
 Amount of Each Receipt this Period 84.00
 Memo Item
 PAYROLL DEDUCTION: \$42.00/MONTHLY

B. BOERNER, DAVE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 POPPY CT
 City LAKE JACKSON State TX Zip Code 77566-3270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE CUBE OPERATIONS LLC Occupation (for Individual) LEADER, PRODUCT PLANNING TXO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A6569623CBD6F43179B9
 Amount of Each Receipt this Period 100.00
 Memo Item
 PAYROLL DEDUCTION: \$50.00/MONTHLY

C. HUGHES, ANDREW, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 CREEKSIDE LN
 City LAKE JACKSON State TX Zip Code 77566-4688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE CUBE OPERATIONS Occupation (for Individual) PRODUCTION LEADER - CMP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A4610B5C4D590477FB5C
 Amount of Each Receipt this Period 80.00
 Memo Item
 PAYROLL DEDUCTION: \$40.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	264.00
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 17 OF 24
	<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. BRANTLEY, JEFFREY, ALLEN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 187 CHAMPION DR NW
 City CLEVELAND State TN Zip Code 37312-7134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) DIRECTOR - M&E SOLUTIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2022
Transaction ID : AF916B833AA8F48D1A15
 Amount of Each Receipt this Period 40.00
 Memo Item
 PAYROLL DEDUCTION: \$20.00/MONTHLY

B. O'CALLAGHAN, CHRISTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1115 BENT TREE TRAILS DR
 City FENTON State MO Zip Code 63026-2348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) GLOBAL COMMUNICATIONS DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 12 / 31 / 2022
Transaction ID : AC768B09314F440CFA73
 Amount of Each Receipt this Period 100.00
 Memo Item
 PAYROLL DEDUCTION: \$50.00/MONTHLY

C. SUMNER, RANDEE, NICHOLE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 WARWICK PARK LN
 City EDWARDSVILLE State IL Zip Code 62025-3892
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) VP & CONTROLLER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1620.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A8C7ABDE9A4CA434ABB0
 Amount of Each Receipt this Period 340.00
 Memo Item
 PAYROLL DEDUCTION: \$170.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	480.00
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 18 OF 24
<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. TUBRE, JACLYN, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4831 WILKINSON LN

City MANVEL	State TX	Zip Code 77578-1757
----------------	-------------	------------------------

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

Name of Employer (for Individual) BLUE CUBE OPERATIONS LLC	Occupation (for Individual) TEXAS SITE OPERATIONS LEADER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2022

Transaction ID : AD70D1B58AF8548CB9E0

Amount of Each Receipt this Period
200.00

Memo Item
PAYROLL DEDUCTION: \$100.00/MONTHLY

B. BAKER, TIMOTHY, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12407 SOMERSWORTH DR

City KNOXVILLE	State TN	Zip Code 37934-4542
-------------------	-------------	------------------------

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

Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS	Occupation (for Individual) DIRECTOR QUALITY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2022

Transaction ID : AD57DF489BC554E738FC

Amount of Each Receipt this Period
160.00

Memo Item
PAYROLL DEDUCTION: \$80.00/MONTHLY

C. GREENE, NICHOLAS, EUGENE, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 126 OXMOOR RDG

City OXFORD	State MS	Zip Code 38655-6033
----------------	-------------	------------------------

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

Name of Employer (for Individual) WINCHESTER AMMUNITION INC.	Occupation (for Individual) DIRECTOR OF HUMAN RESOURCES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2022

Transaction ID : A55DFBCD55BF34EB68D6

Amount of Each Receipt this Period
100.00

Memo Item
PAYROLL DEDUCTION: \$50.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	460.00
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 19 OF 24
	<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. STOCK, MICHAEL, E., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 PIN OAK DR
 City OXFORD State MS Zip Code 38655-6053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN WINCHESTER Occupation (for Individual) GENERAL MANAGER OXFORD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1210.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A3365A98A5EE340EC946
 Amount of Each Receipt this Period 220.00
 Memo Item
 PAYROLL DEDUCTION: \$110.00/MONTHLY

B. BAHR, DARREN, WESLEY, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1558 TREHERNE CT
 City CHESTERFIELD State MO Zip Code 63017-5527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) SENIOR DIRECTOR FINANCE & OPR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A5360B3C0A018496A94D
 Amount of Each Receipt this Period 40.00
 Memo Item
 PAYROLL DEDUCTION: \$20.00/MONTHLY

C. MUSE, ELIZABETH, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37315 CYPRESS HOLLOW AVE
 City PRAIRIEVILLE State LA Zip Code 70769-4425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS Occupation (for Individual) DIRECTOR GLOBAL PROCESS SAFE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 31 / 2022
Transaction ID : AF4ABE153B968471680E
 Amount of Each Receipt this Period 200.00
 Memo Item
 PAYROLL DEDUCTION: \$100.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	460.00
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 20 OF 24
	<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. SUTTON, SCOTT, MCDOUGALD, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 CHATEAU OAKS
 City SAINT LOUIS State MO Zip Code 63124-1674
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) CHAIRMAN PRESIDENT & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4615.20

Date of Receipt 12 / 31 / 2022
Transaction ID : A6519678DBA9E4C2CBB0
 Amount of Each Receipt this Period 769.20
 Memo Item
 PAYROLL DEDUCTION: \$384.60/MONTHLY

B. BROWN, RICHARD, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2904 JEFFREY LN
 City MIDLAND State MI Zip Code 48640-2471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE CUBE OPERATIONS Occupation (for Individual) GCO COMMERCIAL DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A2F3730E7FEB6439C85B
 Amount of Each Receipt this Period 100.00
 Memo Item
 PAYROLL DEDUCTION: \$50.00/MONTHLY

C. PONSLER, TIMOTHY, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3462 ANTELOPE DR
 City WATERLOO State IL Zip Code 62298-6057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS Occupation (for Individual) VP FINANCE OLIN CAPV
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A0B7AEB971A624E47856
 Amount of Each Receipt this Period 120.00
 Memo Item
 PAYROLL DEDUCTION: \$60.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	989.20
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 21 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. TITLE, GEORGE, A, , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2305 NW WILLOW ST

City BENTONVILLE	State AR	Zip Code 72712-4491
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WINCHESTER AMMUNITION INC.	Occupation (for Individual) BUSINESS MGR - RETAIL SALES
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2022

Transaction ID : A48D3F928082F4488910

Amount of Each Receipt this Period
100.00

Memo Item
PAYROLL DEDUCTION: \$50.00/MONTHLY

B. COOK, KARIN, SANTOS, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 170 WINDING GLEN DR NW

City CLEVELAND	State TN	Zip Code 37312-6390
-------------------	-------------	------------------------

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

Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS	Occupation (for Individual) PLANT MANAGER - CAPV
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2022

Transaction ID : A5720E6AA25A744F48D2

Amount of Each Receipt this Period
200.00

Memo Item
PAYROLL DEDUCTION: \$100.00/MONTHLY

C. LISSONE, CONSTANTIJN, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1519 TOWER GROVE AVE
APT 2724

City SAINT LOUIS	State MO	Zip Code 63110-2279
---------------------	-------------	------------------------

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

Name of Employer (for Individual) OLIN CORPORATION	Occupation (for Individual) DIRECTOR GLOBAL TAX REPORT/CC
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2022

Transaction ID : A1F5EB71F397C488FAC9

Amount of Each Receipt this Period
40.00

Memo Item
PAYROLL DEDUCTION: \$20.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	340.00
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 22 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. HOLM, NORMA, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 260 25TH ST NE
 APT 3023
 City CLEVELAND State TN Zip Code 37311-3988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS Occupation (for Individual) DIRECTOR HUMAN RESOURCES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2022
Transaction ID : AFF51ED6898434125B24
 Amount of Each Receipt this Period 40.00
 Memo Item
 PAYROLL DEDUCTION: \$20.00/MONTHLY

B. PLAYLE, DARREN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 DEFIANCE RD
 City DEFIANCE State MO Zip Code 63341-2811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) VP GLOBAL TAX
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2022
Transaction ID : AE8CEF9B229454433971
 Amount of Each Receipt this Period 40.00
 Memo Item
 PAYROLL DEDUCTION: \$20.00/MONTHLY

C. VARILEK, JAMES, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 413 WYTHE HOUSE CT
 City CREVE COEUR State MO Zip Code 63141-8179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) EVP & CHIEF OPERATING OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 12 / 31 / 2022
Transaction ID : AFC987E5B525E4521893
 Amount of Each Receipt this Period 200.00
 Memo Item
 PAYROLL DEDUCTION: \$100.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	280.00
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 23 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
OLIN CORPORATION GOOD GOVERNMENT FUND

A. MONTICONE, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16049 WILSON MANOR DR
 City CHESTERFIELD State MO Zip Code 63005-4588
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE CUBE OPERATIONS LLC Occupation (for Individual) VP GLOBAL FINANCE EPOXY/INTL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1008.00

Date of Receipt 12 / 31 / 2022
Transaction ID : A04F1047E4FEB4BCAA0D
 Amount of Each Receipt this Period 168.00
 Memo Item
 PAYROLL DEDUCTION: \$84.00/MONTHLY

B. MULLGARDT, STUART, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3655 FLORA PL
 City SAINT LOUIS State MO Zip Code 63110-3703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) DEPUTY GEN COUNSEL VP CORPO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.00

Date of Receipt 12 / 31 / 2022
Transaction ID : ABDBA7C765E214AABAD4
 Amount of Each Receipt this Period 0.00
 Memo Item
 PAYROLL DEDUCTION: \$0.00/MONTHLY

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	168.00
TOTAL This Period (last page this line number only).....	7961.20

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"/> 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. MARK ALFORD FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1428

City RAYMORE State MO Zip Code 64083

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name ALFORD, MARK, , ,

Office Sought: House Senate President
State: MO District: 04

Disbursement For: 2024
 Primary General
 Other (specify) ▼

Date of Disbursement: 12 / 05 / 2022

FEC Identification Number: C00792598
Transaction ID : B43EC28191
Amount of Each Disbursement this Period: 2500.00

Category/Type: 011

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Category/Type:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Category/Type:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	2500.00