

# 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  /  /  2023 through  /  /  2023

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  /  /  2023

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)

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="2023"/>		43121.17
(b) Cash on Hand at Beginning of Reporting Period.....	48038.57	
(c) Total Receipts (from Line 19) .....	5032.55	20052.35
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	53071.12	63173.52
7. Total Disbursements (from Line 31).....	64.00	10166.40
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	53007.12	53007.12
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

OLIN CORPORATION GOOD GOVERNMENT FUND

Report Covering the Period: From: 04 / 01 / 2023 To: 04 / 30 / 2023

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).....	3219.60	11798.40
(ii) Unitemized .....	1812.95	8253.95
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5032.55	20052.35
(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) .....	5032.55	20052.35
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)).....▶	5032.55	20052.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5032.55	20052.35

**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 .....	64.00	166.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	64.00	166.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	10000.00
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	0.00
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)) ..	64.00	10166.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	64.00	10166.40

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5032.55	20052.35
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5032.55	20052.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	64.00	166.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	64.00	166.40

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

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. 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 ▼ 1225.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : AD4A415BE524E445EB81**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 Payroll Deduction: \$400.00/Monthly

**B. 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/Downstream  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : A03982A2A06BE4455882**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 Payroll Deduction: \$80.00/Monthly

**C. 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 Remediation  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : A95893259209746D395A**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction: \$100.00/Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	580.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 14
	<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. 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 Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : A92E5031FAE7A46AD92B**  
 Amount of Each Receipt this Period 150.00  
 Memo Item  
 Payroll Deduction: \$150.00/Monthly

**B. 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 ▼ 680.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : A1FB89973EC0143D8BD5**  
 Amount of Each Receipt this Period 170.00  
 Memo Item  
 Payroll Deduction: \$170.00/Monthly

**C. 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 ▼ 250.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : AA80DA4C401714426BDF**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction: \$100.00/Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	420.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 14
<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. 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 ▼ 1600.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : A583F64EE197F41BF910**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 Payroll Deduction: \$400.00/Monthly

**B. 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 ▼ 400.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : AA7F5FC4AA2A141B6A78**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction: \$100.00/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 Safety  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : A81BB0D42A25648F5A73**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction: \$100.00/Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 14
<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. 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 ▼ 330.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : A5F2F8DC503694387B6F**  
 Amount of Each Receipt this Period 90.00  
 Memo Item  
 Payroll Deduction: \$90.00/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 ▼ 400.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : AF5873E6D4BBD49BCA40**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction: \$100.00/Monthly

**C. 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 ▼ 470.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : AC19BCD2FA62E42118E8**  
 Amount of Each Receipt this Period 140.00  
 Memo Item  
 Payroll Deduction: \$140.00/Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	330.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 14
<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. 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 ▼ 1538.40

Date of Receipt 04 / 30 / 2023  
**Transaction ID : AEA7925AA467E47099F0**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 Payroll Deduction: \$384.60/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 Winchester  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : AF23B075BF35C4D0A8C9**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction: \$100.00/Monthly

**C. 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 ▼ 320.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : AC3EB44F015224345A1E**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 Payroll Deduction: \$80.00/Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	564.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 14
<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. 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 ▼ 400.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : ACC3D3A85C863432A899**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction: \$100.00/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 ▼ 225.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : A329A17467A7F450D8A0**  
 Amount of Each Receipt this Period 75.00  
 Memo Item  
 Payroll Deduction: \$75.00/Monthly

**C. 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 Strategy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : AF3481A10F482409885E**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction: \$100.00/Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	275.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 14
<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. 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 ▼ 400.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : A061420BE1C7F4185834**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction: \$100.00/Monthly

**B. Tittle, 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  
 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 ▼ 215.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : A3B6A206FBDF84831BC7**  
 Amount of Each Receipt this Period 65.00  
 Memo Item  
 Payroll Deduction: \$65.00/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 ▼ 250.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : ADBD8583FA6164C18B2C**  
 Amount of Each Receipt this Period 70.00  
 Memo Item  
 Payroll Deduction: \$70.00/Monthly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	235.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 14
	(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. 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 ▼ 215.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : A8C69D8BD1C714C8D81A**  
 Amount of Each Receipt this Period 65.00  
 Memo Item  
 Payroll Deduction: \$65.00/Monthly

**B. 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 ▼ 3800.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : A4B24CF723D6742C3AE1**  
 Amount of Each Receipt this Period 150.00  
 Memo Item  
 Payroll Deduction: \$150.00/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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	215.00
<b>TOTAL</b> This Period (last page this line number only).....	3219.60

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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**

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		Date of Disbursement MM / DD / YYYY 04 / 17 / 2023	
Mailing Address PO Box 25118		FEC Identification Number C [ ]	
City Tampa	State FL	Zip Code 33622-5118	Transaction ID : B9EBE7912C
Purpose of Disbursement Bank Fee		Category/ Type [ ]	Amount of Each Disbursement this Period 64.00
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type [ ]	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type [ ]	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	64.00
<b>TOTAL</b> This Period (last page this line number only).....▶	64.00