

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
MAIL ROOM

JUL 20 11 41 AM '96

1. NAME OF COMMITTEE (in full)  
Olin Corporation Good Government Fund

ADDRESS (number and street)  Check if different than previously reported  
1730 K Street, NW

CITY, STATE and ZIP CODE  
Washington, DC 20006

2. FEC IDENTIFICATION NUMBER  
C00002790

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

## 4. TYPE OF REPORT

- a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End Report  
 July 31 Mid Year Report (Non-election Year Only)  
 Termination Report

### Monthly Report Due On:

- February 20     June 20     October 20  
 March 20     July 20     November 20  
 April 20     August 20     December 20  
 May 20     September 20     January 31

- Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day report following the General Election on  
\_\_\_\_\_ in the State of \_\_\_\_\_

b) Is this Report an Amendment?  YES  NO

SUMMARY	6/1/96	through	6/30/96	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	6/1/96	through	6/30/96		
6. (a) Cash on Hand January 1, 1996					\$ 17,669.28
(b) Cash on Hand at Beginning of Reporting Period				\$ 14,417.06	
(c) Total Receipts (from Line 19)				\$ 2,839.35	\$ 17,937.13
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)				\$ 17,256.41	\$ 35,606.41
7. Total Disbursements (from Line 30)				\$ 1,500.00	\$ 19,850.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))				\$ 15,756.41	\$ 15,756.41
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	

For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-219-3420

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

Type or Print Name of Treasurer  
Edward J. Krygier

Signature of Treasurer  
*Edward J. Krygier*

Date  
7/15/96

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

FEC FORM 3X  
(revised 9/93)

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE Olin Corporation Good Government Fund		REPORT COVERING PERIOD	
		FROM: 6/1/96	TO: 6/30/96
		COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees		\$605.88	\$1,470.20
i. Itemized (use Schedule A)		\$2,233.47	\$16,466.93
ii. Unitemized			
iii. Total	(add i and ii) *	\$2,839.35	\$17,937.13
b. Political Party Committees		\$0.00	\$0.00
c. Other Political Committees (such as PACs)		\$0.00	\$0.00
d. Total Contributions	(add a iii, b and c) *	\$2,839.35	\$17,937.13
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.)		\$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 Nonfederal Account for Joint Activity		\$0.00	\$0.00
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) *	\$2,839.35	\$17,937.13
20. Total Federal Receipts	(subtract line 18 from line 19) *	\$2,839.35	\$17,937.13
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share		\$0.00	\$0.00
ii. Non-Federal Share		\$0.00	\$0.00
b. Other Federal Operating Expenditures		\$0.00	\$0.00
c. Total Operating Expenditures	(add 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		\$1,500.00	\$12,500.00
24. Independent Expenditures (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 a, b and c) *	\$0.00	\$0.00
29. Other Disbursements		\$0.00	\$7,350.00
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) *	\$1,500.00	\$19,850.00
31. Total Federal Disbursements	(subtract line 21 a ii from line 30) *	\$1,500.00	\$19,850.00
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d)		\$2,839.35	\$17,937.13
33. Total Contribution Refunds (from line 28d)		\$0.00	\$0.00
34. Net Contributions (other than loans)(subtract line 33 from 32)		\$2,839.35	\$17,937.13
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) *	\$0.00	\$0.00
36. Offsets to Operating Expenditures (from line 15)		\$0.00	\$0.00
37. Net Operating Expenditures	(subtract line 36 from 35) *	\$0.00	\$0.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

**Contributions From Individuals (itemized)**

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				
Full Name, Mailing Address and ZIP Code <b>Richard A. Campbell</b> 658 Povo Road Madisonville, TN 37354	Name of Employer <b>Stamford, CT</b>		Date (month, day, year) <b>6/30/96</b>	Amount of Each Receipt this Period <b>\$62.20</b>
	Occupation <b>Bus Director Flex Urethanes</b>			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date <b>\$ 373.20</b>			
Full Name, Mailing Address and ZIP Code <b>Donald W. Griffin</b> 92 Old Boston Road Wilton, CT 06897	Name of Employer <b>Stamford, CT</b>		Date (month, day, year) <b>6/30/96</b>	Amount of Each Receipt this Period <b>\$50.00</b>
	Occupation <b>Chairman of Board, Pres &amp; CEO</b>			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date <b>\$ 300.00</b>			
Full Name, Mailing Address and ZIP Code <b>John W. Johnstone Jr</b> 467 Carter St New Canaan, CT 06840	Name of Employer <b>Stamford, CT</b>		Date (month, day, year) <b>6/30/96</b>	Amount of Each Receipt this Period <b>\$62.50</b>
	Occupation <b>Retired CEO &amp; President</b>			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date <b>\$ 375.00</b>			
Full Name, Mailing Address and ZIP Code <b>Joseph S. McGraw</b> 10 Evergreen Court Bethalto, IL 62010	Name of Employer <b>East Alton, IL</b>		Date (month, day, year) <b>6/30/96</b>	Amount of Each Receipt this Period <b>\$50.00</b>
	Occupation <b>Director Business Development</b>			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date <b>\$ 300.00</b>			
Full Name, Mailing Address and ZIP Code <b>John L. McIntosh</b> 900 Northmont Drive Ne Cleveland, TN 37312	Name of Employer <b>Charleston, TN</b>		Date (month, day, year) <b>6/30/96</b>	Amount of Each Receipt this Period <b>\$59.46</b>
	Occupation <b>Director Mfg</b>			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date <b>\$ 342.96</b>			
Full Name, Mailing Address and ZIP Code <b>Jackson C. Picker</b> 75 Coral Drive Safety Harbor, FL 34695	Name of Employer <b>St. Petersburg, FL</b>		Date (month, day, year) <b>6/30/96</b>	Amount of Each Receipt this Period <b>\$34.62</b>
	Occupation <b>VP Human Resources</b>			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date <b>\$ 225.03</b>			
Full Name, Mailing Address and ZIP Code <b>Joseph D. Rupp</b> #9 Deer Valley Ct Florisant, MD 63034	Name of Employer <b>East Alton, IL</b>		Date (month, day, year) <b>6/30/96</b>	Amount of Each Receipt this Period <b>\$50.00</b>
	Occupation <b>Vice Pres Mfg &amp; Engrs</b>			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date <b>\$ 300.00</b>			
<b>SUBTOTAL of Receipts This Page (optional)</b>				<b>\$ 368.78</b>
<b>TOTAL This Period (last page this line number only)</b>				

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE **2** OF **2**  
FOR LINE NUMBER **11(a)(i)**

**Contributions From Individuals (Itemized)**

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NAME OF COMMITTEE (in Full) Olin Corporation Good Government Fund				
Full Name, Mailing Address and ZIP Code <b>Robert E. Smith</b> 5903 Mt. Eagle Drive Alexandria, VA 22303	Name of Employer <b>Washington, DC</b>	Date (month, day, year) <b>6/30/96</b>	Amount of Each Receipt this Period <b>\$50.00</b>	Occupation <b>Dir Fed Govt Rel</b>
	Receipt For: <input type="checkbox"/> Primary: <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
		Aggregate Year-to-Date <b>\$ 300.00</b>		
Full Name, Mailing Address and ZIP Code <b>Derek E. Tyler</b> 399 Jinny Hill Road Cheshire, CT 06410	Name of Employer <b>New Haven, CT</b>	Date (month, day, year) <b>6/30/96</b>	Amount of Each Receipt this Period <b>\$62.50</b>	Occupation <b>Vice Pres R &amp; D</b>
	Receipt For: <input type="checkbox"/> Primary: <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
		Aggregate Year-to-Date <b>\$ 375.00</b>		
Full Name, Mailing Address and ZIP Code <b>Everett A. White</b> 461 Willow Lane Palm Harbor, FL 34683	Name of Employer <b>St. Petersburg, FL</b>	Date (month, day, year) <b>6/30/96</b>	Amount of Each Receipt this Period <b>\$46.16</b>	Occupation <b>Program Director</b>
	Receipt For: <input type="checkbox"/> Primary: <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
		Aggregate Year-to-Date <b>\$ 300.04</b>		
Full Name, Mailing Address and ZIP Code <b>Dean S. Williams</b> 21651 Hanskal Lane Huntington Beach, CA 92646	Name of Employer <b>Downey, CA</b>	Date (month, day, year) <b>6/30/96</b>	Amount of Each Receipt this Period <b>\$41.52</b>	Occupation <b>Engineering Director</b>
	Receipt For: <input type="checkbox"/> Primary: <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
		Aggregate Year-to-Date <b>\$ 269.88</b>		
Full Name, Mailing Address and ZIP Code <b>Fred L. Innes</b> 4012 Roscrea Dr Tallahassee, FL 32308	Name of Employer <b>St. Marks, FL</b>	Date (month, day, year) <b>12/31/95</b>	Amount of Each Receipt this Period <b>\$10.00</b>	Occupation <b>Steering Team Leader</b>
	Receipt For: <input type="checkbox"/> Primary: <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
		Aggregate Year-to-Date <b>\$ 60.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>\$ 210.18</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>\$ 578.96</b>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

**Contributions to Federal Candidates/Committees**

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NAME OF COMMITTEE (in Full) Olin Corporation Good Government Fund			
Full Name, Mailing Address and ZIP Code <b>Callahan for Congress Committee</b> P O Box 7641 Mobile, AL 36607	Purpose of Disbursement <b>Returned Check #2902 dated 3/12/96 for Sonny Callahan (AL-1-R).</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other: 1996	Date (month, day, year) <b>6/25/96</b>	Amount of Each Disbursement this Period <b>(\$ 1,000.00)</b>
Full Name, Mailing Address and ZIP Code <b>Jimmy Hayes for Senate</b> 128 North Columbus Street Alexandria, VA 22314	Purpose of Disbursement <b>Contribution: James A. Hayes (LA-R)</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other: 1996	Date (month, day, year) <b>6/18/96</b>	Amount of Each Disbursement this Period <b>\$ 1,000.00</b>
Full Name, Mailing Address and ZIP Code <b>Chris John for Congress</b> P.O. Box 971 Crowley, LA 70527-0971	Purpose of Disbursement <b>Contribution: Chris John (LA-??-D)</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other: 1996	Date (month, day, year) <b>6/18/96</b>	Amount of Each Disbursement this Period <b>\$ 500.00</b>
Full Name, Mailing Address and ZIP Code <b>People for Lightfoot, Inc.</b> 2059 Huntington Avenue, Apt. 1001 Alexandria, VA 22303	Purpose of Disbursement <b>Contribution: Jim Ross Lightfoot (LA-??-R)</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other: 1996	Date (month, day, year) <b>6/4/96</b>	Amount of Each Disbursement this Period <b>\$ 1,000.00</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>\$ 1,500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>\$ 1,500.00</b>

**Federal Election Commission  
 ENVELOPE REPLACEMENT PAGE  
 FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 7/15/96
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED
	and/or DATE OF RECEIPT
J.A.W. PREPARER	7/20/96 DATE PREPARED