

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 Clayton MO 63105 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00002790 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) [ ] AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 04 / 01 / 2020 through 06 / 30 / 2020

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, A, Mr.,

Type or Print Name of Treasurer

Signature of Treasurer Slater, Todd, A, Mr., [Electronically Filed] Date 07 / 14 / 2020

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="2020"/>		51000.03
(b) Cash on Hand at Beginning of Reporting Period.....	55860.78	
(c) Total Receipts (from Line 19) .....	6579.00	14998.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	62439.78	65998.03
7. Total Disbursements (from Line 31).....	2627.57	6185.82
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	59812.21	59812.21
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

FEC Form 3X (Rev. 05/2016)

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).....	4929.00	8569.00
(ii) Unitemized .....	1650.00	6429.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6579.00	14998.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	6579.00	14998.00
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)).....▶	6579.00	14998.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6579.00	14998.00

**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	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	6000.00
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).....	127.57	185.82
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)) ..	2627.57	6185.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2627.57	6185.82

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	6579.00	14998.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6579.00	14998.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

As described in the First Quarter 2020 Report, there is a discrepancy between this report's ending balance and the Olin Good Government Fund's bank statement. Olin Good Government Fund is still working on identifying and quantifying this discrepancy.

Form/Schedule:  
Transaction ID:

**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 28
	<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	

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. Averill, Barry, S, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27702 Stonehurst Lane

City Katy	State TX	Zip Code 77494
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Blue Cube Operations LLC	Occupation (for Individual) VP, Chemicals Mfg.-Ldr., Global M&E C
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2020

**Transaction ID : SA11AI.7955**

Amount of Each Receipt this Period  
90.00

Memo Item Contribution

**B. Averill, Barry, S, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27702 Stonehurst Lane

City Katy	State TX	Zip Code 77494
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Blue Cube Operations LLC	Occupation (for Individual) VP, Chemicals Mfg.-Ldr., Global M&E C
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2020

**Transaction ID : SA11AI.8006**

Amount of Each Receipt this Period  
90.00

Memo Item Contribution

**C. Averill, Barry, S, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27702 Stonehurst Lane

City Katy	State TX	Zip Code 77494
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Blue Cube Operations LLC	Occupation (for Individual) VP, Chemicals Mfg.-Ldr., Global M&E O
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
540.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

**Transaction ID : SA11AI.8056**

Amount of Each Receipt this Period  
90.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	270.00
<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 28
	<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. Blanchard, Eric, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8025 Bonhomme Avenue  
 City Clayton State MO Zip Code 63105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) VP; Gen Counsel & Sec, Cop. Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **04 / 30 / 2020**  
**Transaction ID : SA11AI.7941**  
 Amount of Each Receipt this Period 200.00  
 Memo Item Contribution

**B. Blanchard, Eric, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8025 Bonhomme Avenue  
 City Clayton State MO Zip Code 63105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) VP; Gen Counsel & Sec, Cop. Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **05 / 31 / 2020**  
**Transaction ID : SA11AI.7992**  
 Amount of Each Receipt this Period 200.00  
 Memo Item Contribution

**C. Blanchard, Eric, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8025 Bonhomme Avenue  
 City Clayton State MO Zip Code 63105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) VP; Gen Counsel & Sec, Cop. Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **06 / 30 / 2020**  
**Transaction ID : SA11AI.8041**  
 Amount of Each Receipt this Period 200.00  
 Memo Item Contribution

<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 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Bradley, Monica, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16407 Porpoise Ct.  
 City Crosby State TX Zip Code 77532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cube Operations LLC Occupation (for Individual) Human Resource Dir. - North America  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 04 / 30 / 2020  
**Transaction ID : SA11AI.7956**  
 Amount of Each Receipt this Period 0.00  
 Memo Item

**B. Bradley, Monica, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16407 Porpoise Ct.  
 City Crosby State TX Zip Code 77532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cube Operations LLC Occupation (for Individual) Human Resource Dir. - North America  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 05 / 31 / 2020  
**Transaction ID : SA11AI.8007**  
 Amount of Each Receipt this Period 0.00  
 Memo Item

**C. Bradley, Monica, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16407 Porpoise Ct.  
 City Crosby State TX Zip Code 77532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cube Operations LLC Occupation (for Individual) Human Resource Dir. - North America  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11AI.8057**  
 Amount of Each Receipt this Period 0.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 28
<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. Brown, Richard, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2904 Jeffrey Lane  
 City Midland State MI Zip Code 48640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cube Operations LLC Occupation (for Individual) Dir., Solv Comm North America/EurGG  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 31 / 2020  
**Transaction ID : SA11AI.8008**  
 Amount of Each Receipt this Period 42.00  
 Memo Item Contribution

**B. Brown, Richard, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2904 Jeffrey Lane  
 City Midland State MI Zip Code 48640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cube Operations LLC Occupation (for Individual) Dir., Solv Comm North America/EurGG  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11AI.8058**  
 Amount of Each Receipt this Period 42.00  
 Memo Item Contribution

**C. Cagle, Paul, A, , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 56 Cherrywood Court  
 City Lake Jackson State TX Zip Code 77566  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cube Operations Occupation (for Individual) Production Director-Ldr  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 04 / 30 / 2020  
**Transaction ID : SA11AI.7958**  
 Amount of Each Receipt this Period 80.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	164.00
<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 11 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Cagle, Paul, A, , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 56 Cherrywood Court  
 City Lake Jackson State TX Zip Code 77566  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cube Operations Occupation (for Individual) Production Director-Ldr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 31 / 2020  
**Transaction ID : SA11AI.8009**  
 Amount of Each Receipt this Period 80.00  
 Memo Item Contribution

**B. Cagle, Paul, A, , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 56 Cherrywood Court  
 City Lake Jackson State TX Zip Code 77566  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cube Operations Occupation (for Individual) Production Director-Ldr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11AI.8059**  
 Amount of Each Receipt this Period 80.00  
 Memo Item Contribution

**C. Dye, Michael, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1925 Aviara Drive  
 City Chattanooga State TN Zip Code 37421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Chlor Alkali Products Occupation (for Individual) V.P.; North American Sales  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2020  
**Transaction ID : SA11AI.7981**  
 Amount of Each Receipt this Period 50.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	210.00
<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 12 OF 28
	(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. Dye, Michael, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1925 Aviara Drive  
 City Chattanooga State TN Zip Code 37421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Chlor Alkali Products Occupation (for Individual) V.P.; North American Sales  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 300.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11AI.8030**  
 Amount of Each Receipt this Period 50.00  
 Memo Item Contribution

**B. Fischer, John, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 155 Carondelet Plaza Unit 503  
 City Clayton State MO Zip Code 63105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) Chairman, Pres. & CEO, CFO  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 360.00

Date of Receipt 04 / 30 / 2020  
**Transaction ID : SA11AI.7944**  
 Amount of Each Receipt this Period 90.00  
 Memo Item Contribution

**C. Fischer, John, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 155 Carondelet Plaza Unit 503  
 City Clayton State MO Zip Code 63105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) Chairman, Pres. & CEO, CFO  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 450.00

Date of Receipt 05 / 31 / 2020  
**Transaction ID : SA11AI.7996**  
 Amount of Each Receipt this Period 90.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	230.00
<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 13 OF 28
	<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. Fischer, John, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 155 Carondelet Plaza  
 Unit 503  
 City Clayton State MO Zip Code 63105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) Chairman, Pres. & CEO, CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2020  
**Transaction ID : SA11AI.8044**  
 Amount of Each Receipt this Period 90.00  
 Memo Item Contribution

**B. Gutermuth, Michelle, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1016 Shady Oaks Drive  
 City Angleton State TX Zip Code 77515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cube Operations LLC Occupation (for Individual) Freeport Epoxy/Roberta Dev. Leader  
 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  
 06 / 30 / 2020  
**Transaction ID : SA11AI.8060**  
 Amount of Each Receipt this Period 40.00  
 Memo Item Contribution

**C. Kirkpatrick, Angie, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4449 McCoy Road  
 City Bethalto State IL Zip Code 62010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Winchester-Winchester HQ Occupation (for Individual) Dir, Customer Fulfillment, Marketing  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2020  
**Transaction ID : SA11AI.8025**  
 Amount of Each Receipt this Period 50.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	180.00
<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 14 OF 28
	<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Kirkpatrick, Angie, S, ,</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2020
Mailing Address 4449 McCoy Road		<b>Transaction ID : SA11AI.8075</b>
City Bethalto	State IL	Zip Code 62010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) Olin Winchester-Winchester HQ	Occupation (for Individual) Dir, Customer Fulfillment, Marketing	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Ledoux, Stephen, B, ,</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2020
Mailing Address 22767 Ligon Road		<b>Transaction ID : SA11AI.8011</b>
City Zachary	State LA	Zip Code 70791
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) Blue Cube Operations LLC	Occupation (for Individual) EDC/VCM/HCI & LAO Mfg Dir-Ldr	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Ledoux, Stephen, B, ,</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2020
Mailing Address 22767 Ligon Road		<b>Transaction ID : SA11AI.8061</b>
City Zachary	State LA	Zip Code 70791
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) Blue Cube Operations LLC	Occupation (for Individual) EDC/VCM/HCI & LAO Mfg Dir-Ldr	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<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 15 OF 28
	(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

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. Lowe, Duane, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8075 Vagabond Lane N  
 City Maple Grove State MN Zip Code 55311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Winchester Occupation (for Individual) Dir.; Strategic Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2020  
**Transaction ID : SA11AI.7969**  
 Amount of Each Receipt this Period 100.00  
 Memo Item Contribution

**B. Lowe, Duane, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8075 Vagabond Lane N  
 City Maple Grove State MN Zip Code 55311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Winchester Occupation (for Individual) Dir.; Strategic Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2020  
**Transaction ID : SA11AI.7976**  
 Amount of Each Receipt this Period 0.00  
 Memo Item

**C. Lowe, Duane, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8075 Vagabond Lane N  
 City Maple Grove State MN Zip Code 55311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Winchester Occupation (for Individual) Dir.; Strategic Operations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2020  
**Transaction ID : SA11AI.8020**  
 Amount of Each Receipt this Period 100.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<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 16 OF 28
	(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. Lowe, Duane, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8075 Vagabond Lane N  
 City Maple Grove State MN Zip Code 55311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Winchester Occupation (for Individual) Dir.; Strategic Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2020  
**Transaction ID : SA11AI.8026**  
 Amount of Each Receipt this Period 0.00  
 Memo Item

**B. Lowe, Duane, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8075 Vagabond Lane N  
 City Maple Grove State MN Zip Code 55311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Winchester Occupation (for Individual) Dir.; Strategic Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11AI.8070**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Contribution

**C. Lowe, Duane, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8075 Vagabond Lane N  
 City Maple Grove State MN Zip Code 55311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Winchester Occupation (for Individual) Dir.; Strategic Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11AI.8076**  
 Amount of Each Receipt this Period 0.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<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 17 OF 28  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. McIntosh, John, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 516 Anatole LN NW  
 City Cleveland State TN Zip Code 37312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) Sr. Vice President; Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2020  
**Transaction ID : SA11AI.7946**  
 Amount of Each Receipt this Period 0.00  
 Memo Item

**B. McIntosh, John, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 516 Anatole LN NW  
 City Cleveland State TN Zip Code 37312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) Sr. Vice President; Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2020  
**Transaction ID : SA11AI.7998**  
 Amount of Each Receipt this Period 0.00  
 Memo Item

**C. McIntosh, John, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 516 Anatole LN NW  
 City Cleveland State TN Zip Code 37312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) Sr. Vice President; Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2020  
**Transaction ID : SA11AI.8047**  
 Amount of Each Receipt this Period 0.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 0.00  
**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 18 OF 28
	(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. Meenan, John, M, , Jr.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3501 Shepherd Street

City Chevy Chase	State MD	Zip Code 20815
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Olin Corporation	Occupation (for Individual) Director; Government Affairs
---	---

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
04		30		2020

**Transaction ID : SA11AI.7947**

Amount of Each Receipt this Period  
150.00

Memo Item  
Contribution

**B. Meenan, John, M, , Jr.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3501 Shepherd Street

City Chevy Chase	State MD	Zip Code 20815
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Olin Corporation	Occupation (for Individual) Director; Government Affairs
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2020

**Transaction ID : SA11AI.7999**

Amount of Each Receipt this Period  
150.00

Memo Item  
Contribution

**C. Meenan, John, M, , Jr.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3501 Shepherd Street

City Chevy Chase	State MD	Zip Code 20815
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Olin Corporation	Occupation (for Individual) Director; Government Affairs
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

**Transaction ID : SA11AI.8048**

Amount of Each Receipt this Period  
150.00

Memo Item  
Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<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 19 OF 28
	(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

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. Osborne, Marvin, , , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 47 Major Ridge Road  
 City Ringgold State GA Zip Code 30736  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Chlor Alkali Products Occupation (for Individual) Corporate Accounting Manager - Atlanta  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2020  
**Transaction ID : SA11AI.7985**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Contribution

**B. Osborne, Marvin, , , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 47 Major Ridge Road  
 City Ringgold State GA Zip Code 30736  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Chlor Alkali Products Occupation (for Individual) Corporate Accounting Manager - Atlanta  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11AI.8034**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Contribution

**C. Ponsler, Timothy, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7902 Teasdale Avenue  
 City St. Louis State MO Zip Code 63130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Chlor Alkali Products Occupation (for Individual) VP, Finance-Olin CAPV Ldr  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11AI.8035**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	140.00
<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 20 OF 28
	<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. Sampson, John, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27710 Charter Lake Lane  
 City Katy State TX Zip Code 77494  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cube Operations LLC Occupation (for Individual) Senior V.P. - Business Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **04 / 30 / 2020**  
**Transaction ID : SA11AI.7961**  
 Amount of Each Receipt this Period 200.00  
 Memo Item Contribution

**B. Sampson, John, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27710 Charter Lake Lane  
 City Katy State TX Zip Code 77494  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cube Operations LLC Occupation (for Individual) Senior V.P. - Business Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **05 / 31 / 2020**  
**Transaction ID : SA11AI.8012**  
 Amount of Each Receipt this Period 200.00  
 Memo Item Contribution

**C. Sampson, John, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27710 Charter Lake Lane  
 City Katy State TX Zip Code 77494  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cube Operations LLC Occupation (for Individual) Senior V.P. - Business Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **06 / 30 / 2020**  
**Transaction ID : SA11AI.8062**  
 Amount of Each Receipt this Period 200.00  
 Memo Item Contribution

<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: PAGE 21 OF 28  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Scott, Leonard, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9234 Mountain Shade Drive  
 City Chattanooga State TN Zip Code 37421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) VP, Business Integration, COO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2020  
**Transaction ID : SA11AI.7951**  
 Amount of Each Receipt this Period 100.00  
 Memo Item Contribution

**B. Scott, Leonard, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9234 Mountain Shade Drive  
 City Chattanooga State TN Zip Code 37421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) VP, Business Integration, COO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2020  
**Transaction ID : SA11AI.8003**  
 Amount of Each Receipt this Period 100.00  
 Memo Item Contribution

**C. Scott, Leonard, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9234 Mountain Shade Drive  
 City Chattanooga State TN Zip Code 37421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) VP, Business Integration, COO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11AI.8052**  
 Amount of Each Receipt this Period 100.00  
 Memo Item Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00  
**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 28
	(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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Slater, Todd, A, Mr.,</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2020
Mailing Address 600 Powder Mill Road		<b>Transaction ID : SA11AI.8053</b>
City East Alton	State IL	Zip Code 62024-1273
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Olin Corporation	Occupation (for Individual) VP & CFO	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Stock, Michael, E, , Jr.</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2020
Mailing Address 7340 Kindewood Drive		<b>Transaction ID : SA11AI.7971</b>
City Edwardsville	State IL	Zip Code 62025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 65.00
Name of Employer (for Individual) Winchester Ammunition Inc.	Occupation (for Individual) Dir.; Commercial Sales & Prod. Mgmt.	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Stock, Michael, E, , Jr.</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2020
Mailing Address 7340 Kindewood Drive		<b>Transaction ID : SA11AI.8022</b>
City Edwardsville	State IL	Zip Code 62025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 65.00
Name of Employer (for Individual) Winchester Ammunition Inc.	Occupation (for Individual) Dir.; Commercial Sales & Prod. Mgmt.	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	230.00
<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 23 OF 28
	<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. Stock, Michael, E., Jr.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7340 Kindlewood Drive

City Edwardsville	State IL	Zip Code 62025
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Winchester Ammunition Inc.	Occupation (for Individual) Dir.; Commercial Sales & Prod. Mgmt.
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

**Transaction ID : SA11AI.8072**

Amount of Each Receipt this Period  
65.00

Memo Item  
Contribution

**B. Trager, Richard, T.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2393 N Trail road

City Midland	State MI	Zip Code 48642
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Cube Operations LLC	Occupation (for Individual) V.P., Global Services & Real Estate
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2020

**Transaction ID : SA11AI.7963**

Amount of Each Receipt this Period  
80.00

Memo Item  
Contribution

**C. Trager, Richard, T.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2393 N Trail road

City Midland	State MI	Zip Code 48642
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Cube Operations LLC	Occupation (for Individual) V.P., Global Services & Real Estate
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2020

**Transaction ID : SA11AI.8014**

Amount of Each Receipt this Period  
80.00

Memo Item  
Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<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 24 OF 28
<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. Trager, Richard, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2393 N Trail road  
 City Midland State MI Zip Code 48642  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cube Operations LLC Occupation (for Individual) V.P., Global Services & Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11AI.8064**  
 Amount of Each Receipt this Period 80.00  
 Memo Item Contribution

**B. Varilek, James, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 413 Wythe House Court  
 City Creve Coeur State MO Zip Code 63141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cube Operations LLC Occupation (for Individual) Epoxy V.P., CAPV Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2020  
**Transaction ID : SA11AI.7964**  
 Amount of Each Receipt this Period 100.00  
 Memo Item Contribution

**C. Varilek, James, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 413 Wythe House Court  
 City Creve Coeur State MO Zip Code 63141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cube Operations LLC Occupation (for Individual) Epoxy V.P., CAPV Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2020  
**Transaction ID : SA11AI.8015**  
 Amount of Each Receipt this Period 100.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	280.00
<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 25 OF 28
	<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. Varilek, James, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 413 Wythe House Court  
 City Creve Coeur State MO Zip Code 63141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cube Operations LLC Occupation (for Individual) Epoxy V.P., CAPV Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11AI.8065**  
 Amount of Each Receipt this Period 100.00  
 Memo Item Contribution

**B. Vermillion, Teresa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 190 Carondelet Plaza  
 City Clayton State MO Zip Code 63105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Occupation (for Individual) VP of Tax  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2020  
**Transaction ID : SA11AI.8005**  
 Amount of Each Receipt this Period 50.00  
 Memo Item Contribution

**C. Vermillion, Teresa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 190 Carondelet Plaza  
 City Clayton State MO Zip Code 63105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Occupation (for Individual) VP of Tax  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11AI.8055**  
 Amount of Each Receipt this Period 50.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<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 26 OF 28
	<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. Webb, Lloyd, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3152 Lakewood Drive NW  
 City Cleveland State TN Zip Code 37312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) Dir; Energy Procurement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2020  
**Transaction ID : SA11AI.7989**  
 Amount of Each Receipt this Period 50.00  
 Memo Item Contribution

**B. Webb, Lloyd, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3152 Lakewood Drive NW  
 City Cleveland State TN Zip Code 37312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) Dir; Energy Procurement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2020  
**Transaction ID : SA11AI.8038**  
 Amount of Each Receipt this Period 50.00  
 Memo Item Contribution

**C. Wilson, Gregory, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2127 Windport Lane  
 City St. Louis State MO Zip Code 63146  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cube Operations LLC Occupation (for Individual) V.P., Finance-Epoxy & Internal  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2020  
**Transaction ID : SA11AI.7965**  
 Amount of Each Receipt this Period 100.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<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 27 OF 28
	(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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Wilson, Gregory, D, ,

Mailing Address 2127 Windport Lane

City St. Louis	State MO	Zip Code 63146
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Blue Cube Operations LLC	Occupation (for Individual) V.P., Finance-Epoxy & Internal
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2020

**Transaction ID : SA11AI.8016**

Amount of Each Receipt this Period  
100.00

Memo Item Contribution

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Wilson, Gregory, D, ,

Mailing Address 2127 Windport Lane

City St. Louis	State MO	Zip Code 63146
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Blue Cube Operations LLC	Occupation (for Individual) V.P., Finance-Epoxy & Internal
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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
06		30		2020

**Transaction ID : SA11AI.8066**

Amount of Each Receipt this Period  
100.00

Memo Item Contribution

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	4929.00

**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. John Kennedy for US**

Full Name (Last, First, Middle Initial)

Mailing Address 2900 Clearview Pkwy  
Suite 206

City Metairie State LA Zip Code 70006

Purpose of Disbursement Contribution

Candidate Name **John Kennedy for US**

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: LA District:

Date of Disbursement: MM / DD / YYYY  
06 / 03 / 2020

FEC Identification Number: C

Transaction ID : **SB23.8081**

Amount of Each Disbursement this Period: 2500.00

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

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

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

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

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