

**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="2022"/>		44746.50
(b) Cash on Hand at Beginning of Reporting Period.....	44186.80	
(c) Total Receipts (from Line 19)	4143.10	38914.65
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	48329.90	83661.15
7. Total Disbursements (from Line 31).....	15000.00	50331.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	33329.90	33329.90
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

OLIN CORPORATION GOOD GOVERNMENT FUND

Report Covering the Period: From: / / 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).....	3640.60	28658.15
(ii) Unitemized	502.50	10256.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4143.10	38914.65
(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)	4143.10	38914.65
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)).....▶	4143.10	38914.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4143.10	38914.65

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	331.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	331.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12500.00	45000.00
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).....	2500.00	5000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	15000.00	50331.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15000.00	50331.25

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	4143.10	38914.65
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4143.10	38914.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	331.25
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	331.25

**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 21
	<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. GREENE, NICHOLAS, EUGENE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 OXMOOR RDG
 City OXFORD State MS Zip Code 38655-6033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINCHESTER AMMUNITION INC. Occupation (for Individual) DIRECTOR OF HUMAN RESOURCES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A1121C050A61A4C7087D
 Amount of Each Receipt this Period 50.00
 Memo Item
 PAYROLL DEDUCTION: \$50.00/MONTHLY

B. BAKER, TIMOTHY, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12407 SOMERSWORTH DR
 City KNOXVILLE State TN Zip Code 37934-4542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS Occupation (for Individual) DIRECTOR QUALITY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A95D0780E74584466816
 Amount of Each Receipt this Period 80.00
 Memo Item
 PAYROLL DEDUCTION: \$80.00/MONTHLY

C. 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 ▼ 250.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A07C3239F9E804BB0B9F
 Amount of Each Receipt this Period 100.00
 Memo Item
 PAYROLL DEDUCTION: \$100.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 21
	<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. MUSE, ELIZABETH, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37315 CYPRESS HOLLOW AVE
 City PRAIRIEVILLE State LA Zip Code 70769-4425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS Occupation (for Individual) DIRECTOR GLOBAL PROCESS SAFE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A3D0E96F145B448BEBE7
 Amount of Each Receipt this Period 100.00
 Memo Item
 PAYROLL DEDUCTION: \$100.00/MONTHLY

B. 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 ▼ 2400.00

Date of Receipt 09 / 30 / 2022
Transaction ID : AFBB38C07E65E41B3BCD
 Amount of Each Receipt this Period 400.00
 Memo Item
 PAYROLL DEDUCTION: \$400.00/MONTHLY

C. SUMNER, RANDEE, NICHOLE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 WARWICK PARK LN
 City EDWARDSVILLE State IL Zip Code 62025-3892
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) VP & CONTROLLER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1110.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A9F4CEA1E37D34CBE8EB
 Amount of Each Receipt this Period 170.00
 Memo Item
 PAYROLL DEDUCTION: \$170.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	670.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 21
	<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. COSMI, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13109 HARBORVIEW DR
 City LINDEN State MI Zip Code 48451-9496
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE CUBE OPERATIONS Occupation (for Individual) VP GLOBAL EPOXY R&D/MID/DOWN
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **720.00**

Date of Receipt **09 / 30 / 2022**
Transaction ID : ACCF646FC18CF4F06852
 Amount of Each Receipt this Period **80.00**
 Memo Item
 PAYROLL DEDUCTION: \$80.00/MONTHLY

B. VERMILLION, TERESA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12984 FIDDLE CREEK LN
 City SAINT LOUIS State MO Zip Code 63131-1721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) VP & TREASURER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1370.00**

Date of Receipt **09 / 30 / 2022**
Transaction ID : A37170E9092FA4621A93
 Amount of Each Receipt this Period **250.00**
 Memo Item
 PAYROLL DEDUCTION: \$250.00/MONTHLY

C. AUDET, MARC, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2428 UNIVERSITY CLUB DR
 City BATON ROUGE State LA Zip Code 70810-0442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS Occupation (for Individual) MFG DIRECTOR REGION BLEACH/QL
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **270.00**

Date of Receipt **09 / 30 / 2022**
Transaction ID : A03A3CC97585F4A6B988
 Amount of Each Receipt this Period **30.00**
 Memo Item
 PAYROLL DEDUCTION: \$30.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	360.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 21
	<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. TRAGER, RICHARD, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11191 EVERGREEN LN
 City CHARLEVOIX State MI Zip Code 49720-8513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE CUBE OPERATIONS LLC Occupation (for Individual) VP, GLOBAL SERVICES & REAL EST/
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A049795127A9C483485F
 Amount of Each Receipt this Period 0.00
 Memo Item
 PAYROLL DEDUCTION: \$0.00/MONTHLY

B. 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
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 09 / 30 / 2022
Transaction ID : AA37C0B4353FB4FCEA2F
 Amount of Each Receipt this Period 150.00
 Memo Item
 PAYROLL DEDUCTION: \$150.00/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 REMEDI
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A544900921A1B40DDBB2
 Amount of Each Receipt this Period 100.00
 Memo Item
 PAYROLL DEDUCTION: \$100.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 21
	<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. LEDOUX, STEPHEN, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22767 LIGON RD
 City ZACHARY State LA Zip Code 70791-6919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE CUBE OPERATIONS LLC Occupation (for Individual) MFG DIRECTOR LAO/MCINTOSH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A0900F7BF19DF4FE2B53
 Amount of Each Receipt this Period 50.00
 Memo Item
 PAYROLL DEDUCTION: \$50.00/MONTHLY

B. WHIGHAM, LESLIE, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 SWAFFORD CEMETERY RD
 City GEORGETOWN State TN Zip Code 37336-4649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS Occupation (for Individual) VP GLOBAL CHLOR ALKALI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A6167F4F6967F4D8EB21
 Amount of Each Receipt this Period 50.00
 Memo Item
 PAYROLL DEDUCTION: \$50.00/MONTHLY

C. ANZIANO, CHRISTOPHER, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 181 ABSHIRE LN NE
 City CLEVELAND State TN Zip Code 37323-4427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS Occupation (for Individual) DIRECTOR C/A TECH CENTER DEVL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A93B3C501F01E47BAB26
 Amount of Each Receipt this Period 50.00
 Memo Item
 PAYROLL DEDUCTION: \$50.00/MONTHLY

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 21
	<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. GUTERMUTH, MICHELLE, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1016 SHADY OAK DR
 City ANGLETON State TX Zip Code 77515-7044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE CUBE OPERATIONS Occupation (for Individual) MFG DIRECTOR GCO/VINYLS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2022
Transaction ID : AAA72B924F955442A924
 Amount of Each Receipt this Period 40.00
 Memo Item
 PAYROLL DEDUCTION: \$40.00/MONTHLY

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

Date of Receipt 09 / 30 / 2022
Transaction ID : A08DA5923CE7B47E8A04
 Amount of Each Receipt this Period 0.00
 Memo Item
 PAYROLL DEDUCTION: \$0.00/MONTHLY

C. 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 ▼ 900.00

Date of Receipt 09 / 30 / 2022
Transaction ID : AE5AA9C8E1F874FA8B45
 Amount of Each Receipt this Period 100.00
 Memo Item
 PAYROLL DEDUCTION: \$100.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 21
	<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. BARKER, CHRISTINA, MARIE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1314 WILTON LN
 City KIRKWOOD State MO Zip Code 63122-6941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) VP & CHIEF INFORMATION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 311.25

Date of Receipt 09 / 30 / 2022
Transaction ID : A17F6F39B5D1047D2AA0
 Amount of Each Receipt this Period 30.00
 Memo Item
 PAYROLL DEDUCTION: \$30.00/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 ▼ 4550.00

Date of Receipt 09 / 30 / 2022
Transaction ID : AE44C4C0C78844C24B9B
 Amount of Each Receipt this Period 150.00
 Memo Item
 PAYROLL DEDUCTION: \$150.00/MONTHLY

C. 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 ▼ 900.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A0E6187F9A8424D9EB98
 Amount of Each Receipt this Period 100.00
 Memo Item
 PAYROLL DEDUCTION: \$100.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	280.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 21
	<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. SHARE, DAVID, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9101 MOUNTAIN SHADE DR
 City CHATTANOOGA State TN Zip Code 37421-7439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) VP ENVIRONMENTAL REMEDIATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A0F682CBE2DE14BF6882
 Amount of Each Receipt this Period 50.00
 Memo Item
 PAYROLL DEDUCTION: \$50.00/MONTHLY

B. CLUCAS, BRIAN, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 S BRENTWOOD BLVD APT 12F
 City CLAYTON State MO Zip Code 63105-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) VP AUDIT/ETHICS & COMPLIANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2022
Transaction ID : AD374E8A9E6574B668F1
 Amount of Each Receipt this Period 40.00
 Memo Item
 PAYROLL DEDUCTION: \$40.00/MONTHLY

C. HASKINS, DAVID, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 232 ELLINGTON CT
 City GLEN CARBON State IL Zip Code 62034-1464
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINCHESTER AMMUNITION INC. Occupation (for Individual) VP - HUMAN RESOURCES WINCHES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A2ADFE1D1E82A4D52B4A
 Amount of Each Receipt this Period 100.00
 Memo Item
 PAYROLL DEDUCTION: \$100.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	190.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 OF 21
	(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. WILSON, GREGORY, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2127 WINDPORT LN
 City SAINT LOUIS State MO Zip Code 63146-2225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE CUBE OPERATIONS LLC Occupation (for Individual) FINANCE DIRECTOR BUSINESS STR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A0A65CCC0481848608BA
 Amount of Each Receipt this Period 100.00
 Memo Item
 PAYROLL DEDUCTION: \$100.00/MONTHLY

B. WHITE, LARRY, CHRISTOPHER, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 807 OAK GROVE LN
 City OXFORD State MS Zip Code 38655-0219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN WINCHESTER Occupation (for Individual) DIRECTOR SH&E AND MAINTENNAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 30 / 2022
Transaction ID : ACCE9C503157C434DA27
 Amount of Each Receipt this Period 30.00
 Memo Item
 PAYROLL DEDUCTION: \$30.00/MONTHLY

C. CAGLE, DANA, FEA, ,
 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 ▼ 240.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A4E31A99480DD4F008A4
 Amount of Each Receipt this Period 80.00
 Memo Item
 PAYROLL DEDUCTION: \$80.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 21
	<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. KEENAN, STEPHEN, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1516 MISSISSIPPI AVE
 City SAINT LOUIS State MO Zip Code 63104-2512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) DIRECTOR INVESTOR RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A05EF2153ADF84118AAD
 Amount of Each Receipt this Period 40.00
 Memo Item
 PAYROLL DEDUCTION: \$40.00/MONTHLY

B. SZOTS, FRANCOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 FIALA WOODS CT
 City NAPERVILLE State IL Zip Code 60565-6369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS Occupation (for Individual) SENIOR DIRECTOR CONTROLLER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 378.00

Date of Receipt 09 / 30 / 2022
Transaction ID : AD061DB5BC60D425C992
 Amount of Each Receipt this Period 42.00
 Memo Item
 PAYROLL DEDUCTION: \$42.00/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 ▼ 540.00

Date of Receipt 09 / 30 / 2022
Transaction ID : AAE0585674AA049B0987
 Amount of Each Receipt this Period 60.00
 Memo Item
 PAYROLL DEDUCTION: \$60.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	142.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 21
	(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

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

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 ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2022

Transaction ID : A72B91AD0813F4F45A4A

Amount of Each Receipt this Period
50.00

Memo Item
PAYROLL DEDUCTION: \$50.00/MONTHLY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. WEBB, LLOYD, BYRON, ,

Mailing Address 3152 LAKEWOOD DR NW

City CLEVELAND	State TN	Zip Code 37312-2090
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2022

Transaction ID : A2A52895951D54F7BA51

Amount of Each Receipt this Period
50.00

Memo Item
PAYROLL DEDUCTION: \$50.00/MONTHLY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ALLEN, DENNIS, L, ,

Mailing Address 780 WATSON RD

City SULLIVAN	State MO	Zip Code 63080-2237
------------------	-------------	------------------------

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

Name of Employer (for Individual) OLIN CORPORATION	Occupation (for Individual) SENIOR DIRECTOR - INFO & CYBERS
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2022

Transaction ID : A3F378C0FCB6A4FCAA28

Amount of Each Receipt this Period
40.00

Memo Item
PAYROLL DEDUCTION: \$40.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 21
	<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. KIRKPATRICK, ANGIE, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4449 MCCOY RD
 City BETHALTO State IL Zip Code 62010-2513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN WINCHESTER Occupation (for Individual) DIRECTOR CUSTOMER FULFILLMEN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A5C286BEFCF604197BE3
 Amount of Each Receipt this Period 50.00
 Memo Item
 PAYROLL DEDUCTION: \$50.00/MONTHLY

B. COOK, KARIN, SANTOS, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 WINDING GLEN DR NW
 City CLEVELAND State TN Zip Code 37312-6390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS Occupation (for Individual) PLANT MANAGER - CAPV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A2848E442040A4E65BF1
 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 ▼ 880.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A8B685EE320D64B779D2
 Amount of Each Receipt this Period 110.00
 Memo Item
 PAYROLL DEDUCTION: \$110.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	260.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 21
	<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 ▼ 3461.40

Date of Receipt 09 / 30 / 2022
Transaction ID : A4418C77F828B448AA8B
 Amount of Each Receipt this Period 384.60
 Memo Item
 PAYROLL DEDUCTION: \$384.60/MONTHLY

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

Date of Receipt 09 / 30 / 2022
Transaction ID : A6B3B6B3C2AD34F75B38
 Amount of Each Receipt this Period 0.00
 Memo Item
 PAYROLL DEDUCTION: \$0.00/MONTHLY

C. 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 ▼ 450.00

Date of Receipt 09 / 30 / 2022
Transaction ID : A28AA16742F534037929
 Amount of Each Receipt this Period 50.00
 Memo Item
 PAYROLL DEDUCTION: \$50.00/MONTHLY

SUBTOTAL of Receipts This Page (optional).....	434.60
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 21
	<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. MONTICONE, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16049 WILSON MANOR DR
 City CHESTERFIELD State MO Zip Code 63005-4588
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE CUBE OPERATIONS LLC Occupation (for Individual) VP GLOBAL FINANCE EPOXY/INTL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 756.00

Date of Receipt 09 / 30 / 2022
Transaction ID : AFA43D2C722CB44E39CE
 Amount of Each Receipt this Period 84.00
 Memo Item
 PAYROLL DEDUCTION: \$84.00/MONTHLY

B. VARILEK, JAMES, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 413 WYTHE HOUSE CT
 City CREVE COEUR State MO Zip Code 63141-8179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLIN CORPORATION Occupation (for Individual) EVP & CHIEF OPERATING OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 30 / 2022
Transaction ID : AED8C137D8EF7422AACE
 Amount of Each Receipt this Period 100.00
 Memo Item
 PAYROLL DEDUCTION: \$100.00/MONTHLY

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

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	184.00
TOTAL This Period (last page this line number only).....	3640.60

**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 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. SCHMITT FOR SENATE

Full Name (Last, First, Middle Initial)
Mailing Address 101 W ARGONNE DR, #24

City SAINT LOUIS State MO Zip Code 63122

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name SCHMITT, ERIC, , ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: MO District:

Date of Disbursement 09 / 28 / 2022

FEC Identification Number C00775015
Transaction ID : BB4AB3F6BI
Amount of Each Disbursement this Period 5000.00

Memo Item

B. JERRY CARL FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 852138

City MOBILE State AL Zip Code 36685

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name CARL, JERRY, LEE, , JR

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: AL District: 01

Date of Disbursement 09 / 28 / 2022

FEC Identification Number C00697789
Transaction ID : B2C71CDDA4
Amount of Each Disbursement this Period 2500.00

Memo Item

C. GARRET GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 64845

City BATON ROUGE State LA Zip Code 70896

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name GRAVES, GARRET, , ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: LA District: 06

Date of Disbursement 09 / 28 / 2022

FEC Identification Number C00558486
Transaction ID : BD13ECFEF!
Amount of Each Disbursement this Period 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	12500.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) A. FRIENDS OF RON DESANTIS		Date of Disbursement MM / DD / YYYY 09 / 28 / 2022	
Mailing Address 610 SOUTH BOULEVARD		FEC Identification Number C [] Transaction ID : B114388AD0! Amount of Each Disbursement this Period [] 2500.00	
City TAMPA	State FL	Zip Code 33606-2647	Category/ Type 011
Purpose of Disbursement FL STATE-LEVEL POLITICAL CONTRIBUTION		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ OTHER		
State: District:	Memo Item <input type="checkbox"/>		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []	
City	State	Zip Code	Category/ Type
Purpose of Disbursement		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:	Memo Item <input type="checkbox"/>		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []	
City	State	Zip Code	Category/ Type
Purpose of Disbursement		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:	Memo Item <input type="checkbox"/>		

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