

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 CITY STATE ZIP CODE

C C00002790

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
July 31 Mid-Year Report (Non-election Year Only) (MY)
Termination Report (TER)

- (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

Election on MM/DD/YYYY in the State of

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period 03/01/2024 through 03/31/2024

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

Type or Print Name of Treasurer Slater, Todd, , ,

Signature of Treasurer Slater, Todd, , , Date 04/10/2024

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="2024"/> | | <input type="text" value="56264.09"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="66204.65"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="7666.50"/> | <input type="text" value="22621.50"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="73871.15"/> | <input type="text" value="78885.59"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="15000.00"/> | <input type="text" value="20014.44"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="58871.15"/> | <input type="text" value="58871.15"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

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)..... | 5423.60 | 10382.80 |
| (ii) Unitemized | 2242.90 | 12238.70 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 7666.50 | 22621.50 |
| (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) | 7666.50 | 22621.50 |
| 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)).....▶ | 7666.50 | 22621.50 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 7666.50 | 22621.50 |

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 | 14.44 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 0.00 | 14.44 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 15000.00 | 20000.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 0.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 15000.00 | 20014.44 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 15000.00 | 20014.44 |

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) | 7666.50 | 22621.50 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 7666.50 | 22621.50 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 14.44 |
| 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 | 14.44 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

| | |
|---|------------------------------|
| FOR LINE NUMBER: | PAGE 6 OF 20 |
| (check only one) | |
| <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 |

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. Baker, Melodye, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1672 Rolling Brook Dr NE
 City Cleveland State TN Zip Code 37323-5904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Olin Chlor Alkali Products Occupation (for Individual) Senior Director HR/LD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A55EF815CBCCF49FE927
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction: \$100.00/Monthly

B. Cagle, Paul, A, , Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 Cherrywood Ct
 City Lake Jackson State TX Zip Code 77566-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cube Operations Occupation (for Individual) Senior Director Global EHS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A909F4BDEAFD448CA90E
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction: \$100.00/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 ▼ 300.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A84C97A2E52B84813A14
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction: \$100.00/Monthly

| | |
|---|--------|
| 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: (check only one) | PAGE 7 OF 20 |
| | <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. 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 ▼ 240.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A566B6319367E4F7A9E7
 Amount of Each Receipt this Period 80.00
 Memo Item
 Payroll Deduction: \$80.00/Monthly

B. 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 ▼ 1153.80

Date of Receipt 03 / 31 / 2024
Transaction ID : A935FC2D7C1894EBBB9C
 Amount of Each Receipt this Period 384.60
 Memo Item
 Payroll Deduction: \$384.60/Monthly

C. Slater, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6229 Timberwolfe Dr
 City Glen Carbon State IL Zip Code 62034-1381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) SVP CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A56DA7DA59BC94034A3A
 Amount of Each Receipt this Period 400.00
 Memo Item
 Payroll Deduction: \$400.00/Monthly

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 864.60 |
| 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 8 OF 20 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

A. Cook, Karin, Santos, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 Winding Glen Dr NW
 City Cleveland State TN Zip Code 37312-6390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Olin ChlorAlkali Products Occupation (for Individual) Plant Manager - CAPV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A3B3BC833FD58464F95D
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction: \$100.00/Monthly

B. Allison, James, Reginald, , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20907 S Jefferson Pkwy
 City Pleasant Hill State MO Zip Code 64080-9733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Olin Winchester Lake City Occupation (for Individual) VP Operations LCAAP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A8FD44DE53FD349E5BC6
 Amount of Each Receipt this Period 300.00
 Memo Item
 Payroll Deduction: \$300.00/Monthly

C. Thomas, Verghese, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2116 Snow Mass Ct
 City Southlake State TX Zip Code 76092-3843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cube Operations LLC Occupation (for Individual) Vice President, Epoxy Systems and Chi
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A0E79FB6BA46D4708934
 Amount of Each Receipt this Period 200.00
 Memo Item
 Payroll Deduction: \$200.00/Monthly

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 600.00 |
| 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 20 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <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. Schumacher, Patrick, Murphy, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3520 Southwestern Blvd
 City Dallas State TX Zip Code 75225-7454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Olin Chlor Alkali Products Occupation (for Individual) VP & President CAPV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A3FCBE37EB8B6479C9C4
 Amount of Each Receipt this Period 200.00
 Memo Item
 Payroll Deduction: \$200.00/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 ▼ 300.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A1F6C2944F2214EE9B2D
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction: \$100.00/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 Corporation Occupation (for Individual) VP Finance Olin CAPV
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 31 / 2024
Transaction ID : AD7380751529D44B6896
 Amount of Each Receipt this Period 80.00
 Memo Item
 Payroll Deduction: \$80.00/Monthly

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 380.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 10 OF 20 |
| <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. 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 ▼ 510.00

Date of Receipt 03 / 31 / 2024
Transaction ID : AA3A0F8D06292430AAE6
 Amount of Each Receipt this Period 170.00
 Memo Item
 Payroll Deduction: \$170.00/Monthly

B. 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 ▼ 240.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A0417C9D2AA63456B927
 Amount of Each Receipt this Period 80.00
 Memo Item
 Payroll Deduction: \$80.00/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 Winchester
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2024
Transaction ID : AD1E4BD71B0FD4BAB99E
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction: \$100.00/Monthly

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 350.00 |
| 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 20 |
| | <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. Gumpel, Damian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14705 White Lane Ct
 City Chesterfield State MO Zip Code 63017-7955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cube Operations LLC Occupation (for Individual) VP Corporate Strategy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A86A06672DB9C4CFF8E0
 Amount of Each Receipt this Period 400.00
 Memo Item
 Payroll Deduction: \$400.00/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 ▼ 1200.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A0BEE8C3AD5EA4145B91
 Amount of Each Receipt this Period 400.00
 Memo Item
 Payroll Deduction: \$400.00/Monthly

C. Muse, Elizabeth, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37315 Cypress Hollow Ave
 City Prairieville State LA Zip Code 70769-4425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Olin ChlorAlkali Products Occupation (for Individual) Director Global Process Safety
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2024
Transaction ID : AB872716E67E4449E93B
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction: \$100.00/Monthly

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 900.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 20 |
| | <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. Flaughter, Brett, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Donna Ct
 City Edwardsville State IL Zip Code 62025-3311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Olin Winchester Occupation (for Individual) VP & President Winchester
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2024
Transaction ID : ABDD970CD09A64AF1A42
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction: \$100.00/Monthly

B. Boerner, Dave, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 Poppy Ct
 City Lake Jackson State TX Zip Code 77566-3270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cube Operations LLC Occupation (for Individual) Leader, Product Planning TXO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A4CC6A2B60BA040BF833
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction: \$100.00/Monthly

C. Burris, Joy, VanDee, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 199 Savannah Ridge Trl NE
 City Cleveland State TN Zip Code 37323-4551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Olin Chlor Alkali Products Occupation (for Individual) Marketing Director Bleach
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 31 / 2024
Transaction ID : AF8B2C01862CA4C56B80
 Amount of Each Receipt this Period 200.00
 Memo Item
 Payroll Deduction: \$200.00/Monthly

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 400.00 |
| 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 20 | | |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 | <input type="checkbox"/> 11c <input type="checkbox"/> 15 | <input type="checkbox"/> 12 <input type="checkbox"/> 16 |

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

A. Cashwell, James, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7335 Lazy Brook Ct
 City Ooltewah State TN Zip Code 37363-9477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) Director Enviromental Remediation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A2174D6D23F174ED19C1
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction: \$100.00/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 ▼ 450.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A259FE646465F4CF9B95
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll Deduction: \$150.00/Monthly

C. O'Callaghan, Christin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1115 Bent Tree Trails Dr
 City Fenton State MO Zip Code 63026-2348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) Global Communications Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 31 / 2024
Transaction ID : AF98765383CF74035B4F
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll Deduction: \$150.00/Monthly

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 400.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 14 OF 20
Use separate schedule(s) for each category of the Detailed Summary Page
[] 11a [] 11b [] 11c [] 12
[] 13 [] 14 [] 15 [] 16 [] 17

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

A. Cagle, Dana, Feak, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 56 Cherrywood Ct
City Lake Jackson State TX Zip Code 77566-3203
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Olin ChlorAlkali Products Occupation (for Individual) Senior Director, Global EHS
Receipt For: [] Primary [] General [] Other (specify)
Aggregate Year-to-Date 240.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A93A5FC6D1EDE41F0BC2
Amount of Each Receipt this Period 80.00
Memo Item
Payroll Deduction: \$80.00/Monthly

B. Cosmi, Frank, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 13109 Harborview Dr
City Linden State MI Zip Code 48451-9496
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Blue Cube Operations Occupation (for Individual) VP Global Epoxy R&D/Mid/Downstream
Receipt For: [] Primary [] General [] Other (specify)
Aggregate Year-to-Date 240.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A0FA99D8E512741E2A56
Amount of Each Receipt this Period 80.00
Memo Item
Payroll Deduction: \$80.00/Monthly

C. Meenan, John, Michael, , Jr
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3501 Shepherd St
City Chevy Chase State MD Zip Code 20815-3221
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) Olin Corporation Occupation (for Individual) Director Global Government Affairs
Receipt For: [] Primary [] General [] Other (specify)
Aggregate Year-to-Date 450.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A137191B41F44429D820
Amount of Each Receipt this Period 150.00
Memo Item
Payroll Deduction: \$150.00/Monthly

SUBTOTAL of Receipts This Page (optional) 310.00
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 20 |
| <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. Tittle, George, A, , Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2305 NW Willow St
 City Bentonville State AR Zip Code 72712-4491
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Winchester Ammunition Inc. Occupation (for Individual) Business Mgr - Retail Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 31 / 2024
Transaction ID : AE9A402D99B1247159BB
 Amount of Each Receipt this Period 80.00
 Memo Item
 Payroll Deduction: \$80.00/Monthly

B. 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 ▼ 595.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A7C446426E0B6480FB90
 Amount of Each Receipt this Period 255.00
 Memo Item
 Payroll Deduction: \$255.00/Monthly

C. Russo, Frank, John, , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12803 Craystone Cir
 City Midlothian State VA Zip Code 23113-9699
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) VP/Deputy General Counsel Litigation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A11A1C906AE554934AB7
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction: \$100.00/Monthly

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 435.00 |
| 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 16 OF 20 |
| | <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. O'Brien, Dana, Carabin, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2440 Medford Ct W
 City Fort Worth State TX Zip Code 76109-1139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) Sr VP General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 31 / 2024
Transaction ID : A45CACAFEF1FC4C1DA7;
 Amount of Each Receipt this Period 200.00
 Memo Item
 Payroll Deduction: \$200.00/Monthly

B. Keune, David, M, , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1651 Garden Valley Dr
 City Wildwood State MO Zip Code 63038-1494
 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 ▼ 300.00

Date of Receipt 03 / 31 / 2024
Transaction ID : AAA632AC9BC69476BACD
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction: \$100.00/Monthly

C. Budner, Bradley, Martin, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7144 W Main St
 City Niles State IL Zip Code 60714-2214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) K.A. Steel Chemicals Occupation (for Individual) Terminal and Warehouse Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2024
Transaction ID : AB52C4F58DA484EC9BF6
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction: \$100.00/Monthly

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 400.00 |
| 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 20 |
| <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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Monticone, Carl, , ,

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) Olin Chlor Alkali Products | Occupation (for Individual) VP Global Finance Epoxy/Intl |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03 | | 31 | | 2024 |

Transaction ID : A461B1DF608EB4DEE854

Amount of Each Receipt this Period
84.00

Memo Item
Payroll Deduction: \$84.00/Monthly

B. 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

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

Memo Item

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

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 84.00 |
| TOTAL This Period (last page this line number only)..... | 5423.60 |

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)

Form for line numbers 21b-28a, 22-28b, 23-28c, 26-29, 27-30b with checkboxes.

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NAME OF COMMITTEE (In Full)

OLIN CORPORATION GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. JERRY CARL FOR CONGRESS

Mailing Address PO BOX 852138

City MOBILE State AL Zip Code 36685

Purpose of Disbursement Political Contribution Category/Type 011

Candidate Name

Carl, Jerry, Lee, , JR

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify)

State: AL District: 01

Date of Disbursement

Date of Disbursement form: 03 / 12 / 2024

FEC Identification Number

C00697789

Transaction ID : BDA36BA44F

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ANN WAGNER FOR CONGRESS

Mailing Address PO BOX 50

City BALLWIN State MO Zip Code 63022

Purpose of Disbursement Void Contribution Dated 11/14/2023 Category/Type 011

Candidate Name

Wagner, Ann, L, ,

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify)

State: MO District: 02

Date of Disbursement

Date of Disbursement form: 03 / 31 / 2024

FEC Identification Number

C00495846

Transaction ID : B267BF622E

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: -2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. WEBER FOR CONGRESS

Mailing Address 1701 BENDING STREAM

City FRIENDSWOOD State TX Zip Code 77546

Purpose of Disbursement Political Contribution Category/Type 011

Candidate Name

Weber, Randy, , ,

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify)

State: TX District: 14

Date of Disbursement

Date of Disbursement form: 03 / 12 / 2024

FEC Identification Number

C00502229

Transaction ID : B5E656EC0F

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

SUBTOTAL form: 5000.00

TOTAL form: 5000.00

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)

Form for line numbers 21b-28a, 22-28b, 23-28c, 26-29, 27-30b with checkboxes.

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NAME OF COMMITTEE (In Full)

OLIN CORPORATION GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. WINNING FOR AMERICA PAC

Mailing Address 101 W ARGONNE DR #24

City SAINT LOUIS State MO Zip Code 63122

Purpose of Disbursement Political Contribution Category/Type 011

Candidate Name WINNING FOR AMERICA PAC

Office Sought: House, Senate, President; Disbursement For: 2024; Primary, General, Other (specify) Other

State: District:

Date of Disbursement

Date of Disbursement form: MM/DD/YYYY (03/12/2024)

FEC Identification Number

C00826362

Transaction ID : B12625C28BI

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period form: 5000.00

Memo Item

B. COMMON SENSE FOR AMERICA PAC

Mailing Address 3337 N. HULLEN ST. SUITE 301

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement Political Contribution Category/Type 011

Candidate Name COMMON SENSE FOR AMERICA PAC

Office Sought: House, Senate, President; Disbursement For: 2024; Primary, General, Other (specify) Other

State: District:

Date of Disbursement

Date of Disbursement form: MM/DD/YYYY (03/12/2024)

FEC Identification Number

C00634774

Transaction ID : B5E0AF1D29I

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period form: 5000.00

Memo Item

C. TEAM KATIE

Mailing Address PO BOX 3723

City MONTGOMERY State AL Zip Code 36109

Purpose of Disbursement Political Contribution Category/Type 011

Candidate Name TEAM KATIE

Office Sought: House, Senate, President; Disbursement For: 2024; Primary, General, Other (specify) Other

State: District:

Date of Disbursement

Date of Disbursement form: MM/DD/YYYY (03/12/2024)

FEC Identification Number

C00823930

Transaction ID : BB250A5609

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period form: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

SUBTOTAL form: 15000.00

TOTAL form: 15000.00

**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

Full Name (Last, First, Middle Initial)

A. JOHNSON LEADERSHIP FUND

Mailing Address C/O 228 S. WASHINGTON ST.
STE. 115

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement

Void Contribution Dated 12/18/2023

Candidate Name

JOHNSON LEADERSHIP FUND

Office Sought: House
 Senate
 President

Disbursement For: 2023
 Primary General
 Other (specify) **▼**
Other

State: District:

011
Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 3 | 1 | | 2 | 0 | 2 | 4 |

FEC Identification Number

C C00771246

Transaction ID : B8A0AEE80C

Amount of Each Disbursement this Period

- 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| | | | | | | | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) **▼**

State: District:

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| | | | | | | | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

- 5000.00

15000.00