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DEC 23 A 10:51

December 23, 1999

Francine L. Higginbotham
Specialist
202-496-7514
frlh_higginbotham@mckennacuneo.com

By Hand Delivery

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

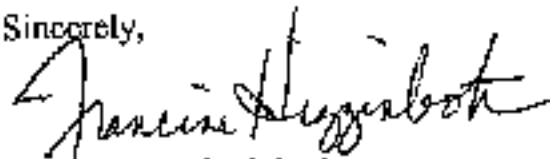
Re: Olin Corporation Good Government Fund

Dear Sir/Madam:

On behalf of the Olin Corporation Good Government Fund, enclosed for filing is an amended Statement of Organization. Please date-stamp the copy and return it to the messenger who delivers the document.

Please contact me at the number indicated above if you have any questions. Thank you.

Sincerely,



Francine L. Higginbotham

/flh
Enclosures

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

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1. (a) NAME OF COMMITTEE IN FULL <input type="checkbox"/> (Check if name is changed) Olin Corporation Good Government Fund	2. DATE 12/13/99
(b) Number and Street Address <input checked="" type="checkbox"/> (Check if address is changed) 1186 Lower River Road, P.O. Box 248	3. FEC Identification Number C00002790
(c) City, State and ZIP Code Charleston, TN 37310	4. Is This Report An Amendment? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

5. TYPE OF COMMITTEE (Check one)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- | Name of Candidate | Candidate Party Affiliation | Office Sought | State/District |
|-------------------|-----------------------------|---------------|----------------|
| | | | |
- (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee. (name of candidate)
- (d) This committee is a _____ committee of the _____ Party. (National, State or subordinate) (Democratic, Republican, etc.)
- (e) This committee is a separate segregated fund.
- (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization
 Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association Cooperative

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position
Kim Passmore	same as above	Legislative Specialist

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code

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


TYPE OR PRINT NAME OF TREASURER	SIGNATURE OF TREASURER	DATE
Edward J. Krygier, Jr.	<i>Edward J. Krygier, Jr.</i>	12/23/99

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 12-23-99
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PREPARER	DATE PREPARED