

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) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special Election on 11/08/2022 in the State of MO

5. Covering Period 10/20/2022 through 11/28/2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. SLATER, TODD, , , Type or Print Name of Treasurer

Signature of Treasurer SLATER, TODD, , , [Electronically Filed] Date 12/02/2022

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="2022"/>	<input type="text" value="44746.50"/>	<input type="text" value="44746.50"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="33329.90"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="4153.10"/>	<input type="text" value="43067.75"/>
(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="37483.00"/>	<input type="text" value="87814.25"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="143.03"/>	<input type="text" value="50474.28"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="37339.97"/>	<input type="text" value="37339.97"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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:**

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).....	3690.60	32348.75
(ii) Unitemized .....	462.50	10719.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4153.10	43067.75
(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) .....	4153.10	43067.75
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)).....▶	4153.10	43067.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4153.10	43067.75

**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 .....	143.03	474.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	143.03	474.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	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).....	0.00	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)) ..	143.03	50474.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	143.03	50474.28

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	4153.10	43067.75
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4153.10	43067.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	143.03	474.28
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	143.03	474.28

**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 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

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

Name of Employer (for Individual) OLIN CORPORATION	Occupation (for Individual) DEPUTY GEN COUNSEL VP CORPOF
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
273.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2022

**Transaction ID : AFC7319AC7C094CCA8FD**

Amount of Each Receipt this Period  
0.00

Memo Item  
PAYROLL DEDUCTION: \$0.00/MONTHLY

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

Name of Employer (for Individual) BLUE CUBE OPERATIONS	Occupation (for Individual) GCO COMMERCIAL DIRECTOR
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2022

**Transaction ID : A477D78AB09AA4E20997**

Amount of Each Receipt this Period  
50.00

Memo Item  
PAYROLL DEDUCTION: \$50.00/MONTHLY

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

Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS	Occupation (for Individual) VP FINANCE OLIN CAPV
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2022

**Transaction ID : A3A17A0C0A74D4DB08E6**

Amount of Each Receipt this Period  
60.00

Memo Item  
PAYROLL DEDUCTION: \$60.00/MONTHLY

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	110.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 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. 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
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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 ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2022

**Transaction ID : A4C05E750566E42BDA95**

Amount of Each Receipt this Period  
50.00

Memo Item  
PAYROLL DEDUCTION: \$50.00/MONTHLY

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

Name of Employer (for Individual) OLIN WINCHESTER	Occupation (for Individual) DIRECTOR CUSTOMER FULFILLMEN
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2022

**Transaction ID : A4C33DA2538234E2B9D1**

Amount of Each Receipt this Period  
50.00

Memo Item  
PAYROLL DEDUCTION: \$50.00/MONTHLY

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

Mailing Address 3152 LAKEWOOD DR NW

City CLEVELAND	State TN	Zip Code 37312-2090
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS	Occupation (for Individual) DIRECTOR COMMERCIAL ENERGY
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2022

**Transaction ID : AA2AA70974C644CAA97E**

Amount of Each Receipt this Period  
50.00

Memo Item  
PAYROLL DEDUCTION: \$50.00/MONTHLY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 20
	(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. 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 ▼ 1000.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : A9F716F087B584368979**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 PAYROLL DEDUCTION: \$100.00/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 ▼ 341.25

Date of Receipt 10 / 31 / 2022  
**Transaction ID : A9AC184B8F71C481EA72**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 PAYROLL DEDUCTION: \$30.00/MONTHLY

**C. 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 SOLUTIC  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : AE724E4BAB9AD4D67A80**  
 Amount of Each Receipt this Period 0.00  
 Memo Item  
 PAYROLL DEDUCTION: \$0.00/MONTHLY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	130.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 20
	(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. 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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BLUE CUBE OPERATIONS	Occupation (for Individual) SENIOR DIRECTOR GLOBAL EHS
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M / D D / Y Y Y Y Y
10 / 31 / 2022

**Transaction ID : AE6F9172A91444114997**

Amount of Each Receipt this Period  
100.00

Memo Item  
PAYROLL DEDUCTION: \$100.00/MONTHLY

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

Name of Employer (for Individual) BLUE CUBE OPERATIONS	Occupation (for Individual) MFG DIRECTOR GCO/VINYLS
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M / D D / Y Y Y Y Y
10 / 31 / 2022

**Transaction ID : A0D78D0E081A44E52BDE**

Amount of Each Receipt this Period  
40.00

Memo Item  
PAYROLL DEDUCTION: \$40.00/MONTHLY

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

Mailing Address 780 WATSON RD

City SULLIVAN	State MO	Zip Code 63080-2237
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OLIN CORPORATION	Occupation (for Individual) SENIOR DIRECTOR - INFO & CYBERS
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M / D D / Y Y Y Y Y
10 / 31 / 2022

**Transaction ID : A1D0CC8CED6AB49C19D1**

Amount of Each Receipt this Period  
40.00

Memo Item  
PAYROLL DEDUCTION: \$40.00/MONTHLY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	180.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 20
	(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. SZOTS, FRANCOIS, , ,**

Mailing Address 219 FIALA WOODS CT

City NAPERVILLE	State IL	Zip Code 60565-6369
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OLIN CHLORALKALI PRODUCTS	Occupation (for Individual) SENIOR DIRECTOR CONTROLLER
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2022

**Transaction ID : A6D43916D833F46388F2**

Amount of Each Receipt this Period  
42.00

Memo Item  
PAYROLL DEDUCTION: \$42.00/MONTHLY

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

Mailing Address 2127 WINDPORT LN

City SAINT LOUIS	State MO	Zip Code 63146-2225
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BLUE CUBE OPERATIONS LLC	Occupation (for Individual) FINANCE DIRECTOR BUSINESS STR
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2022

**Transaction ID : A46815F46D50043C9903**

Amount of Each Receipt this Period  
100.00

Memo Item  
PAYROLL DEDUCTION: \$100.00/MONTHLY

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

Mailing Address 9101 MOUNTAIN SHADE DR

City CHATTANOOGA	State TN	Zip Code 37421-7439
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OLIN CORPORATION	Occupation (for Individual) VP ENVIRONMENTAL REMEDIATION
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2022

**Transaction ID : A7A8558115CBC458E8EC**

Amount of Each Receipt this Period  
50.00

Memo Item  
PAYROLL DEDUCTION: \$50.00/MONTHLY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	192.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 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. 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 ▼ 1000.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : ADA022D38BEB846A0B03**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 PAYROLL DEDUCTION: \$100.00/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 ▼ 290.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : AB12B0D632909426E99E**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 PAYROLL DEDUCTION: \$40.00/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 ▼ 1000.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : A44737205E1554FC7A2A**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 PAYROLL DEDUCTION: \$100.00/MONTHLY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	240.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 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	

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. 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 ▼ 300.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : AD9210920169F4E36970**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 PAYROLL DEDUCTION: \$30.00/MONTHLY

**B. 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 ▼ 400.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : A0397F3A0FF14413DA44**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 PAYROLL DEDUCTION: \$40.00/MONTHLY

**C. 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 ▼ 320.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : AB11077D9E7804ABFAE5**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 PAYROLL DEDUCTION: \$80.00/MONTHLY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 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	<input type="checkbox"/> 17

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

**A. 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 ▼ 4700.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : A8B3DBED3ECFF49319DE**  
 Amount of Each Receipt this Period 150.00  
 Memo Item  
 PAYROLL DEDUCTION: \$150.00/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 ▼ 500.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : AC2D5F7E460E348C3B4F**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 PAYROLL DEDUCTION: \$50.00/MONTHLY

**C. 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 ▼ 1620.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : AE4599BC5C02B41618F3**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 PAYROLL DEDUCTION: \$250.00/MONTHLY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 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. 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 ▼ 500.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : A4BA80CAC994275A38**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 PAYROLL DEDUCTION: \$50.00/MONTHLY

**B. 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 ▼ 500.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : A387E57C10F504136974**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 PAYROLL DEDUCTION: \$50.00/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 ▼ 1000.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : A0BD49826981349648AE**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 PAYROLL DEDUCTION: \$100.00/MONTHLY

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 OF 20
	(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. 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 10 / 31 / 2022  
**Transaction ID : AF002EB590E554CB9B36**  
 Amount of Each Receipt this Period 0.00  
 Memo Item  
 PAYROLL DEDUCTION: \$0.00/MONTHLY

**B. 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/Q  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : ABE1BA45C2874423794F**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 PAYROLL DEDUCTION: \$30.00/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 A  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : A88283C5B25364363900**  
 Amount of Each Receipt this Period 150.00  
 Memo Item  
 PAYROLL DEDUCTION: \$150.00/MONTHLY

**SUBTOTAL** of Receipts This Page (optional).....▶ 180.00  
**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"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**OLIN CORPORATION GOOD GOVERNMENT FUND**

**A. 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 800.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : A816C1AA5A5FF4127859**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 PAYROLL DEDUCTION: \$80.00/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 1000.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : A2A247367F5AB47E98DD**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 PAYROLL DEDUCTION: \$100.00/MONTHLY

**C. 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 840.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : AC7259F1C020445AA8C5**  
 Amount of Each Receipt this Period 84.00  
 Memo Item  
 PAYROLL DEDUCTION: \$84.00/MONTHLY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	264.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 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. 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 ▼ 990.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : A2C0E6500A6BA4D2EBE2**  
 Amount of Each Receipt this Period 110.00  
 Memo Item  
 PAYROLL DEDUCTION: \$110.00/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 ▼ 3846.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : AAD6E633EBA974DF5883**  
 Amount of Each Receipt this Period 384.60  
 Memo Item  
 PAYROLL DEDUCTION: \$384.60/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 SAFE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : AE445A97D37F5485F9CC**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 PAYROLL DEDUCTION: \$100.00/MONTHLY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	594.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 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"/>	<input type="checkbox"/> 17

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

**A. 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 DIRECT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : A4897495ED27A411CB61**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 PAYROLL DEDUCTION: \$50.00/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 ▼ 2800.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : AF3FB3513A9464375891**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 PAYROLL DEDUCTION: \$400.00/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 ▼ 350.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : A045DDDEB86B5452FA8C**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 PAYROLL DEDUCTION: \$100.00/MONTHLY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 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 ▼ 1280.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : A5914BCD20D9343B1936**  
 Amount of Each Receipt this Period 170.00  
 Memo Item  
 PAYROLL DEDUCTION: \$170.00/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 ▼ 360.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : A467FEB91FDA4C5BA45**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 PAYROLL DEDUCTION: \$80.00/MONTHLY

**C. 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 ▼ 500.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : A4E8845D72D0A40E7854**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 PAYROLL DEDUCTION: \$50.00/MONTHLY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	3690.60

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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

**A. BANK OF AMERICA**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 25118

City TAMPA State FL Zip Code 33622-5118

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 20 / 2022

FEC Identification Number: C

Transaction ID : BA57ADF777

Amount of Each Disbursement this Period: 143.03

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	143.03
<b>TOTAL</b> This Period (last page this line number only).....▶	143.03