

# 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) 600 Powder Mill Road

Check if different than previously reported. (ACC)

East Alton IL 62024-1273

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:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M / D D / Y Y Y Y Y Y in the State of  

(d) 30-Day POST-Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
--	---------------------------------------	--

Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 01 / 01 / 2017 through M M / D D / Y Y Y Y Y Y 06 / 30 / 2017

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

Type or Print Name of Treasurer

Signature of Treasurer Slater, Todd, A, Mr., [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 07 / 28 / 2017

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="2017"/>		52422.30
(b) Cash on Hand at Beginning of Reporting Period.....	52422.30	
(c) Total Receipts (from Line 19) .....	3046.64	3046.64
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	55468.94	55468.94
7. Total Disbursements (from Line 31).....	3530.71	3530.71
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	51938.23	51938.23
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Olin Corporation Good Government Fund**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1425.98	1425.98
(ii) Unitemized .....	1620.66	1620.66
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3046.64	3046.64
(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) .....	3046.64	3046.64
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)).....▶	3046.64	3046.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3046.64	3046.64

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	3500.00
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).....	30.71	30.71
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)) ..	3530.71	3530.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3530.71	3530.71

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	3046.64	3046.64
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3046.64	3046.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**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 12
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. McIntosh, John, L, ,</b>			Date of Receipt
Mailing Address 516 Anatole LN NW			<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City Cleveland	State TN	Zip Code 37312	<b>Transaction ID : SA11AI.6977</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) Olin Corporation		Occupation (for Individual) Sr. Vice President; Operations	<input type="checkbox"/> Memo Item contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. McIntosh, John, L, ,</b>			Date of Receipt
Mailing Address 516 Anatole LN NW			<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City Cleveland	State TN	Zip Code 37312	<b>Transaction ID : SA11AI.6990</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) Olin Corporation		Occupation (for Individual) Sr. Vice President; Operations	<input type="checkbox"/> Memo Item contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. McIntosh, John, L, ,</b>			Date of Receipt
Mailing Address 516 Anatole LN NW			<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City Cleveland	State TN	Zip Code 37312	<b>Transaction ID : SA11AI.7003</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) Olin Corporation		Occupation (for Individual) Sr. Vice President; Operations	<input type="checkbox"/> Memo Item contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. McIntosh, John, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 516 Anatole LN NW  
 City Cleveland State TN Zip Code 37312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) Sr. Vice President; Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2017  
**Transaction ID : SA11AI.7015**  
 Amount of Each Receipt this Period 100.00  
 Memo Item contribution

**B. O'Keefe, Thomas, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 336 Westminster  
 City Glen Carbon State IL Zip Code 62034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation - Winchester Occupation (for Individual) President; Winchester  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 289.50

Date of Receipt 03 / 31 / 2017  
**Transaction ID : SA11AI.6982**  
 Amount of Each Receipt this Period 96.50  
 Memo Item contribution

**C. O'Keefe, Thomas, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 336 Westminster  
 City Glen Carbon State IL Zip Code 62034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation - Winchester Occupation (for Individual) President; Winchester  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt 04 / 30 / 2017  
**Transaction ID : SA11AI.6995**  
 Amount of Each Receipt this Period 96.50  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	293.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 12
	<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. O'Keefe, Thomas, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 336 Westminster  
 City Glen Carbon State IL Zip Code 62034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation - Winchester Occupation (for Individual) President; Winchester  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 482.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2017  
**Transaction ID : SA11AI.7007**  
 Amount of Each Receipt this Period 96.50  
 Memo Item contribution

**B. O'Keefe, Thomas, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 336 Westminster  
 City Glen Carbon State IL Zip Code 62034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation - Winchester Occupation (for Individual) President; Winchester  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 579.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2017  
**Transaction ID : SA11AI.7019**  
 Amount of Each Receipt this Period 96.50  
 Memo Item contribution

**C. Rupp, Joseph, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10918 Conway Road  
 City Frontenac State MO Zip Code 63131  
 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 ▼ 333.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2017  
**Transaction ID : SA11AI.6963**  
 Amount of Each Receipt this Period 166.66  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	359.66
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 12
	<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. Rupp, Joseph, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10918 Conway Road  
 City Frontenac State MO Zip Code 63131  
 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 ▼ 499.98

Date of Receipt **03 / 31 / 2017**  
**Transaction ID : SA11AI.6978**  
 Amount of Each Receipt this Period 166.66  
 Memo Item contribution

**B. Rupp, Joseph, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10918 Conway Road  
 City Frontenac State MO Zip Code 63131  
 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 ▼ 666.64

Date of Receipt **04 / 30 / 2017**  
**Transaction ID : SA11AI.6991**  
 Amount of Each Receipt this Period 166.66  
 Memo Item contribution

**C. Tindal, James, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 359 Bell Crest Dr NW  
 City Cleveland State TN Zip Code 37312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Olin Corporation Occupation (for Individual) Engineer Sr. Associate - Project  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **06 / 30 / 2017**  
**Transaction ID : SA11AI.7012**  
 Amount of Each Receipt this Period 40.00  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	373.32
<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 12  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2017  
**Transaction ID : SA11AI.7002**  
 Amount of Each Receipt this Period 50.00  
 Memo Item contribution

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2017  
**Transaction ID : SA11AI.7014**  
 Amount of Each Receipt this Period 50.00  
 Memo Item contribution

**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 Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1425.98

**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) <b>A. FRIENDS OF JOHN BARRASSO</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2017
Mailing Address PO BOX 52008		FEC Identification Number C S6WY00068 <b>Transaction ID : SB23.7024</b>
City CASPER	State WY	Zip Code 82605
Purpose of Disbursement contribution		011 Category/ Type
Candidate Name <b>BARRASSO, JOHN A, , ,</b>		Amount of Each Disbursement this Period 2500.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WY District: 00	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. KELLY FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2017
Mailing Address 5221-A CLIFF GOOKIN BLVD		FEC Identification Number C C00573980 <b>Transaction ID : SB23.7023</b>
City TUPELO	State MS	Zip Code 38801
Purpose of Disbursement contribution		011 Category/ Type
Candidate Name		Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Category/ Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3500.00

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

Form/Schedule: SB23

Transaction ID : SB23.7024

Office sought: senate; state: wy; primary

Form/Schedule: SB23

Transaction ID: SB23.7023

Office sought: house; state: ms; 1st district; primary