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JUN 26 P 2 47

San Diego
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June 24, 2003

Francine L. Higginbotham
Specialist
202-496-7514
fran_higginbotham@mckennalong.com

By Hand Delivery

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

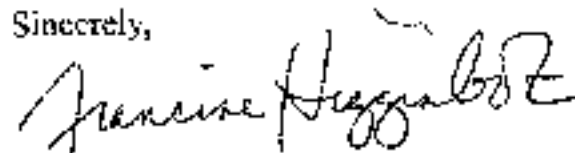
Re: Olin Corporation Good Government Fund

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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2003 JUN 26 P 2:47

1. (a) NAME OF COMMITTEE # FULL <input type="checkbox"/> (Check if name is changed) Olin Corporation Good Government Fund	2. DATE June 18, 2003
(b) Number and Street Address <input checked="" type="checkbox"/> (Check if address is changed) 501 Merritt 7, P.O. Box 4500	3. FEC Identification Number C00002790
(c) City, State and ZIP Code Norwalk, CT 06856-4500	4. Is This Packet An Amendment? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

3. TYPE OF COMMITTEE (Check one)

(a) This committee is a principal campaign committee. (Complete the candidate information below.)

(b) The 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.

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

Type of Connected Organization:
 Corporation Corporation with 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
Victoria Garcia	Same as above	Investor Relations and Public Affairs Administrator

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>	6/19/03

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. 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 <i>6-26-03</i>
<input type="checkbox"/>	First Class Mail	POSTMARKED
<input type="checkbox"/>	Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/>	No Postmark	
<input type="checkbox"/>	Postmark Illegible	
<input type="checkbox"/>	Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/>	Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/>	Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/>	Electronic Filing	
<i>AMP</i> PREPARER		<i>6-27-03</i> DATE PREPARED