

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

1. NAME OF COMMITTEE (in full) Olin Corporation Good Government Fund		2. FEC IDENTIFICATION NUMBER CXX002790
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 501 Merritt Seven P.O. Box 4500	3. <input checked="" type="checkbox"/> This committee has qualified as a multi-candidate committee (see FEC Form 1M)	
CITY, STATE, and ZIP CODE Norwalk CT 06856-4500		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report Monthly Report Due On:
- | | | |
|--------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input checked="" type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report Twelfth day report preceding _____
(election type)
- July 31 Mid-Year Report (Non-election Year Only) election on _____ In the State of _____
- Termination report on _____ In the State of _____
- Thirtieth day report following the General Election
- (b) Is this Report an Amendment YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>09/01/2000</u> through <u>09/30/2000</u>		
6. (a) Cash on Hand, January 1, <u>2000</u>		33437.75
(b) Cash on Hand at Beginning of Reporting Period	36350.37	
(c) Total Receipts (from line 19)	1561.26	14073.86
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	37911.63	47511.63
7. Total Disbursements (from line 30)	4200.00	13800.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	33711.63	33711.63
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	For further information contact: Federal Election Commission 989 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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 Electronically Filed by Edward J. Krygier	
Signature of Treasurer	Date 10/20/2000

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE Olin Corporation Good Government Fund		REPORT COVERING PERIOD	
		FROM 09/01/2000	TO: 09/30/2000
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	951.02	4472.25	11.a.i.
ii. Unitemized	609.64	9601.63	11.a.ii.
iii. Total	1561.26	14073.88	11.a.iii.
b. Political Party Committees	0.00	0.00	11.b.
c. Other Political Committees (such as PACs)	0.00	0.00	11.c.
d. Total Contributions	1561.26	14073.88	11.d.
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12.
13. All Loans Received	0.00	0.00	13.
14. Loan Repayments Received	0.00	0.00	14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees ..	0.00	0.00	16.
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17.
18. Transfers From Nonfederal Account for Joint Activity	0.00	0.00	18.
19. Total Receipts	1561.26	14073.88	19.
20. Total Federal Receipts	1561.26	14073.88	20.
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21.a.i.
ii. Non-Federal Share	0.00	0.00	21.a.ii.
b. Other Federal Operating Expenditures	0.00	0.00	21.b.
c. Total Operating Expenditures	0.00	0.00	21.c.
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees	2200.00	7000.00	23.
24. Independent Expenditures (use Schedule E)	0.00	0.00	24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. F)	0.00	0.00	25.
26. Loan Repayments Made	0.00	0.00	26.
27. Loans Made	0.00	0.00	27.
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28.a.
b. Political Party Committees	0.00	0.00	28.b.
c. Other Political Committees (such as PACs)	0.00	0.00	28.c.
d. Total Contributions Refunds	0.00	0.00	28.d.
29. Other Disbursements	2000.00	6800.00	29.
30. Total Disbursements	4200.00	13800.00	30.
31. Total Federal Disbursements	4200.00	13800.00	31.
III. Net Contributions / Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	1561.26	14073.88	32.
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	1561.26	14073.88	34.
35. Total Federal Operating Expenditures	0.00	0.00	35.
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36.
37. Net Operating Expenditures	0.00	0.00	37.

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	3 / 8
			FOR LINE NUMBER 11A1

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, Mailing Address, and ZIP Code Mr. Derek E Tyler 300 Jinny Hill Road Cheshire CT 06410 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 81.75
	Occupation		
	Aggregate Year-to-Date > \$ 729.52		
Full Name, Mailing Address, and ZIP Code Yekaterina Torban 437 Westland Ave Cheshire CT 06410 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 25.00
	Occupation		
	Aggregate Year-to-Date > \$ 224.16		
Full Name, Mailing Address, and ZIP Code Mr. J C Fister 28 Norwood Ave Hamden CT 06514 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 25.00
	Occupation		
	Aggregate Year-to-Date > \$ 225.00		
Full Name, Mailing Address, and ZIP Code Mr. Michael P Devito 231 Park Road Waterbury CT 06708 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 25.84
	Occupation		
	Aggregate Year-to-Date > \$ 225.56		
Full Name, Mailing Address, and ZIP Code Mr. Donald W Griffin 92 Old Boston Road Wilton CT 06897 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 50.00
	Occupation		
	Aggregate Year-to-Date > \$ 450.00		
Full Name, Mailing Address, and ZIP Code Mr. Richard A Campbell 658 Povo Road Madisonville TN 37354 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 75.54
	Occupation		
	Aggregate Year-to-Date > \$ 670.02		
Full Name, Mailing Address, and ZIP Code Mr. William B Dickinson 11 Settlers Lane Ridgefield CT 06877 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 25.00
	Occupation		
	Aggregate Year-to-Date > \$ 225.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A		ITEMIZED RECEIPTS		4 / 8
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 11A1
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NAME OF COMMITTEE (In Full) Olin Corporation Good Government Fund				
Full Name, Mailing Address, and ZIP Code Mr. Michael D Gilley 16 Acorn Lane, Ne Cleveland TN 37312 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation Occupation Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code Mr. Lawrence A James 240 Blackwell Farm Road Chattanooga TN 37421 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation Occupation Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code Mr. Joseph E Strasser 82 Kingswood Drive Bethel CT 06801 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation Occupation Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code Mr. Johnnie M Jackson 29 Fieldstone Circle Stamford CT 06802 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation Occupation Aggregate Year-to-Date > \$ 216.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 24.00	
Full Name, Mailing Address, and ZIP Code Juan R Perez Calle 45 Bloque 72 #28 Sierra Bayamon Bayamon PR 00901 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation Occupation Aggregate Year-to-Date > \$ 216.06	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 27.70	
Full Name, Mailing Address, and ZIP Code Mr. John L McIntosh 2008 Woodchase Way, Ne Cleveland TN 37311 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation Occupation Aggregate Year-to-Date > \$ 1031.22	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 114.58	
Full Name, Mailing Address, and ZIP Code Mr. Thomas M Gura Jr. 16 Muirfield St Louis MO 63141 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation Occupation Aggregate Year-to-Date > \$ 562.50	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 62.50	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		5 / 8
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER 11A1	
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NAME OF COMMITTEE (In Full) Olin Corporation Good Government Fund				
Full Name, Mailing Address, and ZIP Code Mr. Joseph D Rupp #8 Deer Valley Ct Florissant MO 63034 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation Occupation	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 108.34	
Aggregate Year-to-Date > \$ 575.00				
Full Name, Mailing Address, and ZIP Code Mr. Dennis C Creech 48 Austin Circle Lake Ozark MO 65049 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation Occupation	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 27.00	
Aggregate Year-to-Date > \$ 243.00				
Full Name, Mailing Address, and ZIP Code Mr. John G Horton 155 Benedictine Ct Florissant MO 63031 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation Occupation	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 25.00	
Aggregate Year-to-Date > \$ 225.00				
Full Name, Mailing Address, and ZIP Code Mr. Donald C Gillison Po Box #487 Godfrey IL 62035 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation Occupation	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 25.00	
Aggregate Year-to-Date > \$ 225.00				
Full Name, Mailing Address, and ZIP Code Mr. Thomas J O'Keefe 336 Westminster Glen Carbon IL 62034 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation Occupation	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 33.50	
Aggregate Year-to-Date > \$ 301.50				
Full Name, Mailing Address, and ZIP Code Mr. James W Pickett 403 Shelby St. Gillespie IL 62033 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation Occupation	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 41.54	
Aggregate Year-to-Date > \$ 363.84				
Full Name, Mailing Address, and ZIP Code Mr Mark S Marshal 2925 Brown St Alton IL 62002 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Olin Corporation Occupation	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 23.82	
Aggregate Year-to-Date > \$ 214.25				
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A	ITEMIZED RECEIPTS	6 / 8
		Use separate schedule(s) for each category of the Detailed Summary Page
		FOR LINE NUMBER 11A1
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NAME OF COMMITTEE (In Full) Olin Corporation Good Government Fund		
Full Name, Mailing Address, and ZIP Code Mr. Darnell K Stierwalt 182 Esquire Drive Granite City IL 62040	Name of Employer Olin Corporation Occupation	Date (month, day, year) 08/28/2008 Amount of Each Receipt this Period 30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date 5 270.00	
SUBTOTALS of Receipts This Page (Optional)		
TOTALS This Period (last page this line number only)		951.62

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER
23

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

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Senator John Ashcroft 2326 Millpark Drive St. Louis MO 63043	Contribution: John Ashcroft (M-D-R) Contribution: John Ashcroft (MO-R) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : General	09/08/2000	1000.00
Representative John J. LaFalce 38 Ivy Street, SE Washington DC 20003	Contribution: John J. LaFalce (NY-29-D) Contribution: John J. LaFalce (NY-29-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : General	09/22/2000	1000.00
Representative Jerry F. Costello P O Box 8250 Belleville IL 62222	Contribution: Jerry F. Costello (IL-12-D) Contribution: Jerry F. Costello (IL-12-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : General	09/22/2000	200.00

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

2200.00

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	8 / 8
			FOR LINE NUMBER 28

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

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ChemPAC PO Box 230925 Montgomery AL 36123-0925	Contribution to non-federal candidate for Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : General	09/08/2000 Contribution to non-federal candidate for CHEM PAC (AL-N)	500.00
Representative Matthew H. Kiser PO Box 3666 Jackson TN 38303-3666	Contribution to non-federal candidate for Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : General	09/11/2000 Contribution to non-federal candidate for Matthew H. Kiser (TN-73-D)	1000.00
BIPAC 611 Commerce Street Suite 3030 Nashville TN 37203-3742	Contribution: BIPAC Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : General	09/11/2000 Contribution BIPAC	500.00

SUBTOTALS of Disbursements This Page (Optional)	
TOTALS This Period (last page this line number only)	2000.00