

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

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

FOR LINE NUMBER: PAGE 60 OF 67

(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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wilson, Gregory, D, ,**

Mailing Address 2127 Windport Lane

City  
St. Louis

State  
MO

Zip Code  
63146

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Blue Cube Operations LLC

Occupation (for Individual)  
V.P., Finance-Epoxy & Internal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 31 / 2019

Transaction ID : SA11AI.7759

Amount of Each Receipt this Period

100.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wilson, Gregory, D, ,**

Mailing Address 2127 Windport Lane

City  
St. Louis

State  
MO

Zip Code  
63146

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Blue Cube Operations LLC

Occupation (for Individual)  
V.P., Finance-Epoxy & Internal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 30 / 2019

Transaction ID : SA11AI.7806

Amount of Each Receipt this Period

100.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wilson, Gregory, D, ,**

Mailing Address 2127 Windport Lane

City  
St. Louis

State  
MO

Zip Code  
63146

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Blue Cube Operations LLC

Occupation (for Individual)  
V.P., Finance-Epoxy & Internal

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 / 2019

Transaction ID : SA11AI.7853

Amount of Each Receipt this Period

100.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00