



James L. Rairdon
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Englewood, CO 80111 Tel. (303) 689-3000
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CERTIFIED/RETURN RECEIPT REQUESTED

April 13, 1994

Ms. Kelly Huff
Federal Election Commission
Washington, D.C. 20463

Re: Great-West Life & Annuity Insurance Company
Political Action Committee - FEC #CO0263723

Dear Ms. Huff:

Enclosed is a completed semi-annual FEC Form 3X for the first quarter of 1994. Great-West Life & Annuity Insurance Company pays the administrative expenses of the Great-West Life & Annuity Insurance Company Political Action Committee.

If you have any questions or if there is anything further that I can do for you, please feel free to call me at (303) 689-5759.

Sincerely,

James L. Rairdon
Legal Assistant
Government Relations

Enclosures
JLR&35P.kmm

pc w/all enclosures:

John N. Clayton, Vice President - Headquarter Services, 10T2
Ruth B. Lurie, Vice President and Counsel, Legal Division, 6T2

pc w/Summary and Schedule B only:

Elections Division, Office of the Secretary of State, 1560 Broadway, Suite 200,
Denver, Colorado 80202
Texas Ethics Commission, P.O. Box 12070, Capital Station,
Austin, Texas 78711-2070

94033004

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In Full) Great-West Life & Annuity Insurance Company Political Action Committee	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 8515 East Orchard Road CITY, STATE and ZIP CODE Englewood, Colorado 80111	2. FEC IDENTIFICATION NUMBER C002 63723
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)	

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination 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 type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
- Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>2/17/94</u> through <u>3/31/94</u>		
6. (a) Cash on Hand January 1, 19__		\$ 40,608.72
(b) Cash on Hand at Beginning of Reporting Period	\$ 39,850.25	
(c) Total Receipts (from Line 19)	\$ 29,529.50	\$ 30,053.03
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 69,379.75	\$ 70,661.75
7. Total Disbursements (from Line 30)	\$ 9,500.00	\$ 10,782.00
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 59,879.75	\$ 59,879.75
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20488 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)	\$	

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 John N. Clayton	
Signature of Treasurer 	Date 4/13/94

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

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
Great-West Life & Annuity Insurance Company Political Action Committee		FROM Feb. 17, 1994 TO Mar. 31, 1994		
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)	\$ 22,875.00	\$ 22,875.00	11(a)(i)
ii.	Unitemized	6,443.71	6,873.71	11(a)(ii)
iii.	Total	\$ 29,318.71	\$ 29,748.71	11(a)(iii)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)			11(c)
d.	Total Contributions	\$ 29,318.71	\$ 29,748.71	11(d)
12.	Transfers From Affiliated/Other Party Committees			12
13.	All Loans Received			13
14.	Loan Repayments Received			14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17.	Other Federal Receipts (Dividends, Interest, etc.)	\$ 210.79	\$ 304.32	17
18.	Transfers from Nonfederal Account for Joint Activity			18
19.	Total Receipts	\$ 29,529.50	\$ 30,053.03	19
20.	Total Federal Receipts	\$ 29,529.50	\$ 30,053.03	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share			21(a)(i)
ii.	Non-Federal Share			21(a)(ii)
b.	Other Federal Operating Expenditures	\$ 0.00	\$ 282.00	21(b)
c.	Total Operating Expenditures	\$ 0.00	\$ 282.00	21(c)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	\$ 9,500.00	\$ 10,500.00	23
24.	Independent Expenditures (use Schedule E)			24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..			25
26.	Loan Repayments Made			26
27.	Loans Made			27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees			28(a)
b.	Political Party Committees			28(b)
c.	Other Political Committees (such as PACs)			28(c)
d.	Total Contribution Refunds	\$ 0.00	\$ 0.00	28(d)
29.	Other Disbursements			29
30.	Total Disbursements	\$ 9,500.00	\$ 10,782.00	30
31.	Total Federal Disbursements	\$ 9,500.00	\$ 10,782.00	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	\$ 29,318.71	\$ 29,748.71	32
33.	Total Contribution Refunds (from line 28d)	\$ 0.00	\$ 0.00	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	\$ 29,318.71	\$ 29,748.71	34
35.	Total Federal Operating Expenditures	\$ 0.00	\$ 282.00	35
36.	Offsets to Operating Expenditures (from line 15)	\$ 0.00	\$ 0.00	36
37.	Net Operating Expenditures	\$ 0.00	\$ 282.00	37

SCHEDULE A ITEMIZED RECEIPTS

NAME OF COMMITTEE (in Full) Great-West Life & Annuity Insurance Company Political Action Committee			
A. Full Name, Mailing Address and Zip Code Danny L. Anderson 13850 E. Hampden Place Aurora, CO 80014 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation: AVP, Employee Benefits Large Case Operations Aggregate Year-to-Date >	Date (month day, year) 3-2-94	Amount of Each Receipt this Period \$225.00
B. Full Name, Mailing Address and Zip Code David C. Aspinwall 10488 E. Dorado Place Englewood, CO 80111 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation AVP and Associate Counsel Aggregate Year-to-Date >	Date (month day, year) 3-13-94	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code John A. Brown 30402 Heavenly Court Evergreen, Co 80439 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation SVP, Sales, Financial Services Aggregate Year-to-Date >	Date (month day, year) 2-28-94	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and Zip Code Iva J. Connor 800 S. Pease Place Denver, CO 80223 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation MGR, Health Care Management Aggregate Year-to-Date >	Date (month day, year) 3-7-94	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and Zip Code Bradley A. Cornish 1615 Elm Street Denver, CO 80220-1242 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation: AVP, 401 (k) Operations, Employee Benefits Aggregate Year-to-Date >	Date (month day, year) 3-15-94	Amount of Each Receipt this Period \$300.00
F. Full Name, Mailing Address and Zip Code Albert G. Cunningham 10361 Mica Way Parker, Co 80134 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation MGR, Savings Operations Aggregate Year-to-Date >	Date (month day, year) 3-10-94	Amount of Each Receipt this Period \$350.00
G. Full Name, Mailing Address and Zip Code Debra E. Cundighan 6881 Pike Court Lakewood, CO 80116 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation MGR - Savings Operations Aggregate Year-to-Date >	Date (month day, year) 3-2-94	Amount of Each Receipt this Period \$250.00
SUBTOTAL of Receipts This Page (optional)			\$2,825.00
TOTAL This Period (last page this line number only)			

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SCHEDULE A ITEMIZED RECEIPTS

NAME OF COMMITTEE (in Full)
 Great-West Life & Annuity Insurance Company Political Action Committee

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A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Gerald L. Davis 9435 W. Wexley Avenue Lakewood, CO 80227 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation AVP, Information Systems	3-2-94	\$250.00
Aggregate Year-to-Date >		\$250.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Chris R. Dermody 8747 S. Appletree Place Highlands Ranch, CO 80126 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation AVP, Employee Benefits Claims Systems	3-1-94	\$350.00
Aggregate Year-to-Date >		\$350.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Robert J. Edmonds 7787 Deertrail Drive Parker, Co 80134 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation AVP, Finance, Financial Services	3-8-94	\$250.00
Aggregate Year-to-Date >		\$250.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
John T. Fierla 2562 W. Rowland Avenue Littleton, CO 80120 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation AVP, Corporate 401(k)	3-7-94	\$300.00
Aggregate Year-to-Date >		\$300.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
F. Jill Fikley 31414 S. Bermuda Drive Evergreen, Co 80439 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation MGR, Financial Services Systems	3-10-94	\$350.00
Aggregate Year-to-Date >		\$350.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Gordon C. Hay 7506 S. Williams Street Littleton, CO 80122 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation AVP, Financial Services Systems	3-3-94	\$400.00
Aggregate Year-to-Date >		\$400.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Wayne T. Hoffmann 5854 S. Paris Court Englewood, CO 80112 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation VP, Private Placements	3-6-94	\$500.00
Aggregate Year-to-Date >		\$500.00	

SUBTOTAL of Receipts This Page (optional) \$2,400.00
 TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

NAME OF COMMITTEE (in Full)
Great-West Life & Annuity Insurance Company Political Action Committee

940338933009

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
David T. Jonasson 7007 E. Hinsdale Avenue Englewood, CO 80112	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation MGR. Group Pension Systems	3-2-94	\$300.00
	Aggregate Year-to-Date >	\$300.00	
R. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Robert L. Kavanaugh 15895 W. Bayaud Drive Golden, Co 80401	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation SVP, Employee Benefit Sales	3-15-94	\$2,000.00
	Aggregate Year-to-Date >	\$2,000.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Robert L. Lambrecht 18273 E. Crestridge Drive Aurora, Co 80015	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation MGR. Group Special Accounts	3-6-94	\$250.00
	Aggregate Year-to-Date >	\$250.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
James F. Lavan 6519 S. Allison Court Littleton, CO 80123	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation VP, Finance, GWL Properties	3-22-94	\$500.00
	Aggregate Year-to-Date >	\$500.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Dennis Low 3852 Christy Ridge Sedalia, CO 80135	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation EVP, Financial Services	3-14-94	\$1,400.00
	Aggregate Year-to-Date >	\$1,400.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Victoria A. Mahoney 1880 Palmer Drive Pleasanton, CA 94568	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation RMGR, San Jose Group Sales Office	3-15-94	\$1,250.00
	Aggregate Year-to-Date >	\$1,250.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
James I. McCallen 7283 S. Niagra Circle Englewood, Co 80112	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation VP and Annuity	3-4-94	\$750.00
	Aggregate Year-to-Date >	\$750.00	

SUBTOTAL of Receipts This Page (optional) \$6,450.00
TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

NAME OF COMMITTEE (in Full)				
Great-West Life & Annuity Insurance Company Political Action Committee				
A. Full Name, Mailing Address and Zip Code		Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
David G. McLeod 415 S. Washington Street Denver, CO 80209-2117		Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Occupation: MGR, Securities and Equities Acquisitions	3-12-94	\$250.00
Other (specify):		Aggregate Year-to-Date >	\$250.00	
B. Full Name, Mailing Address and Zip Code		Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Randall J. McMahon 1904 E. Chesapeake Lane Highlands Ranch, CO 80126		Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Occupation: MGR, Investment Systems	2-26-94	\$225.00
Other (specify):		Aggregate Year-to-Date >	\$225.00	
C. Full Name, Mailing Address and Zip Code		Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Terry W. Metcalf 6334 Columbia Drive Highlands Ranch, CO 80126		Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Occupation: MGR, Employee Benefits Large Case Operations	3-14-94	\$240.00
Other (specify):		Aggregate Year-to-Date >	\$240.00	
D. Full Name, Mailing Address and Zip Code		Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
James D. Motz 3037 E. Nichols Place Littleton, CO 80122		Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Occupation: SVP, Employee Benefits Operations	2-28-94	\$2,000.00
Other (specify):		Aggregate Year-to-Date >	\$2,000.00	
E. Full Name, Mailing Address and Zip Code		Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Richard H. Olsson 9574 Kalamere Court Highlands Ranch, CO 80126		Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Occupation: VP, Mortgage Investments	2-24-94	\$275.00
Other (specify):		Aggregate Year-to-Date >	\$275.00	
F. Full Name, Mailing Address and Zip Code		Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
John D. Roeste 6866 E. Osprey Court Highlands Ranch, CO 80126		Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Occupation: VP, Individual Financial Services	3-7-94	\$500.00
Other (specify):		Aggregate Year-to-Date >	\$500.00	
G. Full Name, Mailing Address and Zip Code		Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Gregory F. Sefler 3507 Fernwood Avenue Los Angeles, CA 90039		Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Occupation: VP, Major Accounts, Financial Services	3-1-94	\$1,500.00
Other (specify):		Aggregate Year-to-Date >	\$1,500.00	
SUBTOTAL of Receipts This Page (optional)				\$4,990.00
TOTAL This Period (last page this line number only)				

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SCHEDULE A ITEMIZED RECEIPTS

NAME OF COMMITTEE (in Full) Great-West Life & Annuity Insurance Company Political Action Committee			
A. Full Name, Mailing Address and Zip Code Robert K. Shaw 5484 S. Nucla Court Aurora, Co 80015 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation VP, Savings Operations Aggregate Year-to-Date >	Date (month day, year) 3-2-94 \$1,000.00	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and Zip Code Doug Stefanson 6052 S. Melrose Way Englewood, CO 80111 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation VP, Employee Benefits Small Case Operations Aggregate Year-to-Date >	Date (month day, year) 2-28-94 \$500.00	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code H. Eugene Stevenson 16022 E. Loyola Drive Aurora, Co 80013 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation MGR. TNS Operations Aggregate Year-to-Date >	Date (month day, year) 3-31-94 \$500.00	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code David J. Thompson 3705 E. Warren Avenue Denver, CO 80210 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation PRES, GWL Properties Aggregate Year-to-Date >	Date (month day, year) 2-23-94 \$1,000.00	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and Zip Code Janet F. White 8746 Black Maple Drive Eden Prairie, MN 55344 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation RMGR, Minneapolis Group Sales Office Aggregate Year-to-Date >	Date (month day, year) payroll deduction \$210.00	Amount of Each Receipt this Period \$210.00
F. Full Name, Mailing Address and Zip Code Douglas L. Wooden 5 Huntwick Lane Cherry Hills Village, CO 80110 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation SVP, Chief Financial Officer Aggregate Year-to-Date >	Date (month day, year) 3-10-94 \$2,500.00	Amount of Each Receipt this Period \$2,500.00
G. Full Name, Mailing Address and Zip Code Bonnie L. Wright 1815 Mountain Laurel Circle Highlands Ranch, CO 80126 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation VP, Benefit Payments Aggregate Year-to-Date >	Date (month day, year) 3-7-94 \$500.00	Amount of Each Receipt this Period \$500.00
SUBTOTAL of Receipts This Page (optional)			\$6,210.00
TOTAL This Period (last page this line number only)			\$22,875.00

94038233011

SCHEDULE A ITEMIZED RECEIPTS

NAME OF COMMITTEE (in Full)
Great-West Life & Annuity Insurance Company Political Action Committee

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Century Bank 5950 S. Willow Drive Englewood, CO 80111-5117		2/17/94 thru 3-24-94	\$177.55
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Interest on deposits	Occupation	Aggregate Year-to-Date >	\$271.08
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Key Bank PO Box 27124 Salt Lake City, UT 84127-9940	Note: Key Bank bought Century Bank effective 3/25/94	3/25/94 thru 3-31-94	\$33.24
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Interest on deposits	Occupation	Aggregate Year-to-Date >	\$33.24
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date >	\$0.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date >	\$0.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date >	\$0.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date >	\$0.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date >	\$0.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			

SUBTOTAL of Receipts This Page (optional)	\$210.79
TOTAL This Period (last page this line number only)	\$210.79

94038933012

SCHEDULE B ITEMIZED DISBURSEMENTS

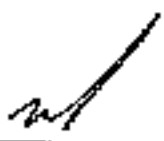
NAME OF COMMITTEE (in Full) Great-West Life & Annuity Insurance Company Political Action Committee				
A Full Name, Mailing Address and Zip Code Campaign America c/o Senator Robert Dole 900 Second Street NE, Suite 118 Washington, DC 20002	Purpose of Disbursement Donation to another committee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Date (month day, year) 2-28-94	Amount of Each Disbursement this Period \$1,000.00	
B Full Name, Mailing Address and Zip Code Hutchison for Senate 115 North Lee Street, Suite 210 Alexandria, VA 22314	Purpose of Disbursement Campaign donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Date (month day, year) 2-28-94	Amount of Each Disbursement this Period \$1,000.00	
C Full Name, Mailing Address and Zip Code HIPAC c/o Mr. Bill Gradison, HIAA 1025 Connecticut Avenue, NW Washington, DC 20036-3998	Purpose of Disbursement Donation to another committee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Date (month day, year) 3-3-94	Amount of Each Disbursement this Period \$5,000.00	
D Full Name, Mailing Address and Zip Code Wayne Allard for Congress 13 Cherry Vale Drive Englewood, CO 80110	Purpose of Disbursement Campaign donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Date (month day, year) 3-15-94	Amount of Each Disbursement this Period \$2,500.00	
E Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Date (month day, year)	Amount of Each Disbursement this Period	
F Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Date (month day, year)	Amount of Each Disbursement this Period	
G Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Date (month day, year)	Amount of Each Disbursement this Period	
H Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Date (month day, year)	Amount of Each Disbursement this Period	
I Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Date (month day, year)	Amount of Each Disbursement this Period	
SUBTOTAL of Receipts This Page (optional)			\$9,500.00	
TOTAL This Period (last page this line number only)			\$9,500.00	

940333013

**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.

94038235014

<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 4-14-94
<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
	4-18-94
PREPARER	DATE PREPARED