



JAN 18 12 19 PM '94

8515 East Orchard Road
Englewood, CO 80111 Tel. (303) 689-3000
Address mail to: P.O. Box 1700 Denver, CO 80201

CERTIFIED/RETURN RECEIPT REQUESTED

January 12, 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 are amended FEC Form 3X reports for the periods January 1, 1993 through June 25, 1993, and June 26, 1993 through December 31, 1993. I inadvertently neglected to itemize the interest earned on the PAC funds in the bank. A Schedule A for each period is attached to each report.

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

Enclosure
JLR746P.kom
pc w/enc:

John N. Clayton, Vice President - Headquarters Services, 10T2

94033731206

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

Jan 18 12 19 PM '94

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) Check if different than previously reported
8515 East Orchard Road

CITY, STATE and ZIP CODE
Englewood, Colorado 80111

2. FEC IDENTIFICATION NUMBER
0002 63723

3. This committee qualified as a multikandidate committee DURING THIS Reporting Period on April 8, 1993 (date).

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)
Terminal or Report

Monthly Report Due On:
February 20 June 20 October 20
March 20 July 20 November 20
April 20 August 20 December 20
May 20 September 20 January 31

Twelfth day report preceding _____ (Type or Elector)
election on _____ in the State of _____

Thirtieth day report following the General Election on June 5, 1993 in the State of Texas

(b) Is this Report an Amendment? YES NO

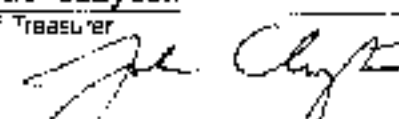
SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Covering Period <u>1/1/93</u> through <u>6/25/93</u>		
6. (a) Cash on Hand January 1, 19 <u>93</u>		\$ 500.00
(b) Cash or Hand at Beginning of Reporting Period	\$ 500.00	
(c) Total Receipts (from Line 79)	\$ 45,694.52	\$ 45,694.52
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 46,194.52	\$ 46,194.52
7 Total Disbursements (from Line 80)	\$ 10,350.00	\$ 10,350.00
8 Cash or Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 35,844.52	\$ 35,844.52
9 Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	
10 Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

For further information contact:
Federal Election Commission
888 E Street, NW
Washington, DC 20463
Toll Free 800-424-9630
Local 202-376-3125

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 K. Clayton

Signature of Treasurer 

Date
January 12, 1994

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

94033731297

SCHEDULE A ITEMIZED RECEIPTS

Earned Interest

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 5930 S. Willow Drive Englewood, CO 80111-5117 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation Money Market Account #3902643 Aggregate Year-to-Date:	interest \$234.02	\$234.02
B. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation Aggregate Year-to-Date:	Date (month day, year) \$0.00	Amount of Each Receipt this Period
C. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation Aggregate Year-to-Date:	Date (month day, year) \$0.00	Amount of Each Receipt this Period
D. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation Aggregate Year-to-Date:	Date (month day, year) \$0.00	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation Aggregate Year-to-Date:	Date (month day, year) \$0.00	Amount of Each Receipt this Period
F. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation Aggregate Year-to-Date:	Date (month day, year) \$0.00	Amount of Each Receipt this Period
G. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation Aggregate Year-to-Date:	Date (month day, year) \$0.00	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	\$234.02
TOTAL This Period (last page this line number only)	\$234.02

2000010304

**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.

Hand Delivered

DATE OF RECEIPT

First Class Mail

POSTMARKED

1-12-94

Registered/Certified Mail

POSTMARKED

No Postmark

Postmark Illegible

Received from the House Office of Records
 and Registration

DATE OF RECEIPT

Received from the Senate Office of Public
 Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

M.G.
 PREPARER

1-19-94
 DATE PREPARED

24039731299