Image# 14941761334 PAGE 1 / 10

## **FEC** FORM 3X

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

TOTAL OX	or Other Than An A	uthorized Commit	itee		Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typover the lines.	oing, type	12FE4M5	
Great-West Life & Annu	uity Insurance Con	npany Political A	ction Com	mittee	
ADDRESS (number and street)	8515 E. Orchard Road				
Check if different	7T2				
than previously reported. (ACC)	Greenwood Village	CO	80111		
2. FEC IDENTIFICATION NU	MBER ▼	CITY		STATE 🛦	ZIP CODE ▲
C C00263723	3.	IS THIS REPORT X	NEW (N) <b>OR</b>	AM (A)	ENDED
4. TYPE OF REPORT (Choose One)	Report Due On:	Feb 20 (M2)	May 20 (M5)		20 (M8) Nov 20 (M11) (Non-Election Year Only)  Dec 20 (M12)
(a) Quarterly Reports:		Mar 20 (M3)	Jun 20 (M6)	Sep	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q:		Apr 20 (M4)	Jul 20 (M7)	Oct 2	20 (M10) Jan 31 (YE)
July 15	(C) 12-Day	Primary (12	2P)	General (	12G) Runoff (12R)
Quarterly Report (Q2 October 15	Report for the	: Convention	(12C)	Special (	12S)
Quarterly Report (Q3		ction on	/ D D /	Y   Y   Y   Y   Y	in the State of
Year-End Report (YE July 31 Mid-Year Report (Non-election	(d) 30-Day	_	[	1	
Year Only) (MY)	POST-Election Report for the	,	0G)	Runoff (3	0R) Special (30S)
Termination Report (TER)	Ele	ction on	/ D = D /	Y = Y = Y = Y	in the State of
5. Covering Period 04	01 201	through	M M	30	2014
I certify that I have examined this	s Report and to the best	of my knowledge and	l belief it is tru	ue, correct and	l complete.
Type or Print Name of Treasurer	Mr Robert Onstad				
Signature of Treasurer Mr Ro	bert Onstad	[Electronica	lly Filed] [	Date 07	/ 10 / Y Y Y Y Y Y 2014
NOTE: Submission of false, errone	ous, or incomplete informa	ation may subject the pe	erson signing th	nis Report to th	e penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3X Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

#### Great-West Life & Annuity Insurance Company Political Action Committee

2014 06 30 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 69275.26 January 1, 2014 (b) Cash on Hand at 67278.54 Beginning of Reporting Period..... 5617.29 2486.57 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 69765.11 74892.55 6(a) and 6(c) for Column B)..... 8148.64 13276.08 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 61616.47 61616.47 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

X

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

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

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

### Great-West Life & Annuity Insurance Company Political Action Committee

Report Covering the Period: From: 04	01 2014 To:	06 30 7 2014
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	2275.00	4775.00
(i) Itemized (use Schedule A)	2210.00	7
(ii) Unitemized(iii) TOTAL (add	210.00	839.00
Lines 11(a)(i) and (ii)	2485.00	5614.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	2485.00	5614.00
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
All I are Boot at	0.00	0.00
. All Loans Received	0.00	0.00
. Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
5. Refunds of Contributions Made	7	
to Federal Candidates and Other		
Political Committees	0.00	0.00
'. Other Federal Receipts		
(Dividends, Interest, etc.)	1.57	3.29
. Transfers from Non-Federal and Levin Funds	4 4	
(a) Non-Federal Account		
` '	0.00	0.00
(	7	, , , , , , , , , , , , , , , , , , , ,
(b) Lovin Funds (from Schodulo H5)	0.00	0.00
(b) Levill Fullds (IIOIII Schedule 113)	7	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(from Schedule H3)(b) Levin Funds (from Schedule H5)	0.00 0.00 0.00	
(subtract Line 18(c) from Line 19)▶	2486.57	5617.29

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: — (a) Allocated Federal/Non-Federal		Calcillati Teat-10-Date
Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non Fodoval Chara	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
Expenditures	0.00	0.00
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
Transfers to Affiliated/Other Party		
Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	8000.00	13000.00
Independent Expenditures	0.00	0.00
(use Schedule E) Coordinated Party Expenditures	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
(use selledule i )		0.00
Loan Repayments Made	0.00	0.00
-		
Loans Made Refunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other		0.00
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	, , ,	
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))▶	7 7	5.00
Other Disbursements	148.64	276.08
		7
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely	7 7 7	
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Dishurasments (add Lines 01/s), 00		
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	9149 64	42070.00
20, 27, 20, 20, 21, 20(u), 28 dilu 30(c))	8148.64	13276.08
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	8148.64	13276.08

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
3. Total Contributions (other than loans) (from Line 11(d), page 3)	2485.00	5614.00				
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00				
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2485.00	5614.00				
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00				
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00				
3. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00				

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

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

FOR L	INE NU	JMBER	:	PAGE	6	OF	10
(check	only or	ne)					
X 1	1a	11b		11c	12		
1:	3	14		15	16		17

NAME OF COMMITTEE (In Full)  Great-West Life & Annuity Ins	surance Company Political Action	Committee
Full Name (Last, First, Middle Initial) Mr. Peter D. Tilley		Date of Receipt
Mailing Address 6952 East Nichols Place		06 30 2014
City	State Zip Code	Transaction ID : PR65736910725
Centennial	CO 80112-3131	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	175.00
Name of Employer	Occupation	
Great-West Life & Annuity Insurance Co	Vice President, Asset & Liability	
Receipt For:  Primary General  Other (specify)   ■	Aggregate Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)  Mr. Charles Nelson		Date of Receipt
Mailing Address 1187 E. Jesse Ct.		M = M / D = D / Y = Y = Y
City	State 7in Code	06 30 2014
City Highlands Ranch	State Zip Code CO 80126-4725	Transaction ID : PR65739110725
	30.120.1120	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1400.00
Name of Employer	Occupation	
Great-West Life & Annuity Insurance Co	Senior Vice President, Retirement Serv	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	2600.00	P/R Deduction (\$200.00 Bi-Weekly)
Full Name (Last, First, Middle Initial)  Mr. Ron Laeyendecker		Date of Receipt
Mailing Address 9521 S. Dolton Way		06 30 2014
City	State Zip Code	Transaction ID : PR65739910725
Highlands Ranch	CO 80126-4925	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	700.00
Name of Employer	Occupation	
Great-West Life & Annuity Insurance Co	Vice President, Life Insurance Markets	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1300.00	P/R Deduction (\$100.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		2275.00
TOTAL This Period (last page this line numb	er only)	2275.00

SCHEDULE B (FEC Form 3X)	Har same to the	FOR LINE NUMBER: PAGE 7 (								
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(oricon oring								
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30						
Any information copied from such Reports and State	ments may not be sold or u									
or for commercial purposes, other than using the nar										
NAME OF COMMITTEE (In Full)										
$\Big angle$ Great-West Life & Annuity Insuran	ce Company Politic	al Action Co	ommittee							
Full Name (Last, First, Middle Initial)										
Larson For Congress			Date of Disbursemen	nt						
Mailing Address PO Box 479			04 / D D	2014						
City	State Zip Code		Transaction ID - 00	75.470						
Glastonbury	CT 06033		Transaction ID: 95	0/54/6						
Purpose of Disbursement		011	Amount of Each Dist	bursement this Period						
Candidate Name			, and an each bis	2.30/110/11 (1110 ) 0/100						
Rep. John Larson		Category/ Type		1000.00						
•	ment For: 2014									
Senate	Primary Seneral									
President	Other (specify) ▼									
State: CT District: 01										
Full Name (Last, First, Middle Initial)  3. Price For Congress			Date of Disbursemer	nt						
Trice For Congress			M M / D D	/						
Mailing Address P.O. Box 425			04 28	2014						
City	State Zip Code		Transaction ID : 9	575477						
Roswell Purpose of Disbursement	GA 30077									
. dipose of Dispulsement		011	Amount of Each Dis	bursement this Period						
Candidate Name		Category/	1 233. 20							
Rep. Thomas Price M.D.		Type		1000.00						
	ment For: 2014									
Senate	Primary General									
State: GA District: 06	Other (specify) ▼									
Full Name (Last, First, Middle Initial)										
C. Tiberi For Congress			Date of Disbursemen	nt						
			M = M / D = D	/						
Mailing Address 2931 E Dublin Granville Road Suite 190			04 28	2014						
City	State Zip Code									
Columbus	OH 43231		Transaction ID: 95	0/5478						
Purpose of Disbursement										
Candidate Name		011	Amount of Each Dis	bursement this Period						
Rep. Pat Tiberi		Category/ Type		1000.00						
•	ment For: 2014	Type	-	7						
Senate	Primary Seneral									
President	Other (specify) ▼									
State: OH District: 12										
				0000.00						
<b>SUBTOTAL</b> of Disbursements This Page (optional).		·····		3000.00						
TOTAL This David (lost near this line number as the	Α.									
TOTAL This Period (last page this line number only	J			- A - 1 - A - 1 - A - 1						

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 8								
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27								
Any information copied from such Reports and Stater or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full)										
Great-West Life & Annuity Insurance	ce Company Political	Action Co	ommittee							
Full Name (Last, First, Middle Initial)										
· Kind For Congress Committee			Date of Disbursement							
Mailing Address 205 5th Avenue South			05 09 2014							
City	State Zip Code		Transaction ID : 9614037							
La Crosse	WI 54601		11ansaction ib . 9014037							
Purpose of Disbursement		011	Amount of Each Disbursement this Period							
Candidate Name		Category/								
Rep. Ron Kind		Type	1000.00							
	nent For: 2014  Primary									
State: WI District: 03										
Full Name (Last, First, Middle Initial)										
· Enzi For Us Senate			Date of Disbursement							
Mailing Address PO Box 2775			05 30 2014							
City S Cody	State Zip Code WY 82414		Transaction ID : 9614048							
Purpose of Disbursement		011	Amount of Each Disbursement this Period							
Candidate Name										
Sen. Michael Enzi		Category/ Type	1000.00							
Office Sought:  House Senate President  Disburser	nent For: 2014  Primary General  Other (specify)	1,700								
State: WY District:  Full Name (Last, First, Middle Initial)										
- Bob Casey For Senate Inc			Date of Disbursement							
Mailing Address 30 South 15th Street Suite 400			05 29 2014							
City	State Zip Code		Transaction ID: 9614049							
Philadelphia Purpose of Disbursement	PA 19102									
•		011	Amount of Each Disbursement this Period							
Candidate Name		Category/	1000							
Sen. Robert Casey Jr.		Туре	1000.00							
Office Sought:  House  Senate  President  State: PA  Disburser	nent For: 2018  Primary General  Other (specify)									
oute. FA District.										
SUBTOTAL of Disbursements This Page (optional)		·····•	3000.00							
TOTAL This Period (last page this line number only)										

Use separate schedule(s) for each category of the Detailed Summary Page   Category of the Category of the Category of the Category of the Detailed Summary Page   Category of the Category	SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 9 OF								
thry information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee.  NAME OF COMMITTEE (in Full)  Great-West Life & Annuity Insurance Company Political Action Committee  Full Name (Last, First, Middle Initial)  Committee To Re-Elect Linda Sanchez  Mailing Address 410 1st St Sa Sulta 310  City State Zip Code DC 20003  Purpose of Disbursement  Candidate Name  Rep. Linda Sanchez  Other (specify) ▼  State: CA District: 38  Full Name (Last, First, Middle Initial)  Van Hollen For Congress  Mailing Address 10537 St. Paul St.  City State Zip Code MD 20885  Full Name (Last, First, Middle Initial)  Van Hollen For Congress  Mailing Address 10537 St. Paul St.  City State Zip Code MD 20885  Full Name (Last, First, Middle Initial)  Candidate Name  Rep. Chris Van Hollen  Office Sought: House Senate Primary General Primar	TEMIZED DISBURSEMENTS	for each	category of the	(check on	ly one)	<b>X</b> 23		]				
NAME OF COMMITTEE (in Full) Great-West Life & Annuity Insurance Company Political Action Committee  Full Name (Last, First, Middle Initial) Committee To Re-Elect Linda Sanchez  Mailing Address 410 1st St Se Suite 310  City Washington DC 20003  Furpose of Disbursement Candidate Name Rep. Linda Sanchez Office Sought: Van Hollen City State Zip Code DC 20003  Furpose of Disbursement For: 2014  State: CA District: 38  Full Name (Last, First, Middle Initial) Van Hollen For Congress  Mailing Address 10537 St. Paul St.  City State Zip Code MD 20895  Furpose of Disbursement  Cardidate Name Rep. Chris Van Hollen  Office Sought: Van Hollen  Off				sed by any per	son for the	purpose of	soliciting co	ntributions				
Full Name (Last, First, Middle Initial)  Committee To Re-Elect Linda Sanchez  Malling Address 101st 9t 9s 9s 2014  Mashington  Disbursement  Disbursement Disbursement  Disbursement Disbursement  Disbursement Disbursement  Disbursement Disbursement  Disbursement Disbursement  Disbursement Disbursement  Disbursement Disbursement  Disburs		io ana aac	ilede of arry points	oar committee	10 3011011 00	THE BUILDING T	10111 30011 00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Full Name (Last, First, Middle Initial) Committee To Re-Elect Linda Sanchez  Mailing Address 410 1st St Se Suite 310 City Washington DC 20003  Transaction ID: 9614050  Amount of Each Disbursement this Perio Category/ 1902  Transaction ID: 9614050  Amount of Each Disbursement this Perio Category/ 1902  Date of Disbursement this Perio Category/ 1902  Transaction ID: 9614050  Amount of Each Disbursement this Perio Category/ 1902  Transaction ID: 9614050  Amount of Each Disbursement this Perio Category/ 1902  Transaction ID: 9614050  Amount of Each Disbursement Category/ 1902  Transaction ID: 9614050  Amount of Each Disbursement Category/ 1902  Transaction ID: 9614050  Amount of Each Disbursement this Perio Category/ 1902  Transaction ID: 9614050  Amount of Each Disbursement this Perio Category/ 1902  Transaction ID: 9614050  Amount of Each Disbursement this Perio Category/ 1902  Date of Disbursement this Perio Category/ 1902  Date of Disbursement this Perio Category/ 1902  Date of Disbursement this Perio Category/ 1902  Transaction ID: 9614050  Amount of Each Disbursement this Perio Category/ 1902  Date of Disbursement this Perio Category/ 1902  Amount of Each Disbursement this Perio Category/ 1902  Date of Disbursement this Perio Category/ 1902  Amount of Each Disbursement this Perio Category/ 1902  Transaction ID: 9614050  Amount of Each Disbursement this Perio Category/ 1902  Transaction ID: 9614050  Amount of Each Disbursement this Perio Category/ 1902  Date of Disbursement this Perio Category/ 1902  Transaction ID: 9614050  Amount of Each Disbursement this Perio Category/ 1902  Date of Disbursement this Perio Category/ 1902  Date o			nani Dalitia	- I A - 4: C	\ : :44							
Address 410 1st St Se Suite 310  City State Zip Code Washington DC 20003  Purpose of Disbursement  Candidate Name  Rep. Linda Sanchez  District: Sanate President  State: CA District: 38  Full Name (Last, First, Middle Initial)  Cardidate Name  Rep. Chris Van Hollen  City State Zip Code MD 20895  Mailing Address  City State Zip Code MD 20895  Full Name (Last, First, Middle Initial)  Senate President  State: MD District: 08  Full Name (Last, First, Middle Initial)  Category/ Type  Date of Disbursement this Perio  Category/ Type  Date of Disbursement  Date of Disbursement  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Date of Disbursement this Perio  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement  Category/ Type  Date of Disbursement this Perio  Category/	Great-west Life & Annuity Insurance	ce Com	pany Politica	al Action C	ommitt	ee						
Mailing Address 410 1st St Se Suite 310  City State Zip Code Washington DC 20003  Purpose of Disbursement Candidate Name Rep. Linda Sanchez Office Sought: Senate President State: CA District: 38  Full Name (Last, First, Middle Initial)  Candidate Name Rep. Chris Van Hollen Office Sought: Senate Purpose of Disbursement Candidate Name Rep. Chris Van Hollen Office Sought: Sanate President State: MD District: 08  Full Name (Last, First, Middle Initial)  Mailing Address City State State: Zip Code MD District: 2014 Senate President State: MD District: 08  Full Name (Last, First, Middle Initial)  Mailing Address City State State: Zip Code MD District: 08  Full Name (Last, First, Middle Initial)  Category/ Type  Date of Disbursement this Perio Cat												
Mailing Address 410 1st St Se Suite 310  City Washington  Candidate Name  Rep. Linda Sanchez  Office Sought:	A. Committee To Re-Elect Linda Sand	chez						VV				
Washington Purpose of Disbursement Candidate Name Rep. Linda Sanchez Office Sought:	_											
Washington  Candidate Name  Rep. Linda Sanchez  Office Sought:  State: CA District: 38  Full Name (Last, First, Middle Initial)  Van Hollen  Office Sought:  Van Hollen	City	State	Zip Code									
Candidate Name  Rep. Linda Sanchez  Office Sought:	Washington	DC	20003		Tran	saction ID :	9614050					
Category/ Type  Date of Disbursement  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Transaction ID : 9661849  Amount of Each Disbursement this Perio  Category/ Type  Cat	Purpose of Disbursement				1							
Rep. Linda Sanchez  Office Sought: House Senate President State: CA Disbursement For: 2014  Full Name (Last, First, Middle Initial)  City Senate Rep. Chris Van Hollen  Office Sought: House Senate Primary General Other (specify) ▼  Date of Disbursement  Office Sought: Amount of Each Disbursement this Perior Category/ Type  Transaction ID: 9661849  Amount of Each Disbursement this Perior Category/ Type  Tothis Van Hollen  Office Sought: House Senate Primary General Other (specify) ▼  Mailing Address  City State Zip Code  Full Name (Last, First, Middle Initial)  Transaction ID: 9661849  Amount of Each Disbursement this Perior Category/ Type  Tother (specify) ▼  Date of Disbursement this Perior Category/ Type  Tother (specify) ▼  Date of Disbursement this Perior Category/ Type  Tother (specify) ▼  Amount of Each Disbursement this Perior Category/ Type  Office Sought: House Senate President Other (specify) ▼  State: District: Disbursement Tris Page (optional)				011	Amour	nt of Each D	isbursement	this Period				
Rep. Linda Sanchez  Office Sought:			$\neg$	Category/				1000.00				
Senate President Other (specify) ▼  State: CA District: 38  Full Name (Last, First, Middle Initial)  Van Hollen For Congress  Mailing Address 10537 St. Paul St.  City State Zip Code Kensington MD 20895  Purpose of Disbursement  Candidate Name Rep. Chris Van Hollen  Office Sought: House Senate President State: MD District: 08  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement this Perio Category/ Type  Other (specify) ▼  Amount of Each Disbursement this Perio Category/ Type  Office Sought: House Senate President State: Disbursement For: 2014  Mailing Address  City State Zip Code  Purpose of Disbursement  Category/ Type  Office Sought: House Senate President State: Disbursement For: Senate President State: District: Other (specify) ▼  State Zip Code  Purpose of Disbursement This Page (optional)							7	1000.00				
Full Name (Last, First, Middle Initial)  Van Hollen For Congress  Mailing Address 10537 St. Paul St.  City State Zip Code Kensington MD 20895  Purpose of Disbursement  Candidate Name Rep. Chris Van Hollen  Office Sought: House Senate Primary General President State: MD District: 08  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought: State Zip Code  Purpose of Disbursement For: 2014  Senate Primary General Other (specify) Type  Office Sought: State Zip Code  Purpose of Disbursement  Category/ Type  Office Sought: State Disbursement For: 2014  State: District: Other (specify) Type  Office Sought: State Disbursement  Category/ Type  Office Sought: State Disbursement For: 2014  Senate Primary General Primary	Senate President	Primary	X General									
Mailing Address 10537 St. Paul St.  City State Zip Code Kensington MD 20895  Purpose of Disbursement  Candidate Name Rep. Chris Van Hollen  Office Sought: House Senate President State: MD District: 08  Full Name (Last, First, Middle Initial)  Candidate Name  Candidate Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  Coategory/ Type  Office Sought: House Senate Primary General Category/ Type  Office Sought: Other (specify) ▼  State: Disbursement For: Senate Primary General Category/ Type  Office Sought: Senate Primary General Category/ Type  Office Sought: Senate Primary General Category/ Type  Senate President State: Disbursement For: Senate Primary General Category/ Type  Substotal of Disbursements This Page (optional)												
Mailing Address 10537 St. Paul St.  City State Zip Code MD 20895  Purpose of Disbursement  Candidate Name Rep. Chris Van Hollen  Office Sought: House Senate President Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Candidate Name (Last, First, Middle Initial)  Category/ Type  Disbursement For: 2014  Primary General Other (specify) ▼  Date of Disbursement  Category/ Type  Amount of Each Disbursement this Perio  Category/ Type  Office Sought: House Disbursement For: Category/ Type  Office Sought: House Disbursement For: Category/ Type  Office Sought: House Disbursement For: Category/ Type  Senate President Other (specify) ▼  Substortal of Disbursements This Page (optional)	,				Date o	of Disbursem	nent					
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