PAGE 1 / 9

Image# 14960619335

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

	or Other Than 7	An Authorize	a Committe	e		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		ample: If typir er the lines.	ng, type	12FE4M5	
Great-West Life & Annu	uity Insurance	Company P	olitical Ac	tion Com	mittee	
ADDRESS (number and street)	8515 E. Orchard R	oad				
Check if different	7T2					
than previously reported. (ACC)	Greenwood Village	e 			CO	80111
2. FEC IDENTIFICATION NU	MBER ▼	CITY 🛦		5	STATE A	ZIP CODE ▲
C C00263723		3. IS THIS REPORT	\sim	IEW N) OR	AM (A)	IENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	N	May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	300 0	Mar 20 (M3) Apr 20 (M4)		lun 20 (M6) lul 20 (M7)	H	20 (M9) Dec 20 (M12) (Non-Election Year Only) 20 (M10) Jan 31 (YE)
April 15 Quarterly Report (Q	(2) 12 5	Αρι 20 (ΙΝΙ4)			. —	
July 15 Quarterly Report (Q2	(c) 12-Day PRE-Ele Report fo		Primary (12P Convention (General (
October 15 Quarterly Report (Q3	· ·					
January 31 Year-End Report (YE	≣)	Election on	M M M /	D D /		in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	POST-E		General (300	à)	Runoff (3	OR) Special (30S)
Termination Report (TER)	Report for	Election on	M = M /	D = D /	Y = Y = Y = Y	in the State of
5. Covering Period 01	/ D D / Y	2014	through	03	/ D D /	2014
I certify that I have examined this Type or Print Name of Treasurer	s Report and to the	e best of my kno	wledge and b	pelief it is tru	e, correct and	d complete.
	bert Onstad		[Electronically	Filed] D	ate 04	/ D D / Y Y Y Y Y O O O O O O O O O O O O O O
NOTE: Submission of false, errone	ous, or incomplete in	nformation may s	ubject the pers	son signing th	is Report to th	ne 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 03 2014 Report Covering the Period: 31 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 69275.26 Beginning of Reporting Period..... 3130.72 3130.72 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 72405.98 72405.98 6(a) and 6(c) for Column B)..... 5127.44 5127.44 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 67278.54 67278.54 (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)

For further information contact:

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

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

I. Receipts	COLUMN A	COLUMN B
	Total This Period	Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	2500.00	2500.00
(i) Itemized (use Schedule A)	2300.00	200.00
(ii) Unitemized	, 629.00	629.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	3129.00	3129.00
(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)▶	3129.00	3129.00
. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
N. All I Burin I	0.00	0.00
. All Loans Received	0.00	0.00
I. Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures	7	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made	7	
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	1.72	1.72
3. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(-) (331133313 113)		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	3130.72	3130.72
). Total Federal Receipts		
·	3130.72	3130.72
(subtract Line 18(c) from Line 19)▶	3130.72	3130

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
1.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schodule H4)	10.001 11110 1 01100	Calcinda Tear-to-Date
	Activity (from Schedule H4) (i) Federal Share	0.00	0.00
	(i) Federal Strate	7 7	7
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating		
	Expenditures	0.00	0.00
	(c) Total Operating Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	0.00	0.00
•	Committees	0.00	0.00
	Contributions to		
	Federal Candidates/Committees and Other Political Committees	5000.00	5000.00
	Independent Expenditures		
	(use Schedule E)	0.00	0.00
	Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	
	(use Schedule F)	0.00	0.00
	Loop Panaymenta Mada	0.00	0.00
	Loan Repayments Made	3.00	0.00
	Loans Made	0.00	0.00
	Refunds of Contributions To:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	ì		
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
	Other Disbursements	127.44	127.44
	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(i) i ederal onale		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely		
	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 Dishuranments (add Lines 04/s) 00		
	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5407.44	5107.11
	20, 27, 20, 20, 21, 20(u), 28 and 30(c))	5127.44	5127.44
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	5127.44	5127.44

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)	3129.00	3129.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3129.00	3129.00
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
8. 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

	_		_	MBER	:	PAGE	:	6	OF	9
(0	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16	,	17

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.

or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Great-West Life & Annuity In	surance Company Political Action C	Committee
Full Name (Last, First, Middle Initial) Mr. Jim Biesterfelt Mailing Address 49979 W. Str.		Date of Receipt
Mailing Address 10276 W. Ottawa Ave.		M M / D D / Y Y Y Y Y
City	State Zip Code	01 16 2014 Transaction ID : 9365161
Littleton	CO 80127-2922	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	-
Great-West Life & Annuity Insurance Co	VP Group Special Accounts	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) 3. Mr. Ernie Friesen		Date of Receipt
Mailing Address 1151 Phillips Place		01 28 2014
City	State Zip Code	Transaction ID: 9365163
Littleton	CO 80122-2965	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	1
Great-West Life & Annuity Insurance Co	Vice President, Investments	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) C. Mr. Charles Nelson	·	Date of Receipt
Mailing Address 1187 E. Jesse Ct.		03 31 2014
City	State Zip Code	Transaction ID : PR65739110053
Highlands Ranch	CO 80126-4725	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer	Occupation	1
Great-West Life & Annuity Insurance Co	Senior Vice President, Retirement Serv	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1200.00	P/R Deduction (\$200.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional	1)	1900.00
TOTAL This David (last asset this P	har arth	
TOTAL This Period (last page this line num	per only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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×	11a		11b		11c	12		
	13		14		15	16		17

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.

or for commercial purposes, other than using	g the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Great-West Life & Annuity In	surance Company Political Action C	ommittee
Full Name (Last, First, Middle Initial) Mr. Ron Laeyendecker Mailing Address 9521 S. Dolton Way		Date of Receipt
City	State Zip Code	03 31 2014 Transaction ID : PR65739910053
Highlands Ranch	CO 80126-4925	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer	Occupation	
Great-West Life & Annuity Insurance Co	Vice President, Life Insurance Markets	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) 3.		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)	•	Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Lacif Flooript this Fellou
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional	ıl)	600.00
	<u> </u>	2500.00
TOTAL This Period (last page this line num	IDEL OHIV)	

SCHEDULE B (FEC Form 3X)	Harana ta da ta ta	, FOR LINE	NOMBEN.	OF 9
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orleast orlin)		
	Detailed Summary Page	21b	22 X 23 24 25 28a 28b 28c 29	30
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NAME OF COMMITTEE (In Full)				
Great-West Life & Annuity Insura	ance Company Politic	al Action Co	ommittee	
/	r			
Full Name (Last, First, Middle Initial)			Data of Dishursamant	
A. Ryan For Congress, Inc.			Date of Disbursement	
Mailing Address PO Box 1488			03 17 2014	Y
maining stationed 1 or Box 1400				
City	State Zip Code		Transaction ID: 9451332	
Janesville	WI 53547		11a115aCtivii ID . 3431332	
Purpose of Disbursement		011	Amount of Each Disbursement this	Dorind
Candidate Name			Amount of Each dispursement this	renou
Rep. Paul Ryan		Category/ Type	100	00.00
	rsement For: 2014	.,,,,		
Senate	Primary Seneral			
President	Other (specify) ▼			
State: WI District: 01				
Full Name (Last, First, Middle Initial)			Data of Dialogue	
B. Mcconnell Senate Committee '1	4		Date of Disbursement	
Mailing Address PO Box 1496			03 24 2014	Y
Maining Addition FO DUX 1490			2014	
City	State Zip Code		Transaction ID : 9451333	
Louisville	KY 40201			
Purpose of Disbursement		011	Amount of Each Disbursement this	Period
Candidate Name			, another the Later Dispursement this	1 01100
Sen. Mitch McConnell		Category/ Type	100	00.00
Office Sought: House Disbu	rsement For: 2014	71		
X Senate	Primary X General			
President	Other (specify) ▼			
State: KY District:				
Full Name (Last, First, Middle Initial)			Date of Disbursement	
C. Cantor For Congress				
Mailing Address P.O. Box 17813			03 31 2014	" Y
City	State Zip Code		Transaction ID : 9451334	
Richmond Rurnoss of Dishursement	VA 23226		Transaction 12 1 c to too .	
Purpose of Disbursement		011	Amount of Each Dishursensed this	Dorical
Candidate Name			Amount of Each Disbursement this	reriod
Rep. Eric Cantor		Category/ Type	100	00.00
•	rsement For: 2014		7 - 1 - 1 - 1 - 1	
Senate	Primary X General			
President	Other (specify) ▼			
State: VA District: 07				
	0		300	00.00
SUBTOTAL of Disbursements This Page (options	al)	·····	300	,5.00
TOTAL This Period (last page this line number o	anly)			
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SCHEDULE B (FEC Form 3X)	.,		FOR LINE I		PAGE 9 OF 9
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		Summary Page	21b	22 🗙 23	24 25 26
			27	28a 28b	28c 29 30
Any information copied from such Reports and State or for commercial purposes, other than using the nar					
	me and addr	ess of any politica	ai committee to	SOIICIT CONTRIBUTIONS ITC	om such committee.
NAME OF COMMITTEE (In Full)	0	namu Dalleti	I A ada o A	:44	
Creat-West Life & Annuity Insuran	ice Comp	pany Politica	i Action Co	rimittee	
Full Name (Last, First, Middle Initial)			İ		
Friends Of Erik Paulsen				Date of Disburseme	nt
				M M / D D	/ Y Y Y Y Y
Mailing Address P.O. Box 44369				03 27	2014
250 Prairie Center Drive	01-1-	7: 0:1			
•	State MN	Zip Code		Transaction ID: 9	451335
Eden Prairie Purpose of Disbursement	IVIIN	55344			
. a.pood of biobaldoment			011	Amount of Each Dis	bursement this Period
Candidate Name					
Rep. Erik Paulsen			Category/ Type		1000.00
	ment For: 2	2014			,
Senate	Primary	General			
President	Other (spec	cify) ▼			
State: MN District: 03					
Full Name (Last, First, Middle Initial)					
B. Wyden For Senate				Date of Disburseme	nt
Maillian Adduses 200 N				M = M / D = D	/
Mailing Address 232 Ne 9th Avenue				03 24	2014
City	State	Zip Code			
Portland	OR	97232		Transaction ID: 9	451336
Purpose of Disbursement					
			011	Amount of Each Dis	bursement this Period
		'	Category/		1000.00
Candidate Name		I			1000.00
Sen. Ron Wyden	ment For	2044	Type	-	1000.00
Sen. Ron Wyden Office Sought: House Disburse	ment For: 2				1000.00
Sen. Ron Wyden Office Sought: House Disburse Senate	Primary	X General		7	1000.00
Sen. Ron Wyden Office Sought: House Disburse		X General			1000.00
Sen. Ron Wyden Office Sought: House Disburse Senate President State: OR District:	Primary	X General			1000.00
Sen. Ron Wyden Office Sought: House Senate President Disburse	Primary	X General		Date of Disburseme	
Sen. Ron Wyden Office Sought: House Senate President State: OR District: Full Name (Last, First, Middle Initial)	Primary	X General		Date of Disburseme	
Sen. Ron Wyden Office Sought: House Senate President State: OR District: Full Name (Last, First, Middle Initial)	Primary	X General			nt
Sen. Ron Wyden Office Sought: House Senate President State: OR District: Full Name (Last, First, Middle Initial) Mailing Address	Primary Other (spec	General pify) ▼			nt
Sen. Ron Wyden Office Sought: House Senate President State: OR District: Full Name (Last, First, Middle Initial) Mailing Address	Primary	X General			nt
Sen. Ron Wyden Office Sought: House Senate President State: OR District: Full Name (Last, First, Middle Initial) Mailing Address City	Primary Other (spec	General pify) ▼			nt
Sen. Ron Wyden Office Sought: House Senate President State: OR District: Full Name (Last, First, Middle Initial) Mailing Address	Primary Other (spec	General pify) ▼		M M / D D	nt / Y " Y " Y " Y
Sen. Ron Wyden Office Sought: House Senate President State: OR District: Full Name (Last, First, Middle Initial) Mailing Address City	Primary Other (spec	General pify) ▼	Type	M M / D D	nt
Sen. Ron Wyden Office Sought: House Senate President State: OR District: Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement	Primary Other (spec	General pify) ▼		Amount of Each Dis	nt / Y Y Y Y sbursement this Period
Sen. Ron Wyden Office Sought: House Senate President State: OR District: Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name	Primary Other (spec	General pify) ▼	Type Category/	M M / D D	nt / Y Y Y Y sbursement this Period
Sen. Ron Wyden Office Sought: House Senate President State: OR District: Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name	Other (special State State ement For: Primary	General Zip Code General	Type Category/	Amount of Each Dis	nt / Y Y Y Y sbursement this Period
Sen. Ron Wyden Office Sought: House Senate President State: OR District: Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate President Senate President	Other (spec	General Zip Code General	Type Category/	Amount of Each Dis	nt / Y Y Y Y sbursement this Period
Sen. Ron Wyden Office Sought: House Senate President State: OR District: Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate Senate	Other (special State State ement For: Primary	General Zip Code General	Type Category/	Amount of Each Dis	nt / Y Y Y Y sbursement this Period
Sen. Ron Wyden Office Sought: House Senate President State: OR District: Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District:	State State Primary Other (special special s	General ify) ▼ Zip Code General cify) ▼	Type Category/ Type	Amount of Each Dis	nt / Y Y Y Y sbursement this Period
Sen. Ron Wyden Office Sought: House Senate President State: OR District: Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate President Senate President	State State Primary Other (special special s	General ify) ▼ Zip Code General cify) ▼	Type Category/ Type	Amount of Each Dis	nt / Y Y Y Y sbursement this Period