



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

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

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="116801.20"/>	<input type="text" value="116801.20"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="80424.11"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="1494.43"/>	<input type="text" value="20049.89"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="81918.54"/>	<input type="text" value="136851.09"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="30.03"/>	<input type="text" value="54962.58"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="81888.51"/>	<input type="text" value="81888.51"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1478.10	13960.20
(ii) Unitemized .....	15.00	1080.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1493.10	15040.20
(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) .....	1493.10	15040.20
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1.33	9.69
18. 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
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	1494.43	20049.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1494.43	20049.89

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	49000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.06	0.06
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.06	0.06
29. Other Disbursements .....	29.97	5962.52
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(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
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	30.03	54962.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30.03	54962.58

**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
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	1493.10	15040.20
34. Total Contribution Refunds (from Line 28(d)) .....	0.06	0.06
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1493.04	15040.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. 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 LINE NUMBER: (check only one)	PAGE 6 OF 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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.

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

**A. Mr. JOSEPH P. KERRIGAN Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 155 Lexington Ave.  
 City Lovelana State OH Zip Code 45140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Great-West Life & Annuity Insurance Co Occupation Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 31 / 2012  
**Transaction ID : 8154954**  
 Amount of Each Receipt this Period 192.31

**B. Mr. JOSEPH P. KERRIGAN Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 155 Lexington Ave.  
 City Lovelana State OH Zip Code 45140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Great-West Life & Annuity Insurance Co Occupation Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 31 / 2012  
**Transaction ID : 8207756**  
 Amount of Each Receipt this Period 0.00  
**[MEMO ITEM]**  
 Refund(s) on Schedule B Totaling \$0.06 This changes the YTD Total to \$5000.00

**C. Mr. ROBERT ONSTAD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6328 Middleton Avenue  
 City Castle Rock State CO Zip Code 80104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Great-West Life & Annuity Insurance Co Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2012  
**Transaction ID : PR18884407861**  
 Amount of Each Receipt this Period 45.00  
 P/R Deduction (\$15.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 237.31  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 11
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Mr. JOSEPH P. KERRIGAN Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 155 Lexington Ave.  
 City Lovelana State OH Zip Code 45140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Great-West Life & Annuity Insurance Co Occupation Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4807.75

Date of Receipt 12 / 31 / 2012  
**Transaction ID : PR18884467861**  
 Amount of Each Receipt this Period 384.62  
 P/R Deduction (\$192.31 Bi-Weekly)

**B. DEBRA MUHLHAUSER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 45 South Harrison  
 City Denver State CO Zip Code 80209-3101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 12 / 31 / 2012  
**Transaction ID : PR35664097861**  
 Amount of Each Receipt this Period 45.00  
 P/R Deduction (\$15.00 Bi-Weekly)

**C. Mr. Peter D. Tilley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6952 East Nichols Place  
 City Centennial State CO Zip Code 80112-3131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Great-West Life & Annuity Insurance Co Occupation Vice President, Asset & Liability  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 31 / 2012  
**Transaction ID : PR6573697861**  
 Amount of Each Receipt this Period 60.00  
 P/R Deduction (\$20.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	489.62
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Ms. ROBIN GUGEL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9693 Hemlock Ct.  
City Highlands Ranch State CO Zip Code 80130-4123  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Great-West Life & Annuity Insurance Co Occupation Manager  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **650.00**

Date of Receipt **12 / 31 / 2012**  
**Transaction ID : PR6573897861**  
Amount of Each Receipt this Period **75.00**  
P/R Deduction (\$25.00 Bi-Weekly)

**B. Mr. Charles Nelson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1187 E. Jesse Ct.  
City Highlands Ranch State CO Zip Code 80126-4725  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Great-West Life & Annuity Insurance Co Occupation Senior Vice President, Retirement Serv  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **3000.14**

Date of Receipt **12 / 31 / 2012**  
**Transaction ID : PR6573917861**  
Amount of Each Receipt this Period **346.17**  
P/R Deduction (\$115.39 Bi-Weekly)

**C. Mr. David Aspinwall**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4401 S. Vine Way  
City Englewood State CO Zip Code 80113-6029  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Great-West Life & Annuity Insurance Co Occupation Vice President, Counsel & Chief Compli  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **1300.00**

Date of Receipt **12 / 31 / 2012**  
**Transaction ID : PR6574017861**  
Amount of Each Receipt this Period **150.00**  
P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... **571.17**  
**TOTAL** This Period (last page this line number only).....



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Ms. SARA RICHMAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9393 S. Wolfe St.  
City Highlands Ranch State CO Zip Code 80129-5767  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Great-West Life & Annuity Insurance Co Occupation Assistant Vice-President, Life Insuran  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2012  
**Transaction ID : PR6574147861**  
Amount of Each Receipt this Period 30.00  
P/R Deduction (\$10.00 Bi-Weekly)

**B. Mr. William Harmon**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7050 S. Picadilly Street  
City Aurora State CO Zip Code 80016-2345  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Great-West Life & Annuity Insurance Co Occupation Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 12 / 31 / 2012  
**Transaction ID : PR6574327861**  
Amount of Each Receipt this Period 150.00  
P/R Deduction (\$50.00 Bi-Weekly)

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt / /  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	180.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1478.10

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Mr. JOSEPH P. KERRIGAN Jr.**

Mailing Address 155 Lexington Ave.

City Lovelana State OH Zip Code 45140

Purpose of Disbursement

010

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2012

**Transaction ID : 8154952**

Amount of Each Disbursement this Period

0.06

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

0.06

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

0.06

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. US Bank**

Mailing Address P.O. Box 1800

City St. Paul State MN Zip Code 55101

Purpose of Disbursement

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2012

**Transaction ID : 8195525**

Amount of Each Disbursement this Period

29.97

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

29.97

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

29.97