

Great-West PAC  
8515 East Orchard Road  
Englewood, CO 80111  
(303) 689-3000  
JAN 16 4 02 PM '96

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

CERTIFIED/RETURN RECEIPT REQUESTED

January 12, 1996

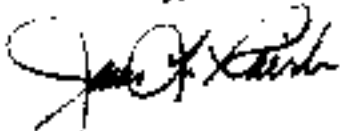
Ms. Kelly Huff  
Federal Election Commission  
Washington, DC 20463

RE: The Great-West Life & Annuity Insurance Company Political Action Committee  
FEC #C00263723

Dear Ms. Huff:

Enclosed find the Form 3X for the Oregon Pre-Special Election Reports. The Great-West Life & Annuity Insurance Company pays the administrative expenses for the Great-West Life & Annuity Insurance Company Political Action Committee.

If there is anything you need, or if you have any questions, please feel free to call me at (303) 689-5759.

Sincerely,  
  
James L. Rairdon  
Paralegal

ENCL.  
JLR/hs

pc: John N. Clayton, Vice President - Headquarters Services, 10T2  
Ruth B. Lurie, Vice President and Counsel, Legal Department, 6T2

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<b>PRESIDENT</b> Alan B. MacLennan (303) 689-3450	<b>VICE-PRESIDENT</b> James D. Motz (303) 689-3470	<b>VICE-PRESIDENT</b> Dennis Low (303) 689-4356	<b>SECRETARY</b> Ruth B. Lurie (303) 689-3815	<b>TREASURER</b> John N. Clayton (303) 689-4200
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Federal Election Commission  
January 12, 1996  
Page Two

Secretary of State  
Elections Division  
1560 Broadway, #200  
Denver, CO 80202

Secretary of State  
Elections Division  
180 State Office Building  
100 Constitution Avenue  
St. Paul, MN 55155-1299

Secretary of State  
Elections Division  
State Capitol, Suite 2300  
Lincoln, NE 68509-4608

Secretary of State  
Elections Division  
141 State Capitol  
Salem, OR 97310-0722

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# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

FEBRUARY 2 1996  
JAN 16 4 02 PM '95

USE FEC MAILING LABEL OR TYPE OR PRINT

<b>1. NAME OF COMMITTEE (in full)</b> Great-West Life & Annuity Insurance Company Political Action Committee	
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported  8515 East Orchard Road	<b>2. FEC IDENTIFICATION NUMBER</b> C00263723
<b>CITY, STATE and ZIP CODE</b>  Englewood, CO 80111	<b>3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)</b>

## 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:  
 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 Special  
 (Type of Election)  
 election on Jan 30, 1996 in the State of OREGON
- 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>July 1, 1995</u> through <u>December 31, 1995</u>		
6. (a) Cash on Hand January 1, 19.....		\$ 11,416.87
(b) Cash on Hand at Beginning of Reporting Period .....	\$ 32,582.72	
(c) Total Receipts (from Line 19) .....	\$ 15,681.57	\$ 46,223.42
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	\$ 48,264.29	\$ 57,640.29
7. Total Disbursements (from Line 30) .....	\$ 14,000.00	\$ 23,376.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) ...	\$ 34,264.29	\$ 34,264.29
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	\$	For further information contact: Federal Election Commission 100 E Street, NW Washington, DC 20543 Toll Free 800-424-9530 Local 202-218-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	\$	
<i>I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.</i>		

Type or Print Name of Treasurer John N. Clayton	
Signature of Treasurer 	Date

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

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# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE Great-West Life & Annuity Insurance Company Political Action Committee	REPORT COVERING PERIOD FROM July 1, 1995 TO December 31, 1995	
	COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>		
11. Contributions (other than loans) From:		
a. Individual Persons Other Than Political Committees		
i. Itemized (use Schedule A)	13,784.52	37,613.56
ii. Unitemized	1,356.00	7,698.48
iii. Total (add i and ii) >	15,140.52	45,312.04
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a ii, b and c) >	15,140.52	45,312.04
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)	541.05	911.38
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 18, 17, and 18) >	15,681.57	46,223.42
20. Total Federal Receipts (subtract line 18 from line 19) >	15,681.57	46,223.42
<b>II. Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures		376.00
c. Total Operating Expenditures (add a i, a ii, and b) >	0.00	376.00
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	14,000.00	23,000.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441b(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00
29. Other Disbursements		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	14,000.00	23,376.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	14,000.00	23,376.00
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) (from line 11d)	15,140.52	45,312.04
33. Total Contribution Refunds (from line 28d)	0.00	0.00
34. Net Contributions (other than loans) (subtract line 33 from 32)	15,140.52	45,312.04
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	376.00
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00
37. Net Operating Expenditures (subtract line 36 from 35) >	0.00	376.00

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11(a)(2)  
11(a)(3)  
11(b)  
11(c)  
11(d)  
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21(a)(1)  
21(a)(2)  
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28(b)  
28(c)  
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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	Name of Employer	Date (month day, year)	Amount of Each Receipt This Period
McCallum, William T. 6001 S. Yosemite, E-102 Englewood, CO 80111 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: President, Chief Executive Officer	payroll deductions	\$1,250.00 (\$312.50 semi-monthly)
Aggregate Year-to-Date >		\$5,000.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt This Period
MacLennan, Alan D. 6086 S. Alton Way Englewood, CO 80111 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: RVP, Employee Benefits	payroll deductions	\$960.00 (\$80.00 semi-monthly)
Aggregate Year-to-Date >		\$1,920.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt This Period
Boquet, Denis C. 12 Franklin Road Medford, NJ 07945 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: RMGR, North Jersey Group Sales Office	payroll deductions	\$600.00 (\$50 semi-monthly)
Aggregate Year-to-Date >		\$1,200.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt This Period
Girth, Carl E. 12025 Palisades Drive Dun Kirk, MD 20754 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: RVP, Group Sales Region I	payroll deductions	\$600.00 (\$50 semi-monthly)
Aggregate Year-to-Date >		\$1,200.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt This Period
Mutz, James D. 5117 E. Nichols Place Littleton, CO 80122 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: SVP, Employee Benefits Operations	payroll deduction	\$600.00 (\$50 semi-monthly)
Aggregate Year-to-Date >		\$600.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt This Period
Mahoney, Victoria A. 1880 Palmer Drive Pleasanton, CA 94588 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: RMGR, San Jose Group Sales Office	payroll deduction	\$650.00 (\$50 semi-monthly)
Aggregate Year-to-Date >		\$650.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt This Period
White, James F. 8746 Black Maple Drive Eden Prairie, MN 55344 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	One Health Plus Occupation: President	payroll deduction	\$504.00 (\$42 semi-monthly)
Aggregate Year-to-Date >		\$1,008.00	

SUBTOTAL of Receipts This Page (optional) 55,114.00  
 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	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Kenyon, Stanford L. 220 N. Smead Court Rosewell, GA 30076 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company	payroll deduction	\$360.00
	Occupation RVP, Group Sales Region III		
	Aggregate Year-to-Date>	\$720.00	(\$30 semi-monthly)
Weinstein, Roy L. 366 Harrison Street Denver, CO 80206 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company	payroll deduction	\$360.00
	Occupation AVP Systems and Operations, Financial Services		
	Aggregate Year-to-Date>	\$720.00	(\$30 semi-monthly)
Lurie, Ruth H. 3076 S. St. Paul Denver, CO 80210 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company	payroll deduction	\$315.00
	Occupation VP, Counsel		
	Aggregate Year-to-Date>	\$455.00	(\$35 semi-monthly)
Tilley, Peter D. 5993 S. Florence Court Englewood, CO 80111 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company	payroll deduction	\$312.00
	Occupation AVP, Asset/Liability Management		
	Aggregate Year-to-Date>	\$620.00	(\$26 semi-monthly)
Miller, Steve H. 4 Greenacres Court Lafayette, CA 94549 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company	payroll deduction	\$300.00
	Occupation RVP, Group Sales Region II		
	Aggregate Year-to-Date>	\$600.00	(\$25 semi-monthly)
Durbach, Glen R. 7340 Briham Circle Castle Rock, CO 80104 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company	payroll deduction	\$300.00
	Occupation VP, Financial Control		
	Aggregate Year-to-Date>	\$600.00	(\$25 semi-monthly)
Barnett, Scott A. 44 N. Liberty South Barrington, IL 60010 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company	payroll deduction	\$300.00
	Occupation RMGR Chicago Group Sales Office		
	Aggregate Year-to-Date>	\$600.00	(\$25 semi-monthly)

SUBTOTAL of Receipts This Page (optional) \$2,247.00  
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	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Riggall, Fred C. 18325 Christoph Drive Morgan Hill, CA 95037	Great-West Life & Annuity Insurance Company		\$300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation AVP, Employee Benefits Sales	payroll deduction	
	Aggregate Year-to-Date >	\$600.00	(\$25 semi-monthly)
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Queenville, Stephen C. 5848 Angle Court Parker, CO 80134	Great-West Life & Annuity Insurance Company		\$300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation AVP, Employee Benefit Sales	payroll deduction	
	Aggregate Year-to-Date >	\$600.00	(\$25 semi-monthly)
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
McCallen, James L. 7283 S. Niagra Circle Englewood, CO 80112	Great-West Life & Annuity Insurance Company		\$400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation VP and Actuary	payroll deduction	
	Aggregate Year-to-Date >	\$400.00	(\$25 semi-monthly)
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
McCallen, Jonn W. 5923 K. Irwin Place Englewood, Co 80112	Financial Administrative Services Corporation		\$252.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation President	payroll deductions	
	Aggregate Year-to-Date >	\$504.00	(\$21 semi-monthly)
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Hackl, Mark R. 3224 S. Espana Circle Aurora, CO 80013	Great-West Life & Annuity Insurance Company		\$240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation MGR, Employee Benefit Products	payroll deduction	
	Aggregate Year-to-Date >	\$480.00	(\$20 semi-monthly)
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Kramer, Mathew M. 5945 Braun Way Arvada, CO 80004	Great-West Life & Annuity Insurance Company		\$240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation MGR, Group Insurance Systems	payroll deduction	
	Aggregate Year-to-Date >	\$480.00	(\$20 semi-monthly)
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Clayton, John N. 8813 E. Fremont Circle Englewood, CO 80112	Great-West Life & Annuity Insurance Company		\$240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation VP, Corporate Services	payroll deduction	
	Aggregate Year-to-Date >	\$480.00	(\$20 semi-monthly)

SUBTOTAL of Receipts This Page (optional)	\$1,872.00
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	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Purchase, Ross 8725 E. Kettle Place Englewood, CO 80112	Great-West Life & Annuity Insurance Company Occupation	payroll deduction	\$240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	VP, Public Bond Investment	deduction	
	Aggregate Year-to-Date >	\$480.00	(\$20 semi-monthly)
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Corbett, Mark S. 416 S. High Street Denver, CO 80209	Great-West Life & Annuity Insurance Company Occupation	payroll deduction	\$240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	VP, Private Placements	deduction	
	Aggregate Year-to-Date >	\$480.00	(\$20 semi-monthly)
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Baker, Jack H. 3922 S Ironston Court Englewood, CO 80111	Great-West Life & Annuity Insurance Company Occupation	payroll deduction	\$240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	AVP, Individual Sales Support	deduction	
	Aggregate Year-to-Date >	\$480.00	(\$20 semi-monthly)
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Stefanson, Douglas J. 6052 S. Moline Way Englewood, CO 80111	Great-West Life & Annuity Insurance Company Occupation	payroll deduction	\$240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	VP, Employee Benefits Small Case Operations	deduction	
	Aggregate Year-to-Date >	\$480.00	(\$20 semi-monthly)
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Shank, David H. 8059 S. Ozella Court Englewood, CO 80112	Great-West Life & Annuity Insurance Company Occupation	payroll deduction	\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	VP, Investment Operations	deduction	
	Aggregate Year-to-Date >	\$400.00	(\$16.67 semi-monthly)
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Kenyon, Matthew S. 500A E. Windsor Avenue Alexandria, VA 22301	Great-West Life & Annuity Insurance Company Occupation	payroll deduction	\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	RMGR, Washington DC Group Sales Office	deduction	
	Aggregate Year-to-Date >	\$200.00	(\$25 semi-monthly)
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Aht, Rolf 8683 S. Aberdeen Circle Highlands Ranch, CO 80126	Great-West Life & Annuity Insurance Company Occupation	payroll deduction	\$198.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	MGH, Mortgage Administration	deduction	
	Aggregate Year-to-Date >	\$396.00	(\$16.50 semi-monthly)

SUBTOTAL of Receipts This Page (optional) \$1,558.04  
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	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Johnson, J. Garth 7814 S. Locust Court Englewood, CO 80112	Great-West Life & Annuity Insurance Company	payroll deduction	\$180.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation AVP, Taxation	Aggregate Year-to-Date >	\$360.00 (\$15 semi-monthly)
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year) <td>Amount of Each Receipt this Period</td>	Amount of Each Receipt this Period
Desmond, James M. 19148 E. Hickock Drive Parker, CO 80134	Great-West Life & Annuity Insurance Company	payroll deductible	\$180.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation MGR, Public Bond	Aggregate Year-to-Date >	\$360.00 (\$15 semi-monthly)
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year) <td>Amount of Each Receipt this Period</td>	Amount of Each Receipt this Period
Collier, Harry A. 5462 Wynada Street Denver, CO 80239	Great-West Life & Annuity Insurance Company	payroll deduction	\$180.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation MGR, Special Producer Sales	Aggregate Year-to-Date >	\$360.00 (\$15 semi-monthly)
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year) <td>Amount of Each Receipt this Period</td>	Amount of Each Receipt this Period
Masters, Bruce G. 5423 Chimney Court Highlands Ranch, CO 80126	Great-West Life & Annuity Insurance Company	payroll deduction	\$180.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation MGR, Public Bond, Investments	Aggregate Year-to-Date >	\$360.00 (\$15 semi-monthly)
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year) <td>Amount of Each Receipt this Period</td>	Amount of Each Receipt this Period
Masonheimer, Cher A. 6477 S. Florence Way Englewood, CO 80111	Great-West Life & Annuity Insurance Company	payroll deduction	\$180.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation MGR, Corporate Properties	Aggregate Year-to-Date >	\$360.00 (\$15 semi-monthly)
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year) <td>Amount of Each Receipt this Period</td>	Amount of Each Receipt this Period
Ross, David F. 13515 N.W. 54th Place Bellaire, WA 98005	Great-West Life & Annuity Insurance Company	payroll deduction	\$180.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation RMGR, Seattle Group Sales Office	Aggregate Year-to-Date >	\$210.00 (\$15 semi-monthly)
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year) <td>Amount of Each Receipt this Period</td>	Amount of Each Receipt this Period
Hoagie, Todd B. 6085 S. Jamison Street Englewood, CO 80111	Great-West Life & Annuity Insurance Company	payroll deduction	\$171.45
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation AMGR, Group Marketing Compensation and Sales Reporting	Aggregate Year-to-Date >	\$342.96 (\$14.29 semi-monthly)

SUBTOTAL of Receipts This Page (optional) \$1,251.48  
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

9603014446

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Burrey, Bruce A. 11179 W. Idaho Avenue Lakewood, CO 80232	Great-West Life & Annuity Insurance Company Occupation AVP, Accounting Services	payroll deduction	\$150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$300.00	(\$12.50 semi-monthly)
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Craven, Dennis H. 8052 S. Clayton Circle Littleton, Co 80122	Great-West Life & Annuity Insurance Company Occupation MGR, Mortgage Investments	payroll deductions	\$132.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$269.00	(\$11 semi-monthly)
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Gibbs, Patricia A. 5636 Spring Valley Road, 25B Dallas, TX 75240	Great-West Life & Annuity Insurance Company Occupation RMGR, Southwest Benefit Payment Office	payroll deduction	\$120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$240.00	(\$10 semi-monthly)
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Rydalch, Kent M. 1730 E. Otter Avenue Littleton, CO 80122	Great-West Life & Annuity Insurance Company Occupation AVP, Interest Audit	payroll deduction	\$120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$240.00	(\$10 semi-monthly)
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Galay, Donald M. 4712 S. Fairplay Court Aurora, CO 80015	Great-West Life & Annuity Insurance Company Occupation VP, Individual Operations	payroll deduction	\$120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$240.00	(\$10 semi-monthly)
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Pudlik, Mark J. 1240 S. Emerson Street Denver, CO 80210	Great-West Life & Annuity Insurance Company Occupation MGR, Financial Reporting	payroll deduction	\$120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$240.00	(\$10 semi-monthly)
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Mallender, Edward M. 8767 Thunderbird Circle Parker, CO 80134	Great-West Life & Annuity Insurance Company Occupation VP, Employee Benefits Large Case Operations	payroll deduction	\$120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$240.00	(\$10 semi-monthly)

SUBTOTAL of Receipts This Page (optional)	\$882.00
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
Knudsen, Howard A. 8872 Chestnut Hill Lane Highlands Ranch, CO 80126	Great-West Life & Annuity Insurance Company Occupation AVP, Individual and Reinsurance	payroll deductions	\$120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$240.00	(\$10 semi-monthly)
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Lowry, James G. 8781 S. Westwind Lane Littleton, CO 80126	Great-West Life & Annuity Insurance Company Occupation AVP, Private Placements	payroll deduction	\$120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$240.00	(\$10 semi-monthly)
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Rafferty, William G. 191 Baker Street Dover, NJ 07081	Great-West Life & Annuity Insurance Company Occupation: AMGR, North Jersey Group Sales Office	payroll deduction	\$120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$240.00	(\$10 semi-monthly)
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Shaw, Robert K. 5484 S. Nucla Court Aurora, Co 80015	Great-West Life & Annuity Insurance Company Occupation VP, Savings Operations	8-8-95	\$500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	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
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$0.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$0.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$0.00	

SUBTOTAL of Receipts This Page (optional)	\$800.00
TOTAL This Period (last page this line number only)	\$13,784.52

9603014407

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
Key Bank PO Box 27124 Salt Lake City, UT 84127 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Earned Interest		\$541.05
Aggregate Year-to-Date >		\$911.38	
<b>B. Full Name, Mailing Address and Zip Code</b>			
Name of Employer Date (month day, year) Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			Amount of Each Receipt this Period
Aggregate Year-to-Date >		\$0.00	
<b>C. Full Name, Mailing Address and Zip Code</b>			
Name of Employer Date (month day, year) Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			Amount of Each Receipt this Period
Aggregate Year-to-Date >		\$0.00	
<b>D. Full Name, Mailing Address and Zip Code</b>			
Name of Employer Date (month day, year) Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			Amount of Each Receipt this Period
Aggregate Year-to-Date >		\$0.00	
<b>E. Full Name, Mailing Address and Zip Code</b>			
Name of Employer Date (month day, year) Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			Amount of Each Receipt this Period
Aggregate Year-to-Date >		\$0.00	
<b>F. Full Name, Mailing Address and Zip Code</b>			
Name of Employer Date (month day, year) Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			Amount of Each Receipt this Period
Aggregate Year-to-Date >		\$0.00	
<b>G. Full Name, Mailing Address and Zip Code</b>			
Name of Employer Date (month day, year) Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			Amount of Each Receipt this Period
Aggregate Year-to-Date >		\$0.00	

SUBTOTAL of Receipts This Page (optional) \$541.05  
 TOTAL This Period (last page, this line number only)

96030144403

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	Purpose of Disbursement	Date (month day, year)	Amount of Each Disbursement this Period
Committee to Elect Wayne Allard for Congress PO Box 0032 Loveland, CO 80539-0032	Campaign donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	7-6-95	\$500.00
B Full Name, Mailing Address and Zip Code Friends of Scott Melnick 3720 Crestview Way Cimarron Junction, CO 81506	Campaign donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	8-23-95	\$4,000.00
C Full Name, Mailing Address and Zip Code LJFBPAC ACTJ 1601 Pennsylvania Ave., NW Washington, DC 20004-2599	Donation to Separate Segregated Fund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	8-28-95	\$4,000.00
D Full Name, Mailing Address and Zip Code Committee to Elect Wayne Allard for Congress PO Box 0032 Loveland, CO 80539-0032	Campaign donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	9-26-95	\$1,000.00
E Full Name, Mailing Address and Zip Code Campbell Victory Fund PO Box 480166 Denver, CO 80248	Campaign donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	10-6-95	\$1,000.00
F Full Name, Mailing Address and Zip Code People for Beschwitz '96 507 Capitol Court, NE, #100 Washington, DC 20002	Campaign donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	11-9-95	\$500.00
G Full Name, Mailing Address and Zip Code Committee to Elect Wayne Allard for Congress PO Box 0032 Loveland, CO 80539-0032	Campaign donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	12-12-95	\$1,000.00
H Full Name, Mailing Address and Zip Code Christensen for Congress PO Box 540621 Omaha, NE 68154	Campaign donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	12-12-95	\$500.00
I Full Name, Mailing Address and Zip Code Gordon Smith for US Senate 5285 S.W. Meadows Road, Suite 101 Lake Oswego, OR 97035	Campaign donation Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Special Election	12-12-95	\$1,000.00

SUBTOTAL of Receipts This Page (optional) \$13,500.00  
TOTAL This Period (last page this line number only)

9603014409

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	Purpose of Disbursement	Date (month day, year)	Amount of Each Disbursement this Period
Coloradoans for David Skaggs PO Box 652 Wheatlaure, CO 80030	Campaign donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	12-12-95	\$5,000.00
B 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
C 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
D 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
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) \$500.00  
 TOTAL This Period (last page this line number only) \$14,000.00

9603014410

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

Registered/Certified Mail POSTMARKED  
1-12-96

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

*JMN*  
PREPARER

*1-18-96*  
DATE PREPARED

96030144411