

**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"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="116801.20"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="5089.08"/>	<input type="text" value="5089.08"/>
(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="121890.28"/>	<input type="text" value="121890.28"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12000.00"/>	<input type="text" value="12000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="109890.28"/>	<input type="text" value="109890.28"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

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).....	4446.20	4446.20
(ii) Unitemized	640.00	640.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5086.20	5086.20
(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)	5086.20	5086.20
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	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	2.88	2.88
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))..... ▶	5089.08	5089.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5089.08	5089.08

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.....	12000.00	12000.00
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	0.00	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 (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
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)) ..	12000.00	12000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12000.00	12000.00

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)	5086.20	5086.20
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5086.20	5086.20
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 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. CHRISTOPHER H CUMMING
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 TURNER RIDGE COURT
 City WILTON State CT Zip Code 06897-1735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GREAT-WEST LIFE & ANNUITY INSURANCE
 Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 11 / 2012
Transaction ID : 7525671
 Amount of Each Receipt this Period
 2000.00

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 ▼ 1153.86

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012
Transaction ID : PR18884466761
 Amount of Each Receipt this Period
 1153.86
 P/R Deduction (\$192.31 Bi-Weekly)

C. 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 ▼ 692.34

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012
Transaction ID : PR6573916761
 Amount of Each Receipt this Period
 692.34
 P/R Deduction (\$115.39 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	3846.20
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 10
<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. 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 ▼ 300.00

Date of Receipt 03 / 31 / 2012
Transaction ID : PR6574016761
Amount of Each Receipt this Period 300.00
P/R Deduction (\$50.00 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 ▼ 300.00

Date of Receipt 03 / 31 / 2012
Transaction ID : PR6574326761
Amount of Each Receipt this Period 300.00
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

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	4446.20

**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 checked="" 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 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. Friends Of John Boehner

Mailing Address 7908-I2 Cincinnati Dayton Road

City West Chester State OH Zip Code 45069

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. John A. Boehner

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼

State: OH District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	1	2

Transaction ID : 7457775

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

B. Jim Gerlach For Congress Committee

Mailing Address PO Box 87

City Uwchland State PA Zip Code 19480

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. James Gerlach

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼

State: PA District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	1	2

Transaction ID : 7457789

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

C. Hatch Election Committee Inc

Mailing Address 175 South West Temple Suite 650

City Salt Lake City State UT Zip Code 84101

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Orrin Hatch

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼

State: UT District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	1	2

Transaction ID : 7521901

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

6	0	0	0	.	0	0
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2	5	0	0	.	0	0
---	---	---	---	---	---	---

**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 checked="" 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 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. Bob Corker For Senate 2012

Mailing Address 1910 21st Avenue South

City Nashville State TN Zip Code 37212

Purpose of Disbursement

011

Candidate Name

Sen. Robert Corker

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼

State: TN District:

Date of Disbursement

MM / DD / YYYY
02 / 19 / 2012

Transaction ID : 7521903

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends Of Carolyn Mccarthy

Mailing Address 151 Linden Road

City Mineola State NY Zip Code 11501

Purpose of Disbursement

011

Candidate Name

Rep. Carolyn McCarthy

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼

State: NY District: 04

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2012

Transaction ID : 7521911

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Huizenga For Congress

Mailing Address 441 Williams Court

City Zeeland State MI Zip Code 49464

Purpose of Disbursement

011

Candidate Name

Rep. Bill Huizenga

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼

State: MI District: 02

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2012

Transaction ID : 7521913

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

**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 checked="" 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 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. Menendez For Senate

Mailing Address One Gateway Center Suite 520

City Newark State NJ Zip Code 07102

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Robert Menendez

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼

State: NJ District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2012

Transaction ID : 7521919

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Portman For Senate Committee

Mailing Address 9856 Archer Lane

City Dublin State OH Zip Code 43017

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Rob Portman

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼

State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	28	/	2012

Transaction ID : 7521936

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Kind For Congress Committee

Mailing Address 205 5th Avenue South

City La Crosse State WI Zip Code 54601

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Ron Kind

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼

State: WI District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2012

Transaction ID : 7521937

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

12000.00
