



DEC 2 12 11 PM '94

8515 East Orchard Road  
Englewood, CO 80111 Tel. (303) 689-3000  
Address mail to: P.O. Box 700, Denver, CO 80201

CERTIFIED/RETURN RECEIPT REQUESTED

November 29, 1994

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 Post-election FEC Form 3X for the general election of 1994. The Great-West Life and 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

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

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# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

REC 2 12 11 PM '94

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

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

## 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:
- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31  |
- Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day report following the General Election on  
11/8/94 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>10/20/94</u> through <u>11/28/94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>		\$ 40,608.72
(b) Cash on Hand at Beginning of Reporting Period	\$ 7,722.24	
(c) Total Receipts (from Line 19)	\$ 2,573.92	\$ 51,969.44
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 10,296.16	\$ 92,578.16
7. Total Disbursements (from Line 20)	\$ 4,000.00	\$ 86,282.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 6,296.16	\$ 6,296.16
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 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 certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.		

Type or Print Name of Treasurer <u>John N. Clayton</u>	
Signature of Treasurer 	Date <u>November 29, 1994</u>

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

**FEC FORM 3X**  
(revised 9/83)

# 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 **10/20/94** TO: **11/28/94**

I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year	
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
i.	Namized (use Schedule A) .....	2,231.92	38,271.68	11(a)(i)
ii.	Unitemized .....	314.00	12,563.47	11(a)(ii)
iii.	Total .....	2,545.92	50,835.15	11(a)(iii)
b.	Political Party Committees .....			11(b)
c.	Other Political Committees (such as PACs) .....			11(c)
d.	Total Contributions .....	2,545.92	50,835.15	11(d)
12.	Transfers From Affiliated/Other Party Committees .....			12
13.	All Loans Received .....			13
14.	Loan Repayments Received .....			14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....			15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees .....			16
17.	Other Federal Receipts (Dividends, Interest, etc.) .....	28.00	1,134.29	17
18.	Transfers from Nonfederal Account for Joint Activity .....			18
19.	Total Receipts .....	2,573.92	51,969.44	19
20.	Total Federal Receipts .....	2,573.92	51,969.44	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share .....			21(a)(i)
ii.	Non-Federal Share .....		282.00	21(a)(ii)
b.	Other Federal Operating Expenditures .....			21(b)
c.	Total Operating Expenditures .....		282.00	21(c)
22.	Transfers to Affiliated/Other Party Committees .....			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees .....	4,000.00	86,000.00	23
24.	Independent Expenditures (use Schedule E) .....			24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..			25
26.	Loan Repayments Made .....			26
27.	Loans Made .....			27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees .....			28(a)
b.	Political Party Committees .....			28(b)
c.	Other Political Committees (such as PACs) .....			28(c)
d.	Total Contribution Refunds .....			28(d)
29.	Other Disbursements .....			29
30.	Total Disbursements .....	4,000.00	86,282.00	30
31.	Total Federal Disbursements .....	4,000.00	86,282.00	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d) .....	2,545.92	50,835.15	32
33.	Total Contribution Refunds (from line 28d) .....			33
34.	Net Contributions (other than loans)(subtract line 33 from 32) .....	2,545.92	50,835.15	34
35.	Total Federal Operating Expenditures .....		282.00	35
36.	Offsets to Operating Expenditures (from line 15) .....			36
37.	Net Operating Expenditures .....		282.00	37

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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	Great-West Life & Annuity Insurance Company Occupation: President, and Chief Executive Officer	payroll deductions	\$625.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$9,710.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Beagle, Todd B 6085 S. Jasmine Street Englewood, CO 80111	Great-West Life & Annuity Insurance Company Occupation: MGR, Employee Benefits Sales Administration, Marketing	payroll deductions	\$28.58
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$242.93	
C. 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 Occupation: MGR, Employee Benefit Products	payroll deductions	\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$300.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Kramer, Matthew M. 5945 Braun Way Arvada, CO 80004	Great-West Life & Annuity Insurance Company Occupation: MGR, Group Insurance Systems	payroll deductions	\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$280.00	
E. 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	Great-West Life & Annuity Insurance Company Occupation: FVP, Employee Benefits	payroll deductions	\$160.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$1,440.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Quenville, Stephen C. 5848 Angie Court Parker, CO 80134	Great-West Life & Annuity Insurance Company Occupation: AVP, Employee Benefit Sales	payroll deductions	\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$575.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Barnett, Scott A. 44 Liberty South Barrington, IL 60010	Great-West Life & Annuity Insurance Company Occupation: RMGR, Chicago Group Sales Office	payroll deductions	\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$450.00	

SUBTOTAL of Receipts This Page (optional) \$993.58  
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
Bonack, Denis C. 12 Franklin Road Middletown, NJ 07945	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: RMGR North Jersey Group Sales Office	payroll deductions	\$100.00
	Aggregate Year-to-Date:	\$900.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Girsh, Carl E. 12025 Palisades Drive Dunkirk, MD 20754	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation RVP, Group Sales Region I	payroll deductions	\$100.00
	Aggregate Year-to-Date:	\$800.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Howard, Martin W. 3423 228 Northwest Stanwood, WA 98292	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation RMGR, Seattle Group Sales Office	payroll deductions	\$50.00
	Aggregate Year-to-Date:	\$450.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Kunyon, Stanford L. 1470 North bluff Trace Roswell, GA 30076	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation RVP, Group Sales Region III	payroll deductions	\$60.00
	Aggregate Year-to-Date:	\$540.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Miller, Steve H. 4 Greenacres Court Lafayette, CA 94549	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation RVP, Group Sales Region II	payroll deductions	\$50.00
	Aggregate Year-to-Date:	\$450.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Riggall, Fred C. 8792 S. Mourning Dove Highlands Ranch, CO 80126	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation AVP, Employee Benefit Sales	payroll deductions	\$50.00
	Aggregate Year-to-Date:	\$450.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
White, James E. 8746 Black Maple Drive Liden Prairie, MN 55344	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation RMGR, Minneapolis Group Sales Office	payroll deductions	\$84.00
	Aggregate Year-to-Date:	\$798.00	

SUBTOTAL of Receipts This Page (optional) \$494.00  
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 Baker, Jack H. 5923 S. Innton Court Englewood, CO 80111	Name of Employer Great-West Life & Annuity Insurance Company Occupation AVP, Individual Sales Support	Date (month day, year) payroll deductions	Amount of Each Receipt this Period \$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$340.00	
B. Full Name, Mailing Address and Zip Code Bond, Robert D. 362 Morning Star Way Castle Rock, CO 80104	Name of Employer Benefits Corporation Company Occupation VP, Sales	Date (month day, year) payroll deductions	Amount of Each Receipt this Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$400.00	
C. Full Name, Mailing Address and Zip Code McCallen, Joan W. 5923 E. Irwin Place Englewood, CO 80112	Name of Employer Financial Administrative Services Corporation Occupation: VP, Systems and Operations	Date (month day, year) payroll deductions	Amount of Each Receipt this Period \$42.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$294.00	
D. Full Name, Mailing Address and Zip Code Weinstein, Roy T. 366 Harrison Street Denver, CO 80206	Name of Employer Great-West Life & Annuity Insurance Company Occupation: AVP, Systems and Operations, Financial Services	Date (month day, year) payroll deductions	Amount of Each Receipt this Period \$60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$570.00	
E. Full Name, Mailing Address and Zip Code Ahl, Rolf 9563 S. Devonshire Place Highlands Ranch, CO 80126	Name of Employer Great-West Life & Annuity Insurance Company Occupation MGR, Mortgage Administration	Date (month day, year) payroll deductions	Amount of Each Receipt this Period \$33.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$297.00	
F. Full Name, Mailing Address and Zip Code Corbett, Mark S. 416 S. High Street Denver, CO 80209	Name of Employer Great-West Life & Annuity Insurance Company Occupation VP, Private Placements	Date (month day, year) payroll deductions	Amount of Each Receipt this Period \$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$280.00	
G. Full Name, Mailing Address and Zip Code Maturinb, Terry L. 9322 S. Crossmore Way Highlands Ranch, CO 80126	Name of Employer Great-West Life & Annuity Insurance Company Occupation AVP, Public Bonds	Date (month day, year) payroll deductions	Amount of Each Receipt this Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$350.00	
SUBTOTAL of Receipts This Page (optional)			\$315.00
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 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation VP, Public Bond Investment	payroll deductions	\$40.00
Aggregate Year-to-Date >		\$360.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Shanks, David H. 8019 S. Oneida Court Englewood, CO 80112 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation VP, Investment Operations	payroll deductions	\$33.34
Aggregate Year-to-Date >		\$266.72	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Cahan, Judith H. 3329 E. Bayaud, #1205 Denver, CO 80219 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation Assistant Counsel	payroll deductions	\$30.00
Aggregate Year-to-Date >		\$210.00	
D. 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. Frenont Circle Englewood, CO 80112 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation VP, Corporate Services	payroll deductions	\$40.00
Aggregate Year-to-Date >		\$360.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Derbeck, Glen H. 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 Occupation VP, Financial Control	payroll deductions	\$50.00
Aggregate Year-to-Date >		\$450.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Tilly, 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 Occupation VP, Asset/Liability Management	payroll deductions	\$50.00
Aggregate Year-to-Date >		\$350.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Collier, Darryl A. 5462 Kannda Street Denver, CO 80219 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation MGR, Special Producer Sales	payroll deductions	\$30.00
Aggregate Year-to-Date >		\$210.00	

SUBTOTAL of Receipts This Page (optional) \$273.34  
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
Ball, George B. 155 Valley Run Drive Powell, OH 43065 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: RMGR, Columbus Group Sales Office Aggregate Year-to-Date > \$250.00	payroll deduction	\$50.00
B. Full Name, Mailing Address and Zip Code Desmond, Janet M. 19148 E. Hickock Drive Parker, CO 80134 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: MGR, Public Bond Aggregate Year-to-Date > \$225.00	payroll deduction	\$30.00
C. Full Name, Mailing Address and Zip Code Blackley, Robert A. 8147 S. Wabash Court Englewood, CO 80112 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: MGR, Corporate Planning Aggregate Year-to-Date > \$212.00	payroll deduction	\$16.00
D. Full Name, Mailing Address and Zip Code Johnson, J. Garth 7814 S. Locust Court Englewood, CO 80112 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: AVP, Taxation Aggregate Year-to-Date > \$210.00	payroll deduction	\$30.00
E. Full Name, Mailing Address and Zip Code Masonheiber, Chet A. 6477 S. Florence Way Englewood, CO 80111 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: MGR, Corporate Properties Aggregate Year-to-Date > \$210.00	payroll deduction	\$30.00
F. Full Name, Mailing Address and Zip Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer  Occupation Aggregate Year-to-Date >	Date (month day, year)   	Amount of Each Receipt this Period
G. Full Name, Mailing Address and Zip Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer  Occupation Aggregate Year-to-Date >	Date (month day, year)   	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) \$156.00  
 TOTAL This Period (last page this line number only) \$2,231.92

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SCHEDULE A ITEMIZED RECEIPTS

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

94039450394

A. Full Name, Mailing Address and Zip Code Key Rank PO Box 27124 Salt Lake City, UT 84127-9940	Name of Employer Occupation: Aggregate Year-to-Date>	Date (month day, year) 10-31-94	Amount of Each Receipt this Period \$28.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Earned Interest \$1,134.20		
B. Full Name, Mailing Address and Zip Code	Name of Employer Occupation: Aggregate Year-to-Date>	Date (month day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
C. Full Name, Mailing Address and Zip Code	Name of Employer Occupation Aggregate Year-to-Date>	Date (month day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
D. Full Name, Mailing Address and Zip Code	Name of Employer Occupation Aggregate Year-to-Date>	Date (month day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
E. Full Name, Mailing Address and Zip Code	Name of Employer Occupation Aggregate Year-to-Date>	Date (month day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
F. Full Name, Mailing Address and Zip Code	Name of Employer Occupation Aggregate Year-to-Date>	Date (month day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
G. Full Name, Mailing Address and Zip Code	Name of Employer Occupation Aggregate Year-to-Date>	Date (month day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			

SUBTOTAL of Receipts This Page (optional) \$28.00  
 TOTAL This Period (last page this line number only) \$28.00

SCHEDULE B ITEMIZED DISBURSEMENTS

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

94039450395

A Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of Each Disbursement this Period
American Council of Life Insurance LifePac 1011 Pennsylvania Avenue, NW Washington, DC 20004-2599	Transfer to another PAC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	11/1/94	\$4,000.00
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)	\$4,000.00
TOTAL This Period (last page this line number only)	\$4,000.00

Federal Election Commission  
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JMK

PREPARER

10-2-97

DATE PREPARED

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