

Great-West PAC

8515 East Orchard Road
Englewood, CO 80111
(303) 689-3000

JUL 18 10 50 AM '95

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

CERTIFIED/RETURN RECEIPT REQUESTED

July 14, 1995

Ms. Kelly Huff
Federal Election Commission
Washington, DC 20463

RE: The Great-West Life & Annuity Insurance Company Political Action Committee
FEC #CO0263723

Dear Ms. Huff:

Enclosed find the FEC Form 3X for the Mid Year Report of 1995. 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
Assistant Treasurer

ENCL.

pc w/all enclosures:

John N. Clayton, Treasurer
Ruth B. Lurie, Secretary

pc w/Summary and Schedule B only:

Elections Officer
Office of the Secretary of State
1560 Broadway, Suite 200
Denver, CO 80202

Secretary of State
State Capitol, Room 2300
Lincoln, NE 68509-4608

PRESIDENT
Alan B. MacLennan
(303) 689-3450

VICE-PRESIDENT
James D. Motz
(303) 689-3470

VICE-PRESIDENT
Dennis Low
(303) 689-4356

SECRETARY
Ruth B. Lurie
(303) 689-3815

TREASURER
John N. Clayton
(303) 689-4200

Ms. Kelly Huff
July 14, 1995
Page 2

Secretary of State
State Capitol Bldg., Suite 204
500 East Capitol
Pierre, SD 57501-5070

2025 RELEASE UNDER E.O. 14176

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

JUL 13 10 59 AM '95

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Great-West Life & Annuity Insurance Company Political Action Committee	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 8515 East Orchard Road	2. FEC IDENTIFICATION NUMBER 000263723
CITY, STATE and ZIP CODE Englewood, CO 80111	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate 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 _____ 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>01/01/95</u> through <u>06/30/95</u>		\$ 11,416.87
6. (a) Cash on Hand January 1, 19__	\$ 11,416.87	
(b) Cash on Hand at Beginning of Reporting Period	\$ 30,541.85	\$ 30,541.85
(c) Total Receipts (from Line 19)	\$ 41,958.72	\$ 41,958.72
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 9,376.00	\$ 9,376.00
7. Total Disbursements (from Line 30)	\$ 32,582.72	\$ 32,582.72
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$	
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$	

For further information contact:
 Federal Election Commission
 950 E Street, NW
 Washington, DC 20463
 Toll Free 800-424-9630
 Local 202-219-3420

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: John K. Clayton Date: July 14, 1995
 Signature of Treasurer:

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

**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 01/01/95 TO: 06/30/95	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees		\$23,829.04	\$23,829.04
i. Itemized (use Schedule A)		\$6,342.48	\$6,342.48
ii. Unitemized			
iii. Total (add i and ii) >		\$30,171.52	\$30,171.52
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a, b and c) >		\$30,171.52	\$30,171.52
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.)		370.33	370.33
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		\$30,541.85	\$30,541.85
20. Total Federal Receipts (subtract line 18 from line 19) >		\$30,541.85	\$30,541.85
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share		\$376.00	\$376.00
b. Other Federal Operating Expenditures		\$376.00	\$376.00
c. Total Operating Expenditures (add a, b and c) >		\$376.00	\$376.00
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		\$9,000.00	\$9,000.00
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)		\$0.00	\$0.00
d. Total Contribution Refunds (add a, b and c) >		\$0.00	\$0.00
29. Other Disbursements		\$9,376.00	\$9,376.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		\$9,376.00	\$9,376.00
31. Total Federal Disbursements (subtract line 21 a, b and c from line 30) >		\$9,376.00	\$9,376.00
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		\$30,171.52	\$30,171.52
33. Total Contribution Refunds (from line 28d)		0.00	0.00
34. Net Contributions (other than loans)(subtract line 33 from 32)		\$30,171.52	\$30,171.52
35. Total Federal Operating Expenditures (add 21 a, b and c) >		\$376.00	\$376.00
36. Offsets to Operating Expenditures (from line 15)		\$0.00	\$0.00
37. Net Operating Expenditures (subtract line 36 from 35) >		\$376.00	\$376.00

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. 5922 S. Irons Court Englewood, CO 80111 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation AVP, Individual Sales Support Aggregate Year-to-Date	Date (month day, year) deductions \$240.00	Amount of Each Receipt this Period \$240.00
B. Full Name, Mailing Address and Zip Code Ball, George B. 155 Valley Run Drive Powell, OH 43065 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great West Life & Annuity Insurance Company Occupation RMGR, Columbus Group Sales Office Aggregate Year-to-Date	Date (month day, year) deductions \$300.00	Amount of Each Receipt this Period \$300.00
C. Full Name, Mailing Address and Zip Code Barnett, Scott A. 44 N. Liberty South Barrington, IL 60010 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation RMGR, Chicago Group Sales Office Aggregate Year-to-Date	Date (month day, year) deductions \$300.00	Amount of Each Receipt this Period \$300.00
D. Full Name, Mailing Address and Zip Code Bein, Warren J. 7823 S. Enlar Way Englewood, CO 80112 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great West Life & Annuity Insurance Company Occupation AVP, Financial Services Systems Aggregate Year-to-Date	Date (month day, year) 3-17-95 deductions \$300.00	Amount of Each Receipt this Period \$300.00
E. Full Name, Mailing Address and Zip Code Bodine, Deborah A. 4682 S. Yank Street Morrison, CO 80465 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation MGR, Large Case Operations Aggregate Year-to-Date	Date (month day, year) 4-27-95 deductions \$125.00	Amount of Each Receipt this Period \$125.00
F. Full Name, Mailing Address and Zip Code Bousett, Denis C. 12 Franklin Road Mendham, NJ 07945 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation RMGR, North Jersey Group Sales Office Aggregate Year-to-Date	Date (month day, year) deductions \$600.00	Amount of Each Receipt this Period \$600.00
G. Full Name, Mailing Address and Zip Code Brown, John A. 30402 Heavenly Court Evergreen, CO 80439 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation SVP, Sales, Financial Services Aggregate Year-to-Date	Date (month day, year) 3-7-95 deductions \$500.00	Amount of Each Receipt this Period \$500.00
SUBTOTAL of Receipts This Page (optional)			\$2,165.00
TOTAL This Period (last page, this line number only)			\$2,165.00

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each subject of the Detailed Summary Page PAGE: 1 OF 6
 FEDERAL LINE NUMBER 1163(1)

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
Clayton, John N. 8813 E. Tremont Circle Eaglewood, CO 80112	Great-West Life & Annuity Insurance Company Occupation: VP, Corporate Services		deductions \$240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date:		\$240.00
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: VP, Private Placements		deductions \$240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date:		\$240.00
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt This Period
Dukow, Great T. 65 Indign Way Castle Rock, CO 80104	Great-West Life & Annuity Insurance Company Occupation: Director	2-14-95	\$500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date:		\$500.00
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt This Period
Davis, Gerald L. 9435 W. Wesley Avenue Jalisco, CO 80227	Great-West Life & Annuity Insurance Company Occupation: AVP, Information Systems	3-22-95	\$275.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date:		\$275.00
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt This Period
Derback, Glen R. 7340 Brisson Circle Castle Rock, CO 80104	Great-West Life & Annuity Insurance Company Occupation: VP, Financial Services		deductions \$400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date:		\$400.00
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt This Period
Frienen, Eric P. 1151 E. Phillips Place Littleton, CO 80126	Great-West Life & Annuity Insurance Company Occupation: MGR, Private Placement Investments	4-19-95	\$400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date:		\$400.00
G. 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 Dunkirk, MD 20754	Great-West Life & Annuity Insurance Company Occupation: RVP, Group Sales Region I		deductions \$600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date:		\$600.00
SUBTOTAL of Receipts This Page (optional)			52,557.00
TOTAL This Period (last page this line number only)			

SCHEDULE A ITEMIZED RECEIPTS

This receipt is subject to the 30-day objection period of the United Summary App. FOR LINE NUMBER 116(1)

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
Hackel, Mark R. 3224 S. Espana Circle Aurora, CO 80013 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: MGR, Employee Benefit Products	deduction Aggregate Year-to-Date: \$240.00	\$240.00
Hoffmann, Wayne T. 5854 S. Paris Court Englewood, CO 80110 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: VP, Private Placements	4-30-95 Aggregate Year-to-Date: \$4,300.00	\$4,300.00
Jousson, David T. 7007 E. Hixdale Avenue Englewood, CO 80112 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: MGR, Group Pension Systems	3-6-95 Aggregate Year-to-Date: \$350.00	\$350.00
Kavanaugh, Robert E. 15895 W. Bayaud Drive Golden, CO 80401 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: SVP, Employee Benefits Sales	4-31-95 Aggregate Year-to-Date: \$2,000.00	\$2,000.00
Kramer, Matthew M. 5945 Bruno Way Arvada, CO 80004 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: MGR, Group Insurance Systems	deduction Aggregate Year-to-Date: \$240.00	\$240.00
Lemmer, D. Crnig 6051 S. Molino Way Englewood, CO 80111 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: SVP, General Counsel and Secretary	3-31-95 Aggregate Year-to-Date: \$600.00	\$600.00
Low, Dennis 3862 Christy Way Sedalia, CO 80135 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: TWP, Financial Services	4-20-95 Aggregate Year-to-Date: \$1,500.00	\$1,500.00

SUBTOTAL of Receipts This Page (optional) \$5,580.00
TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

For each schedule PAGE 4 OF 6
 For each receipt on this Form RECEIPT NUMBER
 000000

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
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 EVP, Employee Benefits	deductions Aggregate Year-to-Date > 5900.00	5900.00
McCallen, Juan W. 5923 E. Irwin Place Englewood, CO 80112 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Financial Administrative Services Corporation Occupation President	deductions Aggregate Year-to-Date > 8252.00	8252.00
McCallon, 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	deductions Aggregate Year-to-Date > 53,750.00	53,750.00
McDonald, Cynthian R. 4578 E. Links Parkway Littleton, CO 80122 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation VP, Corporate Finance	4-12-95 Aggregate Year-to-Date > 5400.00	5400.00
McMahon, Randall J. 1904 E. Chesapeake Lane Highlands Ranch, CO 80126 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation MGR, Investment Systems	3-19-95 Aggregate Year-to-Date > 8250.00	8250.00
Miller, Scott A. 3863 E. Long Way Littleton, CO 80122 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation AVP, Financial Services Systems	4-1-95 Aggregate Year-to-Date > 4300.00	4300.00
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 Occupation RVP, Group Sales Region II	deduction Aggregate Year-to-Date > 5000.00	5000.00

SUBTOTAL of Receipts This Page (optional) 86,212.00
 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
Oleson, Richard H. 9574 Kalamore Court Highlands Ranch, CO 80126 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation VP, Mortgage Investments	2-20-95	\$250.00 Aggregate Year-to-Date > \$250.00
B. Full Name, Mailing Address and Zip Code Purchase, Russ 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	deductions	\$300.00 Aggregate Year-to-Date > \$300.00
C. Full Name, Mailing Address and Zip Code Quenville, Stephen C. 5848 Angie Court Parker, CO 80134 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation AVP, Employee Benefit Sales	deductions	\$300.00 Aggregate Year-to-Date > \$300.00
D. Full Name, Mailing Address and Zip Code Rigall, Fred C. 18325 Christoph Drive Morgan Hill, CA 95037 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation AVP, Employee Benefit Sales	deductions	\$300.00 Aggregate Year-to-Date > \$300.00
E. Full Name, Mailing Address and Zip Code Rooske, John D. 6866 E. Osprey Court Highlands Ranch, CO 80126 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation VP, Individual Financial Services	3-28-95	\$500.00 Aggregate Year-to-Date > \$500.00
F. Full Name, Mailing Address and Zip Code Soller, Gregory E. 37 New York Court Monarch Beach, CA 92629 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation VP, Major Accounts, Financial Services	4-13-95	\$800.00 Aggregate Year-to-Date > \$800.00
G. Full Name, Mailing Address and Zip Code Shantz, David H. 8059 S. Osceola Court Englewood, CO 80112 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation VP, Investments Operations	deductions	\$200.00 Aggregate Year-to-Date > \$200.00

SUBTOTAL of Receipts This Page (optional) \$2,500.00
 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
Key Bank PO Box 27124 Salt Lake City, UT 84127 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Aggregate Year-to-Date >	Earned Interest \$370.33	\$370.33
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Aggregate Year-to-Date >		\$0.00
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Aggregate Year-to-Date >		\$0.00
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Aggregate Year-to-Date >		\$0.00
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation 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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation 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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Aggregate Year-to-Date >		\$0.00

SUBTOTAL of Receipts This Page (optional) \$370.33
 TOTAL This Period (last page this line number only) \$370.33

SCHEDULE B ITEMIZED DISBURSEMENTS

NAME OF COMMITTEE (in Full) Grand-West Life & Annuity Insurance Company Political Action Committee			
A Full Name, Mailing Address and Zip Code John Christenson for Congress 12129 Daraley Road Woodbridge, VA 22192	Purpose of Disbursement Campaign contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Date (month day, year) 1-9-95	Amount of Each Disbursement This Period \$2,000.00
B Full Name, Mailing Address and Zip Code Friends of Scott McInnis PO Box 3157 Grand Junction, CO 81502	Purpose of Disbursement Campaign contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Date (month day, year) 3-22-95	Amount of Each Disbursement This Period \$500.00
C Full Name, Mailing Address and Zip Code Committee to Elect Wayne Allard for Congress 507 Capitol Court, #100 NE Washington, DC 20002	Purpose of Disbursement Campaign contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Date (month day, year) 3-28-95	Amount of Each Disbursement This Period \$500.00
D Full Name, Mailing Address and Zip Code Friends of Larry Prosser PO Box 77166 Washington, DC 20013	Purpose of Disbursement Campaign contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Date (month day, year) 4-11-95	Amount of Each Disbursement This Period \$1,300.00
E Full Name, Mailing Address and Zip Code HIPAC Health Insurance Association of America 555 13th Street NW Washington, DC 20004	Purpose of Disbursement Transfer to Political Action Committee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Date (month day, year) 5-19-95	Amount of Each Disbursement This Period \$3,000.00
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)			\$9,300.00
TOTAL This Period (last page this line number only)			\$9,300.00

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
7/14/95

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

ES.
PREPARER

7/19/95
DATE PREPARED

2025 RELEASE UNDER E.O. 14176