



RECEIVED
FEDERAL ELECTION COMMISSION
MAIL ROOM

Dec 9 12 06 PM '96

8515 East Orchard Road
Englewood, CO 80111 Tel. (303) 689-3000
Address mail to: P.O. Box 1700, Denver, CO 80201

CERTIFIED/RETURN RECEIPT REQUESTED

December 3, 1996

Ms. Jan McBride
Federal Election Commission
Washington, DC 20463

RE: The Great-West Life & Annuity Insurance Company Political Action Committee
FEC #CO 0263723

Dear Ms. McBride:

Enclosed find the 1996 Post General Election FEC Form 3X. 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

Enclosure

pc w/all enclosures:

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

pc w/Summary and Schedule B only:

Secretary of State
Elections Division
State Capitol Bldg. Room 026
Little Rock, AR 72201

Secretary of State
Govt. Ethics and Elections Practices
State Office Bldg, Room 114
Augusta, ME 04333

Secretary of State
Elections Division
20 West State Street, CN 304
Trenton, NJ 08625-0304

Secretary of Commonwealth
Division of Public Records
One Ashburton Place
Boston, MA 02108

Ms. Jan McBride
December 3, 1996
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Secretary of State
Elections Division
The Capitol Building
Cheyenne, WY 82002-0020

Secretary of State
Elections Division
State Capitol, Suite 225
Helena, MT 59620

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

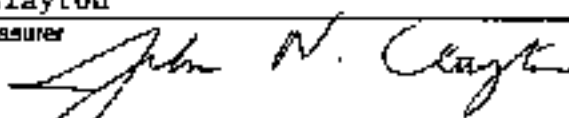
FEDERAL ELECTION COMMISSION
FEC FORM 3X
DEC 9 12 06 PM '96

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 C002 63723
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 11/5/96 in the State of Colorado
- (b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>9/30/96</u> through <u>11/25/96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>		\$ 34,264.29
(b) Cash on Hand at Beginning of Reporting Period	\$ 15,540.32	
(c) Total Receipts (from Line 19)	\$ 3,366.57	\$ 47,446.58
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 18,906.89	\$ 81,710.87
7. Total Disbursements (from Line 20)	\$ 12,010.00	\$ 74,813.98
8. Cash on Hand at Close of Reporting Period (subtotal Line 7 from Line 6(d))	\$ 6,896.89	\$ 6,896.89
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 202-219-3420
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 John N. Clayton		
Signature of Treasurer 		
		Date December 2, 1996

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	REPORT COVERING PERIOD	
Great-West Life & Annuity Insurance Company Political Action Committee	FROM 9/30/96 TO 11/25/96	
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. Itemized (use Schedule A)	\$ 2,814.92	\$32,085.70
ii. Unitemized	\$ 529.00	\$14,308.00
iii. Total	\$ 3,343.92	\$46,393.70
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions	\$ 3,343.92	\$46,393.70
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.)	\$ 22.65	\$ 1,052.88
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts	\$ 3,366.57	\$47,446.58
20. Total Federal Receipts	\$ 3,366.57	\$47,446.58
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures	\$ 10.00	\$ 313.98
c. Total Operating Expenditures	\$ 10.00	\$ 313.98
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	\$12,000.00	\$74,500.00
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)		
d. Total Contribution Refunds	\$ 0.00	\$ 0.00
29. Other Disbursements		
30. Total Disbursements	\$12,010.00	\$74,813.98
31. Total Federal Disbursements	\$12,010.00	\$74,813.98
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11 d)	\$ 3,343.92	\$46,393.70
33. Total Contribution Refunds (from line 28 d)	\$ 0.00	\$ 0.00
34. Net Contributions (other than loans)(subtract line 33 from 32)	\$ 3,343.92	\$46,393.70
35. Total Federal Operating Expenditures	\$ 10.00	\$ 313.98
36. Offsets to Operating Expenditures (from line 15)	\$ 0.00	\$ 0.00
37. Net Operating Expenditures	\$ 10.00	\$ 313.98

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
Abel, Rolf 6683 Aberdeen Circle Highlands Ranch, CO 80126	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MGR, Mortgage Administration	deductions	\$33.00
	Aggregate Year-to-Date>	\$330.00	(16.5 semi-monthly)
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Aspinwall, David C. 4401 S. Vine Way Englewood, CO 80110	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: AVP, and Associates Counsel	deductions	\$40.00
	Aggregate Year-to-Date>	\$300.00	(\$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. 5922 S. Ironton Court Englewood, CO 80111	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: AVP, Individual Sales Support	deductions	\$40.00
	Aggregate Year-to-Date>	\$400.00	(\$20 semi-monthly)
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Ball, George 8801 Hunter Lake Road, #628 Tampa, FL 33647	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: RMGR, Tampa Regional Group Sales Office	deductions	\$80.00
	Aggregate Year-to-Date>	\$420.00	(\$30 semi-monthly)
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Bennett, Scott A. 44 N. Liberty South Barrington, IL 60010	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: RMGR, Chicago Group Sales Office	deductions	\$50.00
	Aggregate Year-to-Date>	\$500.00	(\$25 semi-monthly)
F. 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		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: AMGR, Group Marketing Compensation and Sales Reporting	deductions	\$28.58
	Aggregate Year-to-Date>	\$285.80	(\$14.29 semi-monthly)
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Bond, Robert D. 362 Morning Star Way Castle Rock, CO 80104	Benefits Corporation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP, Sales	deductions	\$100.00
	Aggregate Year-to-Date>	\$700.00	(\$50 semi-monthly)
SUBTOTAL of Receipts This Page (optional)			\$351.58
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
Bonnett, Denis C. 12 Franklin Road Mendham, NJ 07945	Great-West Life & Annuity Insurance Company Occupation: RMGR, North Jersey		\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Group Sales Office Aggregate Year-to-Date>	deductions \$1,000.00	(\$50 semi-monthly)
B. 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		\$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	AVP, Accounting Services Aggregate Year-to-Date>	deductions \$250.00	(\$12.50 semi-monthly)
C. 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 Occupation		\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	VP, Corporate Services Aggregate Year-to-Date>	deductions \$400.00	(\$20 semi-monthly)
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Coller, Darryl A. 5482 Kanadu Street Denver, CO 80239	Great-West Life & Annuity Insurance Company Occupation		\$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	MGR, Special Producer Sales Aggregate Year-to-Date>	deductions \$300.00	(\$15.00 semi-monthly)
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Corbett, Mark S. 2170 S. St. Paul Denver, CO 80210	Great-West Life & Annuity Insurance Company Occupation		\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	VP, Private Placements Aggregate Year-to-Date>	deductions \$400.00	(\$20 semi-monthly)
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Davis, Gerald L. 8435 W. Wesley Avenue Lakewood, CO 80227	Great-West Life & Annuity Insurance Company Occupation		\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	AVP, Information Systems Aggregate Year-to-Date>	deductions \$280.00	(\$20 semi-monthly)
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Derbak, Glen R. 7340 Blissham Circle Castle Rock, CO 80104	Great-West Life & Annuity Insurance Company Occupation		\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	VP, Financial Control Aggregate Year-to-Date>	deductions \$500.00	(\$25 semi-monthly)

SUBTOTAL of Receipts This Page (optional) \$325.00
 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
Desmond, James M. 19149 E. Hickock Drive Parker, CO 80134	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MGR, Public Bonds	deductions	\$30.00
	Aggregate Year-to-Date>	\$300.00	(\$15 semi-monthly)
Girth, Carl E. 12025 Palalades Drive Dunkirk, MD 20754	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation RVP, Group Sales Region I	deductions	\$100.00
	Aggregate Year-to-Date>	\$1,000.00	(\$50 semi-monthly)
Hadd, Mark R. 3224 S. Espans Circle Aurora, CO 80013	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MGR, Employee Benefit Products	deductions	\$40.00
	Aggregate Year-to-Date>	\$400.00	(\$20 semi-monthly)
Johnson, J. Garth 7814 S. Locust Court Englewood, CO 80112	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation AVP, Taxation	deductions	\$30.00
	Aggregate Year-to-Date>	\$300.00	(\$15 semi-monthly)
Jonasson, David T. 7007 E. Hinedale Avenue Englewood, CO 80112	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MGR, Group Pension Systems	deductions	\$40.00
	Aggregate Year-to-Date>	\$280.00	(\$20 semi-monthly)
Kenyon, Mathew S. 500A E. Windsor Avenue Alexandria, VA 22301	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: RMGR, Washington DC Group Sales Office	deductions	\$50.00
	Aggregate Year-to-Date>	\$500.00	(\$25 semi-monthly)
Kenyon, Stanford L. 220 N. Smead Court Roswell, GA 30078	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation RVP, Group Sales Region III	deductions	\$80.00
	Aggregate Year-to-Date>	\$600.00	(\$30 semi-monthly)
SUBTOTAL of Receipts This Page (optional)			\$350.00
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
Kramer, Mathew M. 5945 Braun Way Arvada, CO 80004	Great-West Life & Annuity Insurance Company	deductions	\$40.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	MGR, Group Insurance Systems		
	Aggregate Year-to-Date>	\$400.00	(\$20 semi-monthly)
Lurie, Ruth B. 3078 S. St. Paul Denver, CO 80210	Great-West Life & Annuity Insurance Company	deductions	\$50.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	VP, Counsel		
	Aggregate Year-to-Date>	\$450.00	(\$25 semi-monthly)
MacLennan, Alan D. 6086 S. Alton Way Englewood, CO 80111	Great-West Life & Annuity Insurance Company	deductions	\$180.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	EVP, Employee Benefits		
	Aggregate Year-to-Date>	\$1,600.00	(\$80 semi-monthly)
Mahoney, Victoria A. 1880 Palmir Drive Pleasanton, CA 94589	Great-West Life & Annuity Insurance Company	deductions	\$100.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	R/MGR, San Jose Group Sales Office		
	Aggregate Year-to-Date>	\$1,000.00	(\$50 semi-monthly)
Masonheimer, Chet A. 8477 S. Florence Way Englewood, CO 80111	Great-West Life & Annuity Insurance Company	deductions	\$30.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	MGR, Corporate Properties		
	Aggregate Year-to-Date>	\$300.00	(\$15 semi-monthly)
Masters, Bruce G. 5423 Chambury Court Highlands Ranch, CO 80126	Great-West Life & Annuity Insurance Company	deductions	\$30.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	MGR, Public Bonds, Investments		
	Aggregate Year-to-Date>	\$300.00	(\$15 semi-monthly)
McCallen, James L. 7283 S. Niagara Circle Englewood, CO 80112	Great-West Life & Annuity Insurance Company	deductions	\$50.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	VP and Actuary		
	Aggregate Year-to-Date>	\$500.00	(\$25 semi-monthly)
SUBTOTAL of Receipts This Page (optional)			\$460.00
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
McCallen, Joan W. 5923 E. Irwin Place Englewood, CO 80112	Financial Administrative Services Corporation Occupation: President		\$42.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>		(\$21 semi-monthly)
McCallum, William T. 6001 S. Yosemite, E-102 Englewood, CO 80111	Great-West Life & Annuity Insurance Company Occupation: President, Chief Executive Officer		\$525.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>		(\$312.50 semi-mo)
McDonald, David G. 10485 Stonewall Drive Parker, CO 80134	Great-West Life & Annuity Insurance Company Occupation: VP, Institutional Insurance		\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>		(\$25 semi-monthly)
Miller, Steve H. 4 Greenacres Court Lafayette, CA 94548	Great-West Life & Annuity Insurance Company Occupation: RVP, Group Sales Region II		\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>		(\$25 semi-monthly)
Molz, James D. 5037 E. Nichols Place Littleton, CO 80122	Great-West Life & Annuity Insurance Company Occupation: SVP, Employee Benefits Operations		\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>		(\$50 semi-monthly)
Nelson, Charles P. 1187 E. Jesse Court Highlands Ranch, CO 80128	Benefits Corp. Occupation: President		\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>		(\$20 semi-monthly)
Quenville, Stephen C. 5848 Angle Court Parker, CO 80134	Great-West Life & Annuity Insurance Company Occupation: AVP, Employee Benefit Sales		\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>		(\$25 semi-monthly)
SUBTOTAL of Receipts This Page (optional)			\$857.00
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
Riggall, Fred C. 18325 Christoph Drive Morgan Hill, CA 95037	One Health Plan of California		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	deductions	\$50.00
	Aggregate Year-to-Date>	\$500.00	(\$25 semi-monthly)
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Ross, David F. 13555 NE 54th Place Bellevue, WA 98005	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: RMGR, Seattle Group Sales Office	deductions	\$30.00
	Aggregate Year-to-Date>	\$300.00	(\$15 semi-monthly)
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Shantz, David H. 5059 S. Onelda Court Englewood, CO 80112	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP, Investment Operations	deductions	\$33.34
	Aggregate Year-to-Date>	\$333.40	(\$16.67 semi-mo)
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. Molina Way Englewood, CO 80111	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP, Employee Benefits Small Case Operations	deductions	\$40.00
	Aggregate Year-to-Date>	\$400.00	(\$20 semi-monthly)
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Tilley, Peter D. 5993 S. Florence Court Englewood, CO 80111	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation AVP, Asset/Liability Management	deductions	\$52.00
	Aggregate Year-to-Date>	\$520.00	(\$26 semi-monthly)
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Weinstein, Roy L. 395 Harrison Street Denver, CO 80206	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: AVP, Systems and Operations, Financial Services	deductions	\$60.00
	Aggregate Year-to-Date>	\$600.00	(\$30 semi-monthly)
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
White, James F. 5721 Mistled Breeze Drive Plano, TX 75093	One Health Plan of Texas		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	deductions	\$84.00
	Aggregate Year-to-Date>	\$840.00	(\$43 semi-monthly)
SUBTOTAL of Receipts This Page (optional)			\$349.34
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
Graven, Dennis B. 8052 S. Clayton Circle Littleton, CO 80122	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MGR, Mortgage Investment	deduction	\$22.00
	Aggregate Year-to-Date>	\$222.00	(\$11 semi-monthly)
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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
	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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
	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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
	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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
	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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
	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date>	\$0.00	
SUBTOTAL of Receipts This Page (optional)			\$22.00
TOTAL This Period (last page this line number only)			\$2,614.92

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 Key Bank 5950 S. Willow Drive Englewood, CO 80111 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Interest	Name of Employer	Date (month day, year) 10/31/96	Amount of Each Receipt this Period \$22.65
	Occupation		
	Aggregate Year-to-Date>	\$1,052.88	
B. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date>		
C. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date>		
D. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date>		
E. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date>		
F. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date>		
G. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date>		

SUBTOTAL of Receipts This Page (optional)	\$22.65
TOTAL This Period (last page this line number only)	\$22.65

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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
Enzi for US Senate c/o 201 East 2nd Street, #12 Casper, WY 82601	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/17/98	\$3,000.00
B Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of Each Disbursement this Period
Collins for Senator 186 Exchange Street Bangor, ME 04402	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/17/98	\$2,500.00
C Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of Each Disbursement this Period
Weld for Senate 990 Canal Street Boston, MA 02114	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/17/98	\$1,000.00
D Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of Each Disbursement this Period
Zimmer for Senate PO Box 6888 Lawrenceville, NJ 08848	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/17/98	\$1,500.00
E Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of Each Disbursement this Period
Rick Hill for Congress PO Box 1256 Helena, MT 59624	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/17/98	\$2,000.00
F Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of Each Disbursement this Period
Hutchinson for Senate 1415 West 7th Street Little Rock, AR 72201	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/17/98	\$2,000.00
G Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Receipts This Page (optional)			\$12,000.00
TOTAL This Period (last page this line number only)			\$12,000.00

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

12-4-98

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

ELM
PREPARED

12-9-98
DATE PREPARED