



RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

JAN 15 12 15 PM '97

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

January 10, 1997

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 Year End 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:

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

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

JAN 15 12 15 PM '97

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Great-West Life & Annuity Insurance Company Political Action Committee		2. FEC IDENTIFICATION NUMBER C002 63723
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 8515 East Orchard Road		
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:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
_____ in the State of _____

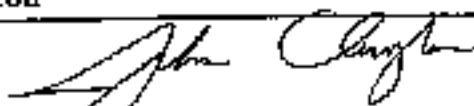
(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>11/26/96</u> through <u>12/31/96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>		\$ 34,264.29
(b) Cash on Hand at Beginning of Reporting Period	\$ 6,896.89	
(c) Total Receipts (from Line 19)	\$ 5,479.82	\$ 52,926.40
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 12,376.71	\$ 87,190.69
7. Total Disbursements (from Line 30)	\$ 0.00	\$ 74,813.98
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 12,376.71	\$ 12,376.71
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 20483 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

January 9, 1997

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

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FEC FORM 3X

(revised 9/93)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD	
Creat-West Life & Annuity Insurance Company Political Action Committee		FROM 11/26/96	TO: 12/31/96
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	\$ 4,983.34	\$ 37,069.54	11(a)
ii. Unitemized	\$ 454.00	\$ 14,762.00	11(b)
iii. Total (add i and ii) >	\$ 5,437.84	\$ 51,831.54	11(a)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a ii, b and c) >	\$ 5,437.84	\$ 51,831.54	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.)	\$ 41.98	\$ 1,094.86	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	\$ 5,479.82	\$ 52,926.40	19
20. Total Federal Receipts (subtract line 18 from line 19) >	\$ 5,479.82	\$ 52,926.40	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)
i. Federal Share			21(a)
ii. Non-Federal Share		\$ 313.98	21(c)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	\$ 0.00	\$ 313.98	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	\$ 0.00	\$ 74,500.00	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:			28(a)
a. Individual/Persons Other Than Political Committees			28(b)
b. Political Party Committees			28(c)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >	\$ 0.00	\$ 0.00	28(c)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	\$ 0.00	\$ 74,813.98	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	\$ 0.00	\$ 74,813.98	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	\$ 5,437.84	\$ 51,831.54	32
33. Total Contribution Refunds (from line 28d)	\$ 0.00	\$ 0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	\$ 5,437.84	\$ 51,831.54	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	\$ 0.00	\$ 313.98	35
36. Offsets to Operating Expenditures (from line 15)	\$ 0.00	\$ 0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	\$ 0.00	\$ 313.98	37

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
Abt, Rolf 9883 Aberdeen Circle Highlands Ranch, CO 80126 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: MGR, Mortgage Administration	deductions	\$88.00 (\$16.5 semi-monthly)
Aggregate Year-to-Date>	\$396.00		
B. Full Name, Mailing Address and Zip Code Aspinwall, David C. 4401 S. Vine Way Englewood, CO 80110 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: AVP, and Associate Counsel	deductions	\$90.00 (\$20 semi-monthly)
Aggregate Year-to-Date>	\$360.00		
C. Full Name, Mailing Address and Zip Code Baker, Jack H. 5922 S. Inverton Court Englewood, CO 80111 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: AVP, Individual Sales Support	deductions	\$80.00 (\$20 semi-monthly)
Aggregate Year-to-Date>	\$480.00		
D. Full Name, Mailing Address and Zip Code Ball, George B. 8301 Hunter Lake Road, #52B Tampa, FL 33647 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: RMGR, Tampa Group Sales Office	deductions	\$120.00 (\$30 semi-monthly)
Aggregate Year-to-Date>	\$540.00		
E. Full Name, Mailing Address and Zip Code Bennett, Scott A. 44 N. Liberty South Barrington, IL 60010 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: RMGR, Chicago Group Sales Office	deductions	\$100.00 (\$25 semi-monthly)
Aggregate Year-to-Date>	\$800.00		
F. Full Name, Mailing Address and Zip Code Beagle, Todd B. 6065 S. Jasmine Street Englewood, CO 80111 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Great-West Life & Annuity Insurance Company Occupation: AMGR, Group Marketing Compensation and Sales Reporting	deductions	\$57.16 (\$14.29 semi-monthly)
Aggregate Year-to-Date>	\$342.86		
G. Full Name, Mailing Address and Zip Code Bond, Robert D. 382 Morning Star Way Castle Rock, CO 80104 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Benefits Corporation Occupation: VP, Sales	deductions	\$200.00 (\$50 semi-monthly)
Aggregate Year-to-Date>	\$900.00		

SUBTOTAL of Receipts This Page (optional)	\$703.16
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, Denise G. 12 Franklin Road Mendham, NJ 07945	Great-West Life & Annuity Insurance Company		\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: RMGR, North Jersey Group Sales Office	deductions	
	Aggregate Year-to-Date>	\$1,200.00	(\$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		\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation AVP, Accounting Services	deductions	
	Aggregate Year-to-Date>	\$300.00	(\$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		\$80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP, Corporate Services	deductions	
	Aggregate Year-to-Date>	\$480.00	(\$20 semi-monthly)
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Coller, Darryl A. 12702 E. Kentucky Avenue Aurora, CO 80012	Great-West Life & Annuity Insurance Company		\$60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MGR, Special Producer Sales	deductions	
	Aggregate Year-to-Date>	\$360.00	(\$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		\$80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP, Private Placements	deductions	
	Aggregate Year-to-Date>	\$480.00	(\$20 semi-monthly)
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Davis, Gerald L. 9435 W. Wesley Avenue Lakewood, CO 80227	Great-West Life & Annuity Insurance Company		\$80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation AVP, Information Systems	deductions	
	Aggregate Year-to-Date>	\$360.00	(\$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 Birkham Circle Castle Rock, CO 80104	Great-West Life & Annuity Insurance Company		\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP, Financial Control	deductions	
	Aggregate Year-to-Date>	\$600.00	(\$25 semi-monthly)
SUBTOTAL of Receipts This Page (optional)			\$650.00
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. 19148 E. Hickock Drive Parker, CO 80134	Great-West Life & Annuity Insurance Company		\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MGR, Public Bonds	deductions	
	Aggregate Year-to-Date>	\$380.00	(\$15 semi-monthly)
Girth, Carl E. 12025 Palisades Drive Dunkirk, MD 20754	Great-West Life & Annuity Insurance Company		\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation RVP, Group Sales Region I	deductions	
	Aggregate Year-to-Date>	\$1,200.00	(\$50 semi-monthly)
Hackl, Mark R. 3224 S. Espana Circle Aurora, CO 80013	Great-West Life & Annuity Insurance Company		\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MGR, Employee Benefit Products	deductions	
	Aggregate Year-to-Date>	\$480.00	(\$20 semi-monthly)
Johnson, J. Garth 7814 S. Locust Court Englewood, CO 80112	Great-West Life & Annuity Insurance Company		\$80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation AVP, Taxation	deductions	
	Aggregate Year-to-Date>	\$360.00	(\$15 semi-monthly)
Joneson, David T. 7007 E. Hinsdale Avenue Englewood, CO 80112	Great-West Life & Annuity Insurance Company		\$80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MGR, Group Pension Systems	deductions	
	Aggregate Year-to-Date>	\$360.00	(\$20 semi-monthly)
Kenyon, Matthew S. 500A E. Windsor Avenue Alexandria, VA 22301	Great-West Life & Annuity Insurance Company		\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: RMGR, Washington DC Group Sales Office	deductions	
	Aggregate Year-to-Date>	\$600.00	(\$25 semi-monthly)
Kenyon, Stanford L. 220 N. Smead Court Roswell, GA 30076	Great-West Life & Annuity Insurance Company		\$120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation RVP, Group Sales Region III	deductions	
	Aggregate Year-to-Date>	\$720.00	(\$30 semi-monthly)

SUBTOTAL of Receipts This Page (optional) \$700.00

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 Occupation: MGR, Group Insurance Systems		\$80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>	\$480.00	(\$20 semi-monthly)
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Lurk, Ruth B. 3076 S. St. Paul Denver, CO 80210	Great-West Life & Annuity Insurance Company Occupation: VP, Counsel		\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>	\$550.00	(\$25 semi-monthly)
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
MacLennan, Alan D. 8086 S. Allen Way Englewood, CO 80111	Great-West Life & Annuity Insurance Company Occupation: EVP, Employee Benefits		\$320.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>	\$1,920.00	(\$60 semi-monthly)
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Mahoney, Victoria A. 1890 Palmer Drive Pleasanton, CA 94588	Great-West Life & Annuity Insurance Company Occupation: RMGR, San Jose Group Sales Office		\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>	\$1,200.00	(\$50 semi-monthly)
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Masonheimer, Chet A. 5400 S. Park Terrace Avenue, #1104 Greenwood Village, CO 80111	Great-West Life & Annuity Insurance Company Occupation: MGR, Corporate Properties		\$60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>	\$360.00	(\$15 semi-monthly)
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Masters, Bruce G. 5423 Chambury Court Highlands Ranch, CO 80126	Great-West Life & Annuity Insurance Company Occupation: MGR, Public Bonds, Investments		\$80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>	\$360.00	(\$15 semi-monthly)
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
McCallen, James L. 7283 S. Niagra Circle Englewood, CO 80112	Great-West Life & Annuity Insurance Company Occupation: VP and Actuary		\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>	\$600.00	(\$25 semi-monthly)

SUBTOTAL of Receipts This Page (optional) \$820.00
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		\$94.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>	\$504.00	(\$21 semi-monthly)
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Bunness, Brian S. 2073 Bellair Street Denver, CO 80207	Great-West Life & Annuity Insurance Company Occupation: MGR, Asset/Liability, Corporate Finance		\$36.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>	\$218.00	(\$312.50 semi-mo)
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
McDonald, David G. 10488 Stonewillow Drive Parker, CO 80134	Great-West Life & Annuity Insurance Company Occupation: VP, Institutional Insurance		\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>	\$450.00	(\$25 semi-monthly)
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Miller, Steve H. 4 Greenacres Court Lafayette, CA 94548	Great-West Life & Annuity Insurance Company Occupation: RVP, Group Sales Region II		\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>	\$800.00	(\$25 semi-monthly)
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Motz, James D. 5037 E. Nichols Place Littleton, CO 80122	Great-West Life & Annuity Insurance Company Occupation: SVP, Employee Benefits Operations		\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>	\$1,200.00	(\$50 semi-monthly)
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Nelson, Charles P. 1187 E. Jesse Court Highlands Ranch, CO 80128	Benefits Corp. Occupation: President		\$80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>	\$360.00	(\$20 semi-monthly)
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Quenwile, Stephen C. 5848 Angie Court Parker, CO 80134	Great-West Life & Annuity Insurance Company Occupation: AVP, Employee Benefit Sales		\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>	\$800.00	(\$25 semi-monthly)

SUBTOTAL of Receipts This Page (optional) \$700.00

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. 1475 Saltbrush Ridge Road Highlands Ranch, CO 80128	One Health Plan of California		\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation VP, Operations Services	deductions	
	Aggregate Year-to-Date>	\$600.00	(\$25 semi-monthly)
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Rosa, David F. 13555 NE 54th Place Bellevue, WA 98005	Great-West Life & Annuity Insurance Company		\$60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: RMGR, Seattle Group Sales Office	deductions	
	Aggregate Year-to-Date>	\$360.00	(\$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. 9059 S. Oneida Court Englewood, CO 80112	Great-West Life & Annuity Insurance Company		\$66.68
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation VP, Investment Operations	deductions	
	Aggregate Year-to-Date>	\$400.08	(\$18.67 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. 8052 S. Moline Way Englewood, CO 80111	Great-West Life & Annuity Insurance Company		\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: VP, Employee Benefits Small Case Operations	deductions	
	Aggregate Year-to-Date>	\$480.00	(\$20 semi-monthly)
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Tilley, Peter D. 8952 E. Nichols Place Englewood, CO 80112	Great-West Life & Annuity Insurance Company		\$104.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation AVP, Asset/Liability Management	deductions	
	Aggregate Year-to-Date>	\$624.00	(\$26 semi-monthly)
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Wielstein, Roy L. 368 Harrison Street Denver, CO 80206	Great-West Life & Annuity Insurance Company		\$120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: AVP, Systems and Operations, Financial Services	deductions	
	Aggregate Year-to-Date>	\$720.00	(\$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 Misted Breeze Drive Plano, TX 75093	One Health Plan of Texas		\$168.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation President	deductions	
	Aggregate Year-to-Date>	\$1,008.00	(\$42 semi-monthly)

SUBTOTAL of Receipts This Page (optional) \$696.68
 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 Graven, Dennis B. 8052 S. Clayton Circle Littleton, CO 80122 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company	Date (month day, year) deduction	Amount of Each Receipt this Period \$44.00
	Occupation MGR, Mortgage Investment		
	Aggregate Year-to-Date> \$284.00		(\$11 semi-monthly)
B. Full Name, Mailing Address and Zip Code Edwards, Miles R. 8861 S. Tuscan Lane Highlands Ranch, CO 80126 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company	Date (month day, year) deductions	Amount of Each Receipt this Period \$48.00
	Occupation MGR, Internal Audit		
	Aggregate Year-to-Date> \$228.00		(\$12 semi-monthly)
C. Full Name, Mailing Address and Zip Code Freeman, Steve W. 70 Hillmont Place Danville, CA 94528 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company	Date (month day, year) deductions	Amount of Each Receipt this Period \$40.00
	Occupation: RMGR, San Francisco Group Sales Office		
	Aggregate Year-to-Date> \$240.00		(\$10 semi-monthly)
D. Full Name, Mailing Address and Zip Code Galay, Donald M. 11618 Pine Grove Lane Parker, CO 80134 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company	Date (month day, year) deductions	Amount of Each Receipt this Period \$40.00
	Occupation VP, Individual Operations		
	Aggregate Year-to-Date> \$240.00		(\$10 semi-monthly)
E. Full Name, Mailing Address and Zip Code Gibbs, Patricia A. 5536 Spring Valley Road, 25B Dallas, TX 75240 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company	Date (month day, year) deductions	Amount of Each Receipt this Period \$40.00
	Occupation: RMGR, Southwest Benefit Payment Office		
	Aggregate Year-to-Date> \$240.00		(\$10 semi-monthly)
F. Full Name, Mailing Address and Zip Code Holden, Linda M. 9743 E. Crestline Circle Englewood, CO 80111 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company	Date (month day, year) deductions	Amount of Each Receipt this Period \$40.00
	Occupation MGR, Employee Benefits Financial		
	Aggregate Year-to-Date> \$240.00		(\$10 semi-monthly)
G. Full Name, Mailing Address and Zip Code Knudsen, Howard A. 8872 Chestnut Hill Lane Highlands Ranch, CO 80126 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company	Date (month day, year) deduction	Amount of Each Receipt this Period \$40.00
	Occupation AVP, Individual and Reinsurance		
	Aggregate Year-to-Date> \$240.00		(\$10 semi-monthly)
SUBTOTAL of Receipts This Page (optional)			\$282.00
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
Luxury, James G. 8781 S. Westwind Lane Littleton, CO 80128	Great-West Life & Annuity Insurance Company		\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation AVP, Private Placement	deduction	
	Aggregate Year-to-Date>	\$240.00	(\$10 semi-monthly)
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Wallander, Edward M. 8767 Thunderbird Circle Parker, CO 80134	Great-West Life & Annuity Insurance Company		\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP, Employee Benefits Large Case Operations	deduction	
	Aggregate Year-to-Date>	\$240.00	(\$10 semi-monthly)
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
McLeod, David G. 930 Acorn, Unit 110 Denver, CO 80204	Great-West Life & Annuity Insurance Company		\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MGR, Securities and Equities Administration	deduction	
	Aggregate Year-to-Date>	\$240.00	(\$10 semi-monthly)
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Favlik, Mark J. 1240 E. Emerson Street Denver, CO 80210	Great-West Life & Annuity Insurance Company		\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MGR, Financial Reporting	deduction	
	Aggregate Year-to-Date>	\$240.00	(\$10 semi-monthly)
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Purchase, Ross 8125 E. Kettle Place Englewood, CO 80112	Great-West Life & Annuity Insurance Company		\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP, Public Bond Investment	deduction	
	Aggregate Year-to-Date>	\$240.00	(\$10 semi-monthly)
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Rafferty, William G. 72 Hester Road Port Murray, NJ 07855	Great-West Life & Annuity Insurance Company		\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: AMGR, North Jersey Group Sales Office	deduction	
	Aggregate Year-to-Date>	\$240.00	(\$10 semi-monthly)
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Rydalch, Ken M. 1730 E. Otero Avenue Littleton, CO 80122	Great-West Life & Annuity Insurance Company		\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation AVP, Internal Audit	deduction	
	Aggregate Year-to-Date>	\$240.00	(\$10 semi-monthly)

SUBTOTAL of Receipts This Page (optional)	\$280.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(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
Sarahs, Dennis R. 17088 E. Berry Place Aurora, CO 80015	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MGR, Employee Benefits Small Case Operations	deduction	\$40.00
Aggregate Year-to-Date>		\$240.00	(\$10 semi-monthly)
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:		
Aggregate Year-to-Date>			
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 <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date>			
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 <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date>			
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 <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date>			
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 <input type="checkbox"/> Other (specify):	Occupation:		
Aggregate Year-to-Date>			
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 <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date>			

SUBTOTAL of Receipts This Page (optional)	\$40.00
TOTAL This Period (last page this line number only)	\$4,963.64

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 5950 S. Willow Drive Englewood, CO 80111		11/30/96	\$17.69
	Occupation	12/31/96	\$24.37
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Interest	Aggregate Year-to-Date>		\$1,094.86
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>		
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date>		

SUBTOTAL of Receipts This Page (optional)	\$41.98
TOTAL This Period (last page this line number only)	\$41.98

Federal Election Commission
ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

Hand Delivered

DATE OF RECEIPT

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

1-10-97

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

SLB
PREPARER

1-16-97
DATE PREPARED