



Jan 9 1 25 PM '95

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 6, 1995

Ms. Kelly Huff
Federal Election Commission
Washington, DC 20463

RE: The Great-West Life & Annuity Insurance Company Political Action Committee
FEC #C00263723

Dear Ms. Huff:

Enclosed find the Year-end FEC Form 3X for 1994. The Great-West Life & 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,

A handwritten signature in black ink, appearing to read 'James L. Rairdon'. The signature is fluid and cursive, with a large initial 'J'.

James L. Rairdon
Paralegal

ENCL
JLR/hs

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)

Jan 9 1 20 1994

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <u>Great-West Life & Annuity Insurance Company Political Action Committee</u>	2. FEC IDENTIFICATION NUMBER CO 0263723
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 8515 East Orchard Road	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Englewood, CO 80111	

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>Nov. 29, 1994</u> through <u>Dec. 31, 1994</u>		
6. (a) Cash on Hand <u>January 1, 1994</u>		\$ 40,608.72
(b) Cash on Hand at Beginning of Reporting Period	\$ 6,296.16	
(c) Total Receipts (from Line 19)	\$ 5,120.71	\$ 57,090.15
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 11,416.87	\$ 97,698.87
7. Total Disbursements (from Line 30)	\$ 0.00	\$ 86,282.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 11,416.87	\$ 11,416.87
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 800-424-9630 Local 202-218-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer John N. Clayton	Date January 6, 1994
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.

FEC FORM 3X
(revised 9/93)

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 8683 S. Aberdeen Circle Highlands Ranch, CO 80126	Great-West Life & Annuity Insurance Company	payroll deductions	\$66.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation MGR, Mortgage Administration	Aggregate Year-to-Date >	
B. 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	payroll deductions	\$80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation AVP, Individual Sales Support	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
Ball, George 155 Valley Run Drive Powell, OH 43065	Great-West Life & Annuity Insurance Company	payroll deductions	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation RMGR, Columbus Group Sales Office	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
Burnett, Scott A. 44 N. Liberty South Barrington, IL 60010	Great-West Life & Annuity Insurance Company	payroll deductions	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation RMGR, Chicago Group Sales Office	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
Beagle, Todd B. 6085 S. Jasmine Street Englewood, CO 80111	Great-West Life & Annuity Insurance Company	payroll deductions	\$57.16
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation AMGR, Group Marketing Compensation and Sales Reporting	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
Bleakley, Robert A. 8147 S. Wabash Court Englewood, CO 80112	Great-West Life & Annuity Insurance Company	payroll deductions	\$32.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation MGR, Corporate Planning	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
Bond, Robert D. 362 Morning Star Way Castle Rock, CO 80104	Great-West Life & Annuity Insurance Company	payroll deductions	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation VP, Sales, Benefits Corp	Aggregate Year-to-Date >	
SUBTOTAL of Receipts This Page (optional)			\$535.16
TOTAL This Period (last page this line number only)			

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SCHEDULE A ITEMIZED RECEIPTS

NAME OF COMMITTEE (in Full) Great-West Life & Annuity Insurance Company Political Action Committee			
A. Full Name, Mailing Address and Zip Code Bonnett, Derek C. 12 Franklin Road Monmouth, 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) payroll deductions \$1,100.00	Amount of Each Receipt this Period \$200.00
B. Full Name, Mailing Address and Zip Code Burrey, Bruce A. 11179 W. Idaho Avenue Lakewood, CO 80232 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation AVP, Accounting Services Aggregate Year-to-Date >	Date (month day, year) payroll deductions \$250.00	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and Zip Code Caban, Judith B. 3329 E. Bayaud Avenue #1205 Denver, Co 80219 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation Assistant Counsel, Investments Aggregate Year-to-Date >	Date (month day, year) payroll deductions \$270.00	Amount of Each Receipt this Period \$60.00
D. Full Name, Mailing Address and Zip Code Clayton, John N. 8813 E. Fremont Circle 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 VP, Corporate Services Aggregate Year-to-Date >	Date (month day, year) payroll deductions \$440.00	Amount of Each Receipt this Period \$80.00
E. Full Name, Mailing Address and Zip Code Collier, Daryl A. 5462 Xanadu Street Denver, CO 80239 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation MGR, Special Producer Sales Aggregate Year-to-Date >	Date (month day, year) payroll deductions \$270.00	Amount of Each Receipt this Period \$60.00
F. Full Name, Mailing Address and Zip Code Corbett, Mark S. 416 S. High Street Denver, CO 80209 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation VP, Private Placements Aggregate Year-to-Date >	Date (month day, year) payroll deductions \$360.00	Amount of Each Receipt this Period \$80.00
G. Full Name, Mailing Address and Zip Code Derback, Glen R. 7340 Brigham Circle Castle Rock, CO 80104 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation VP, Financial Control Aggregate Year-to-Date >	Date (month day, year) payroll deductions \$550.00	Amount of Each Receipt this Period \$100.00
SUBTOTAL of Receipts This Page (optional)			\$630.00
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 Desmond, James M. 19148 E. Hickock Drive Parker, CO 80134 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation MGR, Public Bond	Date (month day, year) payroll deductions	Amount of Each Receipt this Period \$50.00
	Aggregate Year-to-Date > \$285.00		
B. Full Name, Mailing Address and Zip Code Galay, Donald M. 4712 S. Fairplay Court Aurora, CO 80015 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation VP, Individual Operations	Date (month day, year) payroll deductions	Amount of Each Receipt this Period \$40.00
	Aggregate Year-to-Date > \$220.00		
C. Full Name, Mailing Address and Zip Code Girth, Carl E. 12025 Palisades Drive Dunkirk, MD 20754 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation RVP, Group Sales, Region 1	Date (month day, year) payroll deduction	Amount of Each Receipt this Period \$200.00
	Aggregate Year-to-Date > \$1,000.00		
D. Full Name, Mailing Address and Zip Code Hackl, Mark R. 3224 S. Espana Circle Aurora, CO 80013 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation MGR, Employee Benefit Products	Date (month day, year) payroll deductions	Amount of Each Receipt this Period \$80.00
	Aggregate Year-to-Date > \$380.00		
E. Full Name, Mailing Address and Zip Code Howard, Martie W. 5423 228 Northwest Stanwood, WA 98292 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation RMGR, Seattle Group Sales Office	Date (month day, year) payroll deductions	Amount of Each Receipt this Period \$100.00
	Aggregate Year-to-Date > \$550.00		
F. Full Name, Mailing Address and Zip Code Johnson, J. Garth 7814 Locust Court 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, Taxation	Date (month day, year) payroll deductions	Amount of Each Receipt this Period \$60.00
	Aggregate Year-to-Date > \$270.00		
G. Full Name, Mailing Address and Zip Code Kenyon, Stanford L. 1470 Northcliff Trace Roswell, GA 30076 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Great-West Life & Annuity Insurance Company Occupation RVP, Group Sales, Region 10	Date (month day, year) payroll deduction	Amount of Each Receipt this Period \$120.00
	Aggregate Year-to-Date > \$660.00		

SUBTOTAL of Receipts This Page (optional)	\$660.00
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, Matthew M. 5945 Braun Way Arvada, CO 80004	Great - West Life & Annuity Insurance Company	payroll deductions	\$80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	MGR, Group Insurance Systems	Aggregate Year-to-Date >	\$360.00
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
MacLennan, Alan D. 6086 S. Alton Way Englewood, CO 80111	Great - West Life & Annuity Insurance Company	payroll deductions	\$320.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	FVP, Employee Benefits	Aggregate Year-to-Date >	\$1,760.00
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Mallender, Edward M. 8767 Thunderbird Circle Parker, CO 80134	Great - West Life & Annuity Insurance Company	payroll deductions	\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	VP, Employee Benefits Large Case Operations	Aggregate Year-to-Date >	\$220.00
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Maltrich, Terry L. 9322 S. Crestmoor Way Highlands Ranch, CO 80126	Great - West Life & Annuity Insurance Company	payroll deductions	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	AVP, Public Bonds	Aggregate Year-to-Date >	\$430.00
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Masoubianer, Chet A. 6477 S. Florence Way Englewood, CO 80111	Great - West Life & Annuity Insurance Company	payroll deductions	\$60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	MGR, Corporate Properties	Aggregate Year-to-Date >	\$270.00
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 Chambray Court Highlands Ranch, CO 80126	Great - West Life & Annuity Insurance Company	payroll deductions	\$60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	MGR, Public Bonds, Investments	Aggregate Year-to-Date >	\$210.00
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
McCallen, Juan W. 5923 E. Irwin Place Englewood, CO 80112	Financial Administrative Services Corporation	payroll deductions	\$84.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	VP, Systems & Operations	Aggregate Year-to-Date >	\$376.00

SUBTOTAL of Receipts This Page (optional) \$744.00

TOTAL This Period (last page this line number only)

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SCHEDULE A ITEMIZED RECEIPTS

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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
McCallum, William T. 6001 S. Yosemite, E-102 Englewood, CO 80111	Great-West Life & Annuity Insurance Company	payroll deductions	\$1,250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	President, Chief Executive Officer	Aggregate Year-to-Date >	\$5,000.00
B. 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 94546	Great-West Life & Annuity Insurance Company	payroll deductions	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	RVP, Group Sales, Region II	Aggregate Year-to-Date >	\$550.00
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Otdani, Kevin N. 19596 E. Saratoga Avenue Aurora, CO 80015	Great-West Life & Annuity Insurance Company	payroll deductions	\$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	MGR, New Business	Aggregate Year-to-Date >	\$210.00
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Purchase, Rosa 8725 E. Kettle Place Englewood, CO 80112	Great-West Life & Annuity Insurance Company	payroll deductions	\$80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	VP, Public Bond, Investments	Aggregate Year-to-Date >	\$440.00
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Quenville, Stephen C. 5848 Angle Court Parker, CO 80134	Great-West Life & Annuity Insurance Company	payroll deductions	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	AVP, Employee Benefit Sales	Aggregate Year-to-Date >	\$675.00
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Riggall, Fred C. 18325 Christoph Drive Morgan Hill, CA 95037	Great-West Life & Annuity Insurance Company	payroll deductions	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	AVP, Employee Benefits Sales	Aggregate Year-to-Date >	\$550.00
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Shantz, David H. 8059 S. Occida Court Englewood, CO 80112	Great-West Life & Annuity Insurance Company	payroll deductions	\$66.68
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	VP, Investment Operations	Aggregate Year-to-Date >	\$333.40

SUBTOTAL of Receipts This Page (optional) \$1,726.68
TOTAL This Period (last page: this line number only)

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SCHEDULE A ITEMIZED RECEIPTS

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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Tilley, Peter D. 5993 S. Florence Court Englewood, CO 80111	Great-West Life & Annuity Insurance Company Occupation AVP, Asset/Liability Management	payroll deductions	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$450.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Weinstein, Roy L. 366 Harrison Street Denver, CO 80206	Great-West Life & Annuity Insurance Company Occupation AVP, Systems and Operations, Financial Services	payroll deductions	\$120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$690.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
White, James F. 8746 Black Maple Drive Eden Prairie, MN 55344	Great-West Life & Annuity Insurance Company Occupation RMGR, Minneapolis Group Sales Office	payroll deductions	\$168.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$966.00	
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 Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	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 Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	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 Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	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 Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$0.00	

SUBTOTAL of Receipts This Page (optional)	\$388.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A ITEMIZED RECEIPTS

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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Key Bank PO Box 27124 Salt Lake City, UT 84127-9940	Great-West Life & Annuity Insurance Company	11/30/94	\$14.79
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Earned Interest	Occupation	12/30/94	\$24.08
	Aggregate Year-to-Date >	\$1,173.16	
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 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
	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General 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
	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General 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
	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General 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
	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General 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
	Great-West Life & Annuity Insurance Company		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation		
	Aggregate Year-to-Date >		

SUBTOTAL of Receipts This Page (optional)	536.97
TOTAL This Period (last page this line number only)	

95039054915

**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

1-6-95

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

SLY
PREPARER

1-9-95
DATE PREPARED

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