

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Great-West Life & Annuity Insurance Company Political Action Committee

ADDRESS (number and street) 8515 E. Orchard Road
7T2
 Check if different than previously reported. (ACC)
Greenwood Village CO 80111

2. **FEC IDENTIFICATION NUMBER** C00263723
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 02 2010 in the State of CO

5. Covering Period 10 01 2010 through 11 22 2010

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 Mr Robert Onstad

Signature of Treasurer Electronically Filed by Mr Robert Onstad Date 12 13 2010

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

Office Use Only

FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Great-West Life & Annuity Insurance Company Political Action Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		120801.30
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	132487.75									
(c) Total Receipts (from Line 19)	1763.62	14450.07								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	134251.37	135251.37								
7. Total Disbursements (from Line 31)	11000.00	12000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	123251.37	123251.37								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

Great-West Life & Annuity Insurance Company Political Action Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	1747.50	12902.50
(ii) Unitemized	15.00	1535.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1762.50	14437.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	1762.50	14437.50
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1.12	12.57
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1763.62	14450.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1763.62	14450.07

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	12000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	11000.00	12000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11000.00	12000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	1762.50	14437.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1762.50	14437.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 11
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name (Last, First, Middle Initial)
Mr. ROBERT ONSTAD

Mailing Address 6328 Middleton Avenue

City State Zip Code
Castle Rock CO 80104

FEC ID number of contributing federal political committee. **C**

Name of Employer: Great-West Life & Annuity Insurance Co
Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: PR18884405310
Amount of Each Receipt this Period: 60.00
P/R Deduction (\$20.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
Mr. JOSEPH P. KERRIGAN, Jr.

Mailing Address 155 Lexington Ave.

City State Zip Code
Loveland OH 45140

FEC ID number of contributing federal political committee. **C**

Name of Employer: Great-West Life & Annuity Insurance Co
Occupation: Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4200.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: PR18884465310
Amount of Each Receipt this Period: 600.00
P/R Deduction (\$200.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
DEBRA MUHLHAUSER

Mailing Address 45 South Harrison

City State Zip Code
Denver CO 80209-3101

FEC ID number of contributing federal political committee. **C**

Name of Employer
Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: PR35664095310
Amount of Each Receipt this Period: 75.00
P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ **735.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Mr. DAVID MCLEOD	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 10280 Longview Drive	Transaction ID: PR6573865310
	City Lone Tree State CO Zip Code 80124-9774	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$20.00 Semi-Monthly)
Name of Employer Great-West Life & Annuity Insurance Co	Occupation Vice President, Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

B.	Full Name (Last, First, Middle Initial) Ms. ROBIN GUGEL	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 9693 Hemlock Ct.	Transaction ID: PR6573895310
	City Highlands Ranch State CO Zip Code 80130-4123	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$15.00 Semi-Monthly)
Name of Employer Great-West Life & Annuity Insurance Co	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

C.	Full Name (Last, First, Middle Initial) Mr. CHARLES NELSON	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 1187 E. Jesse Ct.	Transaction ID: PR6573915310
	City Highlands Ranch State CO Zip Code 80126-4725	Amount of Each Receipt this Period 375.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$125.00 Semi-Monthly)
Name of Employer Great-West Life & Annuity Insurance Co	Occupation Senior Vice President, Retirement Serv	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2375.00	

SUBTOTAL of Receipts This Page (optional)	480.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 11

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)
Mr. RON LAEYENDECKER

Mailing Address 9521 S. Dolton Way

City State Zip Code
Highlands Ranch CO 80126-4925

FEC ID number of contributing federal political committee. C

Name of Employer: Great-West Life & Annuity Insurance Co
Occupation: Vice President, Life Insurance Markets

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 630.00

Date of Receipt MM / DD / YYYY
11 / 22 / 2010

Transaction ID: PR6573995310

Amount of Each Receipt this Period 90.00

P/R Deduction (\$30.00 Semi-Monthly)

B.

Full Name (Last, First, Middle Initial)
Mr. DAVID ASPINWALL

Mailing Address 4401 S. Vine Way

City State Zip Code
Englewood CO 80113-6029

FEC ID number of contributing federal political committee. C

Name of Employer: Great-West Life & Annuity Insurance Co
Occupation: Vice President, Counsel & Chief Compliance Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt MM / DD / YYYY
11 / 22 / 2010

Transaction ID: PR6574015310

Amount of Each Receipt this Period 150.00

P/R Deduction (\$50.00 Semi-Monthly)

C.

Full Name (Last, First, Middle Initial)
Mr. JAMES LOWERY

Mailing Address 8781 S. Westwind Lane

City State Zip Code
Littleton CO 80126-2611

FEC ID number of contributing federal political committee. C

Name of Employer: Great-West Life & Annuity Insurance Co
Occupation: Assistant Vice President, Investments

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.50

Date of Receipt MM / DD / YYYY
11 / 22 / 2010

Transaction ID: PR6574075310

Amount of Each Receipt this Period 37.50

P/R Deduction (\$12.50 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) 277.50

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 9 / 11
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Ms. SARA RICHMAN

Mailing Address 9393 S. Wolfe St.

City State Zip Code
Highlands Ranch CO 80129-5767

FEC ID number of contributing federal political committee. **C**

Name of Employer: Great-West Life & Annuity Insurance Co
Occupation: Assistant Vice-President, Life Insuran

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: PR6574145310
 Amount of Each Receipt this Period: 30.00
 P/R Deduction (\$10.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
Mr. William Harmon

Mailing Address 7050 S. Picadilly Street

City State Zip Code
Aurora CO 80016-2345

FEC ID number of contributing federal political committee. **C**

Name of Employer: Great-West Life & Annuity Insurance Co
Occupation: Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1575.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: PR6574325310
 Amount of Each Receipt this Period: 225.00
 P/R Deduction (\$0.00)

SUBTOTAL of Receipts This Page (optional) ► 255.00

TOTAL This Period (last page this line number only) ► 1747.50

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Great-West Life & Annuity Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Grassley Committee Inc

Transaction ID: 6409101
Date of Disbursement

Mailing Address PO Box 1000

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	1	0

City State Zip Code
Des Moines IA 50304

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement

011

Category/
Type

Candidate Name
Sen. Charles E. Grassley

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IA District:

B.

Full Name (Last, First, Middle Initial)
Buck For Colorado

Transaction ID: 6409103
Date of Disbursement

Mailing Address PO Box 101465

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	1	0

City State Zip Code
Denver CO 80250

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement

011

Category/
Type

Candidate Name
Mr. Kenneth Buck

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: CO District:

C.

Full Name (Last, First, Middle Initial)
Bennet For Colorado

Transaction ID: 6409106
Date of Disbursement

Mailing Address PO Box 3078

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	1	0

City State Zip Code
Denver CO 80201

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement

011

Category/
Type

Candidate Name
Mr. Michael Bennet

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: CO District:

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Great-West Life & Annuity Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) Earl Pomeroy For Congress <hr/> Mailing Address Post Office Box 9336 <hr/> City Fargo State ND Zip Code 58106 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Earl Pomeroy <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 6409107 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 3000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Kline For Congress <hr/> Mailing Address 101 W Burnsville Pkwy Suite 104 Suite 104 <hr/> City Burnsville State MN Zip Code 55337 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. John Kline <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 6409108 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Richard E Neal For Congress Committee <hr/> Mailing Address 76 Magnolia Terrace <hr/> City Springfield State MA Zip Code 01108 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Richard Neal <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 6409109 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

TOTAL This Period (last page this line number only) ▶

11000.00