

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
The Guardian Fund

ADDRESS (number and street) 2140 Three M Trail
Check if different than previously reported. (ACC) Deland FL 32720-1615

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00493221 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 Year-End 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 M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of FL

5. Covering Period M M M / D D D / Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y
10 01 2016 through 11 28 2016

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 Wilder, Gregory, , ,

Signature of Treasurer Wilder, Gregory, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 08 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

The Guardian Fund

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		325987.29
(b) Cash on Hand at Beginning of Reporting Period.....	209955.24	
(c) Total Receipts (from Line 19)	72461.70	223270.08
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	282416.94	549257.37
7. Total Disbursements (from Line 31).....	128402.16	395242.59
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	154014.78	154014.78
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

The Guardian Fund

Report Covering the Period: From: / / To: / /

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).....	35334.00	71640.00
(ii) Unitemized	11210.44	32948.45
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	46544.44	104588.45
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	6300.00	6300.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	52844.44	110888.45
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).....	9623.70	43097.78
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	9993.56	69283.85
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 Transfers (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)).....▶	72461.70	223270.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	72461.70	223270.08

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	40902.16	220242.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	40902.16	220242.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22500.00	110000.00
24. Independent Expenditures (use Schedule E)	65000.00	65000.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	128402.16	395242.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	128402.16	395242.59

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

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)	52844.44	110888.45
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	52844.44	110888.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	40902.16	220242.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	9623.70	43097.78
38. Net Operating Expenditures (subtract Line 37 from Line 36)	31278.46	177144.81

**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 6 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
The Guardian Fund

A. Mantoan, Jim, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 Silverstone Circle

City Byrnes Mill	State MO	Zip Code 63051-1289
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Equifax Workforce Solutions	Occupation (for Individual) Quality Assurance
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

Transaction ID : A802FF71DFBFC4EDC9D8

Amount of Each Receipt this Period
25.00

Memo Item

B. Linneman, Kent, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1974 W. Pearce Blvd.
Apt. A

City Wentzville	State MO	Zip Code 63385-3344
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RockTenn CP LLC	Occupation (for Individual) Maintenance Electrician
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

Transaction ID : A6F72640AFA2044B9B8A

Amount of Each Receipt this Period
50.00

Memo Item

C. Morelli, Catherine, M., Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 915 Cindy Circle Lane

City Wellington	State FL	Zip Code 33414-5100
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self	Occupation (for Individual) Equestrian
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

Transaction ID : A1C4D4740ABD941839D1

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
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 OF 51
<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)
The Guardian Fund

A. McCall, Carol, , Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 79 Colonial Street

City East Northport	State NY	Zip Code 11731-6104
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Integrity Motors Inc.	Occupation (for Individual) book keeper
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2016

Transaction ID : A675940DF652A4DDBB0E

Amount of Each Receipt this Period
25.00

Memo Item

B. Bouchard, Martha, A., Dr., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 42 Coulter Ave.

City Pawling	State NY	Zip Code 12564-1110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Northern Medical Associates	Occupation (for Individual) Physician
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2016

Transaction ID : A86FCA2A6DF0D4D69B85

Amount of Each Receipt this Period
10.00

Memo Item

C. Bouchard, Martha, A., Dr., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 42 Coulter Ave.

City Pawling	State NY	Zip Code 12564-1110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Northern Medical Associates	Occupation (for Individual) Physician
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2016

Transaction ID : A9E190A8A8876491B8F8

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
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 8 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
The Guardian Fund

A. Riebe, Fred, W., Mr., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 W 6th Ave
 PMB 395
 City Ellensburg State WA Zip Code 98926-3106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nelson Aerodynamix, Corp. Occupation (for Individual) Helicopter Pilot
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 05 / 2016
Transaction ID : A5D62DCA9950F44C3A4E
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Nelson, Jerry, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8711 Pinnacle Peak Road
 City Scottsdale State AZ Zip Code 85255-3517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 05 / 2016
Transaction ID : A9B67AEF8D62A449DA9B
 Amount of Each Receipt this Period 25.00
 Memo Item

C. James, Hugh, F., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12107 Platten Rd
 City Lyndonville State NY Zip Code 14098-9682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 05 / 2016
Transaction ID : A93AF50CCC7ED4655AC9
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
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 9 OF 51
<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)
The Guardian Fund

A. Burns, Gary, V., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 828 N 25th Terrace

City Cornelius	State OR	Zip Code 97113-7444
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
299.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2016

Transaction ID : A78369073BE74421C9BA

Amount of Each Receipt this Period
15.00

Memo Item

B. Burns, Gary, V., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 828 N 25th Terrace

City Cornelius	State OR	Zip Code 97113-7444
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
317.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2016

Transaction ID : A9E2213495E97491AA59

Amount of Each Receipt this Period
18.00

Memo Item

C. West, Ral, T., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 107A Toivo Circle

City Sitka	State AK	Zip Code 99835-9552
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self	Occupation (for Individual) Business Owner
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2016

Transaction ID : ACCBB73919A974FC79AD

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	283.00
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 10 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
The Guardian Fund

A. Biegert, Rex, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 518 Road 9
 City Shickley State NE Zip Code 68436-4029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Farmer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2016
Transaction ID : A867E480F763E4849890
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Ainley, Pat, A., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 3908
 City Crestline State CA Zip Code 92325-3908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ainley Enterprises LLC Occupation (for Individual) Property Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2016
Transaction ID : A86E994D943A04FD4A3C
 Amount of Each Receipt this Period
 750.00
 Memo Item

C. Burns, Gary, V., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 828 N 25th Terrace
 City Cornelius State OR Zip Code 97113-7444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 342.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2016
Transaction ID : AC98CD623F6C94687A62
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1275.00
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 11 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
The Guardian Fund

A. Liska, Denice, M., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 Springbrook Trail S
 City Oswego State IL Zip Code 60543-4016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 19 / 2016
Transaction ID : A93C343C845814749AE0
 Amount of Each Receipt this Period 80.00
 Memo Item

B. Liska, Denice, M., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 Springbrook Trail S
 City Oswego State IL Zip Code 60543-4016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt 10 / 20 / 2016
Transaction ID : AF204FF2A2BB94D949DD
 Amount of Each Receipt this Period 75.00
 Memo Item

C. Sidbury, Dean, D., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1436 Talbot Rd
 City Pleasant Garden State NC Zip Code 27313-9209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2016
Transaction ID : A2DD65CA82ACB40F3811
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	655.00
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 12 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
The Guardian Fund

A. Cannon, Sue, M., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6420 W Lakeridge Rd

City Lakewood	State CO	Zip Code 80227-3909
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : A067A99DCF8634AC8B13

Amount of Each Receipt this Period
250.00

Memo Item

B. Reinhard, Donald, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 75 Harvard Ave

City Palmerton	State PA	Zip Code 18071-1212
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : A961814852C3F4C7C824

Amount of Each Receipt this Period
500.00

Memo Item

C. Hefti, Carol, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3823 N. Randolph Ct.

City Arlington	State VA	Zip Code 22207-4577
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : AA08818F7CA0246488AF

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1250.00
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 13 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
The Guardian Fund

A. Dooley, Richard, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 975 Palencia Ct
 City Chula Vista State CA Zip Code 91910-8065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : AB7FC826DE5E84087BA4
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Clough, John, B., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 Lancewood Terrace
 City Palm City State FL Zip Code 34990-8051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2016
Transaction ID : AF44D310E2BC9416FA20
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Astrop, Jean, T., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 Blackland Road
 City Atlanta State GA Zip Code 30342-4001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2016
Transaction ID : A210AEB26296F4848A5B
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2000.00
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 14 OF 51
	<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)
The Guardian Fund

A. Zink, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1676

City Vista	State CA	Zip Code 92085-1676
---------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016

Transaction ID : A9F4D0BC23D6142E0B43

Amount of Each Receipt this Period
 400.00

Memo Item

B. Burns, Gary, V., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 828 N 25th Terrace

City Cornelius	State OR	Zip Code 97113-7444
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
367.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016

Transaction ID : A1F8C4E68C7614B84B20

Amount of Each Receipt this Period
 25.00

Memo Item

C. Kapetansky, Frederick, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2599 Sonata Dr

City Columbus	State OH	Zip Code 43209-3212
------------------	-------------	------------------------

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

Name of Employer (for Individual) Ohio State University	Occupation (for Individual) Physician
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2016

Transaction ID : AB1F6F9954106427FA34

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	675.00
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 15 OF 51
<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)
The Guardian Fund

A. Kellest, Stiles, A., Mr., Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3651 Tuxedo Rd NW
 City Atlanta State GA Zip Code 30305-1015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kellett Investment Corp. Occupation (for Individual) Chairman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : AF78FFD49E2B0471C986
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Peduzzi, Lawrence, P., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 S Alfred St.
 City Alexandria State VA Zip Code 22314-3647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Peduzzi Associates Ltd. Occupation (for Individual) Peduzzi Associates
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 10 / 21 / 2016
Transaction ID : ACF935AABA61F4598A16
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Hirt, Gary, L., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3813 SE 21st Place
 City Cape Coral State FL Zip Code 33904-5079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : A56B926C6954F4B7AB81
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 16 OF 51
	<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)
The Guardian Fund

A. Angell, R. Allen, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14540 Winwood Road
 City Dallas State TX Zip Code 75254-7639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : ADC9C3614B6DE421795F
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Relinger, Barry, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 Tranquility Ln.
 City Georgetown State SC Zip Code 29440-8513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : A15071CDFCAF7432F8AF
 Amount of Each Receipt this Period 250.00
 Memo Item

C. DuBose, Vivian, , Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 18651
 City Atlanta State GA Zip Code 31126-0651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Noble Properties Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2016
Transaction ID : A17DCC86C77094A7F916
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5500.00
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 17 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
The Guardian Fund

A. Bridge, Scott, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 217 Foy Road

City Madison	State AL	Zip Code 35758-1401
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NASA	Occupation (for Individual) Engineer
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
576.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : ACD9B998336414A0B80B

Amount of Each Receipt this Period
576.00

Memo Item

B. Dellinger, James, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 332

City Cartersville	State GA	Zip Code 30120-0332
----------------------	-------------	------------------------

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

Name of Employer (for Individual) New Riverside Ochre	Occupation (for Individual) Owner
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : A6ADF5CA94FB64E6187E

Amount of Each Receipt this Period
250.00

Memo Item

C. Garthwait, Robert, W., Mr., Sr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 1367

City Waterbury	State CT	Zip Code 06721-1367
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Del Manufacturing Co.	Occupation (for Individual) Chairman
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2016

Transaction ID : AC3A40590CF0A429E885

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1826.00
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 18 OF 51
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
The Guardian Fund

A. Wax, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 3295
 City Rancho Santa Fe State CA Zip Code 92067-3295
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Waxie Sanitary Supply Occupation (for Individual) Ceo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : AA779F049A2142548AC
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Lee, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 2113
 City Orlando State FL Zip Code 32802-2113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lee Vista Inc. Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : A3579CCA6AF374E339C1
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Hillman, Tatnall, L., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 504 W Bleeker St
 City Aspen State CO Zip Code 81611-1228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : ADBF80D9F589E48318CB
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	7000.00
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 19 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
The Guardian Fund

A. Liska, Denice, M., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 Springbrook Trail S
 City Oswego State IL Zip Code 60543-4016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.00

Date of Receipt 10 / 27 / 2016
Transaction ID : A1EC92FF4029A45BDAF9
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Biegert, Rex, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 518 Rd. 9 Apt 504
 City Shickley State NE Zip Code 68436-4029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Farmer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 28 / 2016
Transaction ID : A6C8C8520CF2A469B8D
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Calhoun, John, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8920 Cardiff Rd
 City North Chesterfield State VA Zip Code 23236-1524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) coldwell banker Occupation (for Individual) Real Estate
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2016
Transaction ID : AE2FC0CEC0F7D475F8EA
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
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 20 OF 51
<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)
The Guardian Fund

A. Burns, Gary, V., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 828 N 25th Terrace

City Cornelius	State OR	Zip Code 97113-7444
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
392.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2016

Transaction ID : A202E073E31DA4126B65

Amount of Each Receipt this Period
25.00

Memo Item

B. Aleshire, Susie, , Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4930 SW 198th Terrace

City Southwest Ranches	State FL	Zip Code 33332-1130
---------------------------	-------------	------------------------

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

Name of Employer (for Individual) Debonair	Occupation (for Individual) Owner
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : A2758A853BB4C4D65BBA

Amount of Each Receipt this Period
250.00

Memo Item

C. Coburn, Luke, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2801 Lurleen Wallace Blvd
Unit 3

City Northport	State AL	Zip Code 35476-3261
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Natural RX Pharmacy	Occupation (for Individual) Pharmacist
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2016

Transaction ID : ABDDAFA29E21D45EABB

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	295.00
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 21 OF 51
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
The Guardian Fund

A. McCall, Carol, , Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79 Colonial Street
 City East Northport State NY Zip Code 11731-6104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Integrity Motors Inc. Occupation (for Individual) book keeper
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 04 / 2016
Transaction ID : ABC2264267059439ABCE
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Bouchard, Martha, A., Dr., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 Coulter Ave.
 City Pawling State NY Zip Code 12564-1110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northern Medical Associates Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 11 / 04 / 2016
Transaction ID : AC6E5F608EEC74804BE1
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Bouchard, Martha, A., Dr., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 Coulter Ave.
 City Pawling State NY Zip Code 12564-1110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northern Medical Associates Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 11 / 04 / 2016
Transaction ID : AA84434B98D36449C841
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
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 22 OF 51
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
The Guardian Fund

A. Mantoan, Jim, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 Silverstone Circle
 City Byrnes Mill State MO Zip Code 63051-1289
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Equifax Workforce Solutions Quality Assurance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : A240E2B62568B49B5A0E
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Morelli, Catherine, M., Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 915 Cindy Circle Lane
 City Wellington State FL Zip Code 33414-5100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Self Equestrian
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : A1262004B56554758AA1
 Amount of Each Receipt this Period 50.00
 Memo Item

C. James, Hugh, F., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12107 Platten Rd
 City Lyndonville State NY Zip Code 14098-9682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Retired Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 11 / 04 / 2016
Transaction ID : A4C18FD7C2AF84446ACD
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
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 23 OF 51
	<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)
The Guardian Fund

A. Nelson, Jerry, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8711 Pinnacle Peak Road

City Scottsdale	State AZ	Zip Code 85255-3517
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : A68F71AA37DB74195BA7

Amount of Each Receipt this Period
25.00

Memo Item

B. Topper, Lewis, E., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3605 Camp Mineola Road

City Mattituck	State NY	Zip Code 11952-2150
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Executive	Occupation (for Individual) Fast Food Systems
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : ADF8E4D8EAED4F4CA6C

Amount of Each Receipt this Period
5000.00

Memo Item

C. Burns, Gary, V., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 828 N 25th Terrace

City Cornelius	State OR	Zip Code 97113-7444
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
407.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2016

Transaction ID : A437DCE92F59E4770986

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5040.00
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 24 OF 51
	<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)
The Guardian Fund

A. Angell, Al, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14540 Winnwood Road
 City Dallas State TX Zip Code 75254-7639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : A8AA40F1A4A90488395C
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Burns, Gary, V., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 828 N 25th Terrace
 City Cornelius State OR Zip Code 97113-7444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 422.00

Date of Receipt 11 / 05 / 2016
Transaction ID : A8D2B647A8F984BD7977
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Cook, Charles, E., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 Sugar Creek Pl
 City Waco State TX Zip Code 76712-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 06 / 2016
Transaction ID : A8655054B1747482D8FD
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1115.00
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 25 OF 51
	<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)
The Guardian Fund

A. Hinman, Roy, , Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 Arricola Avenue

City Saint Augustine	State FL	Zip Code 32080-4515
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Island Doctors	Occupation (for Individual) Physician
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : ADDAB17DF8A514C18B8A

Amount of Each Receipt this Period
3000.00

Memo Item

B. Downey, James, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26000 Newbridge Drive

City Los Altos Hills	State CA	Zip Code 94022-2631
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Altos Sonoma Corporation	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2016

Transaction ID : AE1D69682A2894956B0B

Amount of Each Receipt this Period
200.00

Memo Item

C. Claiborne, Walter, H., Mr., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14217 Claiborne Rd

City Batchelor	State LA	Zip Code 70715-3514
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Self	Occupation (for Individual) Real Estate
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : AA9BAB37639674DFEAAE

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3450.00
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 26 OF 51
	<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)
The Guardian Fund

A. Fontenot, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5901 Wamego Ln
 City Plano State TX Zip Code 75094-4562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Endless IP Solutions Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 07 / 2016
Transaction ID : A8EE84DF3883E40CABF4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Fontenot, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5901 Wamego Ln
 City Plano State TX Zip Code 75094-4562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Endless IP Solutions Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 07 / 2016
Transaction ID : AF4164D7D00994C269F2
 Amount of Each Receipt this Period 50.00
 Memo Item

C. O'Brien, Patricia, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 535 E. 86th St. Apt. 20-D
 City New York State NY Zip Code 10028-7533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 07 / 2016
Transaction ID : AD3B71D7A0D3C4C9C93E
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
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 27 OF 51
	<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)
The Guardian Fund

A. Burns, Gary, V., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 828 N 25th Terrace

City Cornelius	State OR	Zip Code 97113-7444
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
432.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2016

Transaction ID : AB33781E2FA724F85BD6

Amount of Each Receipt this Period
10.00

Memo Item

B. Burns, Gary, V., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 828 N 25th Terrace

City Cornelius	State OR	Zip Code 97113-7444
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
457.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	10	/	2016

Transaction ID : AD63158CB12C8468F81C

Amount of Each Receipt this Period
25.00

Memo Item

C. Koether, Bernard, G., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 757 SE 17th Street
Suite 1074

City Fort Lauderdale	State FL	Zip Code 33316-2960
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2016

Transaction ID : A77CC494652E74FC5AB7

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
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 28 OF 51
	<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)
The Guardian Fund

A. Burns, Gary, V., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 828 N 25th Terrace

City Cornelius	State OR	Zip Code 97113-7444
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
472.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2016

Transaction ID : A82E2310314D74E97BE2

Amount of Each Receipt this Period
15.00

Memo Item

B. Downey, James, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26000 Newbridge Drive

City Los Altos Hills	State CA	Zip Code 94022-2631
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Altos Sonoma Corporation	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2016

Transaction ID : A511CDDDB798064D768DC

Amount of Each Receipt this Period
250.00

Memo Item

C. Betz, Calvin, T., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 125 Haddock Point

City Brooks	State GA	Zip Code 30205-1639
----------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2016

Transaction ID : A60C6FF7EFB074A5DB48

Amount of Each Receipt this Period
400.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	665.00
TOTAL This Period (last page this line number only).....	35334.00

**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 29 OF 51
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
The Guardian Fund

A. American Principles

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20533 Biscayne Boulevard
Unit 250

City Miami State FL Zip Code 33180-1529

FEC ID number of contributing federal political committee. **C** C00492579

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 20 / 2016

Transaction ID : AD574E36C93EE4E4D979

Amount of Each Receipt this Period
300.00

Memo Item

B. Boston Scientific PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 Boston Scientific Way

City Marlborough State MA Zip Code 01752-1291

FEC ID number of contributing federal political committee. **C** C00357863

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 21 / 2016

Transaction ID : AD3BCE537C23745BF906

Amount of Each Receipt this Period
1000.00

Memo Item

C. Great America PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 S West Street
Suite 555

City Alexandria State VA Zip Code 22314-2824

FEC ID number of contributing federal political committee. **C** C00608489

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
11 / 04 / 2016

Transaction ID : A6E3EEAE8B717457AAB5

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	6300.00
TOTAL This Period (last page this line number only).....	6300.00

**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 30 OF 51
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
The Guardian Fund

A. eDonation
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 117 N Saint Asaph St

City Alexandria	State VA	Zip Code 22314-3109
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
34820.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2016

Transaction ID : A3DF680F1120C4C4B8F7

Amount of Each Receipt this Period
7830.90

Memo Item
Refund

B. eDonation
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 117 N Saint Asaph St

City Alexandria	State VA	Zip Code 22314-3109
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
36612.91

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2016

Transaction ID : A0273777F8D7B4AA78F1

Amount of Each Receipt this Period
1792.80

Memo Item
Refund

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	9623.70
TOTAL This Period (last page this line number only).....	9623.70

**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 31 OF 51
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
The Guardian Fund

A. Robertson Mailing List Company

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Suite 350

City Lansdowne	State VA	Zip Code 20176
-------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
19906.18

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	21	/	2016

Transaction ID : A715C99608104449888F

Amount of Each Receipt this Period
1296.91

Memo Item
Mailing list rental income

B. Right Country Lists

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 117 North St. Asaph Street

City Alexandria	State VA	Zip Code 22314-3109
--------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
19931.18

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	07	/	2016

Transaction ID : A7D3D7C516A734F3B9EF

Amount of Each Receipt this Period
8696.65

Memo Item
List rental income

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	9993.56
TOTAL This Period (last page this line number only).....	9993.56

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
The Guardian Fund

Full Name (Last, First, Middle Initial)

A. Out Loud Strategies

Mailing Address 10291 NW 39th Ct

City
Coral Springs

State
FL

Zip Code
33065-1532

Purpose of Disbursement
Fundraising organizer

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B6BC9C1DFC
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Campaign Solutions

Mailing Address 117 N Saint Asaph St

City
Alexandria

State
VA

Zip Code
22314-3109

Purpose of Disbursement
Email and text solicitation

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B4DCEABC6I
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Machado & Co.

Mailing Address 6111 Newman Rd

City
Fairfax

State
VA

Zip Code
22030-5918

Purpose of Disbursement
Fundraising organizer

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BF718B09C8
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
The Guardian Fund

Full Name (Last, First, Middle Initial)
A. Mark Graphics

Mailing Address 111 NW 11th St

City Boca Raton State FL Zip Code 33432-2639

Purpose of Disbursement Printing and postage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 18 / 2016

FEC Identification Number: C

Transaction ID : **B6136BA833!**

Amount of Each Disbursement this Period: 6555.10

Memo Item

Full Name (Last, First, Middle Initial)
B. Aristotle International

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement Software Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 18 / 2016

FEC Identification Number: C

Transaction ID : **B453D038FF!**

Amount of Each Disbursement this Period: 1350.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151-1501

Purpose of Disbursement Account service fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 26 / 2016

FEC Identification Number: C

Transaction ID : **BC76D28C62**

Amount of Each Disbursement this Period: 114.68

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8019.78

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
The Guardian Fund

A. Constant Contact

Full Name (Last, First, Middle Initial)

Mailing Address 4 America Street

City Orlando State FL Zip Code 32801-3610

Purpose of Disbursement Email and text solicitation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 26 / 2016

FEC Identification Number C

Transaction ID : B40A95CCD1

Amount of Each Disbursement this Period 40.00

Memo Item

B. The Richard Norman Company

Full Name (Last, First, Middle Initial)

Mailing Address 44084 Riverside Parkway #350

City Lansdowne State VA Zip Code 20176-6823

Purpose of Disbursement Escrow fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 26 / 2016

FEC Identification Number C

Transaction ID : BBFC6075EF

Amount of Each Disbursement this Period 358.46

Memo Item

C. eDonation

Full Name (Last, First, Middle Initial)

Mailing Address 117 N Saint Asaph St

City Alexandria State VA Zip Code 22314-3109

Purpose of Disbursement Web Hosting fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 31 / 2016

FEC Identification Number C

Transaction ID : B79ABB29A

Amount of Each Disbursement this Period 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	423.46
TOTAL This Period (last page this line number only).....▶	

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
The Guardian Fund

Full Name (Last, First, Middle Initial)

A. eDonation

Mailing Address 117 N Saint Asaph St

City
Alexandria

State
VA

Zip Code
22314-3109

Purpose of Disbursement
Credit card processing fee

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2016

FEC Identification Number

C
Transaction ID : B0355B5FA1
Amount of Each Disbursement this Period
617.11

Memo Item

Full Name (Last, First, Middle Initial)

B. eDonation

Mailing Address 117 N Saint Asaph St

City
Alexandria

State
VA

Zip Code
22314-3109

Purpose of Disbursement
on-line fundraising fee

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2016

FEC Identification Number

C
Transaction ID : BC7E48C6D5
Amount of Each Disbursement this Period
669.68

Memo Item

Full Name (Last, First, Middle Initial)

C. Federal Express Corp.

Mailing Address 3875 Airways Module H3
Department 4634

City
Memphis

State
TN

Zip Code
38116-0000

Purpose of Disbursement
Express delivery charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 04 / 2016

FEC Identification Number

C
Transaction ID : B2E05CB5F3
Amount of Each Disbursement this Period
179.55

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1466.34

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
The Guardian Fund

Full Name (Last, First, Middle Initial)

A. Out Loud Strategies

Mailing Address 10291 NW 39th Ct

City
Coral Springs

State
FL

Zip Code
33065-1532

Purpose of Disbursement
Fundraising Organizer

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : BD09F8F15A
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Dickinson And Mcdonald, P.a.

Mailing Address 201 S Florida Ave

City
Deland

State
FL

Zip Code
32720-5405

Purpose of Disbursement
Accounting

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : BF7E6F44FB
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Federal Express Corp.

Mailing Address 3875 Airways Module H3
Department 4634

City
Memphis

State
TN

Zip Code
38116-0000

Purpose of Disbursement
Express delivery charge

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : B650D276DA
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
The Guardian Fund

A. Campaign Solutions

Full Name (Last, First, Middle Initial)
Mailing Address 117 N Saint Asaph St

City Alexandria State VA Zip Code 22314-3109

Purpose of Disbursement
Email and text solicitation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 15 / 2016

FEC Identification Number: C
Transaction ID : BF8595E38DI
Amount of Each Disbursement this Period: 3492.32

Memo Item

B. Federal Express Corp.

Full Name (Last, First, Middle Initial)
Mailing Address 3875 Airways Module H3
Department 4634

City Memphis State TN Zip Code 38116-0000

Purpose of Disbursement
Express delivery charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 17 / 2016

FEC Identification Number: C
Transaction ID : B12B0716B8z
Amount of Each Disbursement this Period: 33.06

Memo Item

C. Aristotle International

Full Name (Last, First, Middle Initial)
Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Software Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 18 / 2016

FEC Identification Number: C
Transaction ID : BFFCA78984
Amount of Each Disbursement this Period: 1350.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4875.38

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
The Guardian Fund

Full Name (Last, First, Middle Initial)

A. eDonation

Mailing Address 117 N Saint Asaph St

City
Alexandria

State
VA

Zip Code
22314-3109

Purpose of Disbursement
Credit card processing fee

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 28 / 2016

FEC Identification Number

C [Redacted]

Transaction ID : B25010B0A7/
Amount of Each Disbursement this Period

[Redacted] 548.11

Memo Item

Full Name (Last, First, Middle Initial)

B. Constant Contact

Mailing Address 4 America Street

City
Orlando

State
FL

Zip Code
32801-3610

Purpose of Disbursement
Email and text solicitation

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 28 / 2016

FEC Identification Number

C [Redacted]

Transaction ID : B1CEF7B793/
Amount of Each Disbursement this Period

[Redacted] 40.00

Memo Item

Full Name (Last, First, Middle Initial)

C. eDonation

Mailing Address 117 N Saint Asaph St

City
Alexandria

State
VA

Zip Code
22314-3109

Purpose of Disbursement
Web Hosting fee

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 28 / 2016

FEC Identification Number

C [Redacted]

Transaction ID : BABBA32CF/
Amount of Each Disbursement this Period

[Redacted] 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

[Redacted] 613.11

[Redacted]

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
The Guardian Fund

Full Name (Last, First, Middle Initial)

A. eDonation

Mailing Address 117 N Saint Asaph St

City Alexandria State VA Zip Code 22314-3109

Purpose of Disbursement
on-line fundraising fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B688CD4273:
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Faulkner, Catherine, , ,

Mailing Address 10291 NW 39th Ct

City Coral Springs State FL Zip Code 33065-1532

Purpose of Disbursement
Travel to Washington Meeting

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BD336B77DD
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. JW Marriott Washington, DC

Mailing Address 1331 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004-1710

Purpose of Disbursement
Travel to Sept. meeting in Washington

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BBA48C36C1
Amount of Each Disbursement this Period

Memo Item Travel to Sept. meeting in Washington

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**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"/> 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)
The Guardian Fund

Full Name (Last, First, Middle Initial) A. Paul Chabot Congress		Date of Disbursement MM / DD / YYYY 11 / 01 / 2016	
Mailing Address 12223 Highland Ave. #106-228		FEC Identification Number C C00557884 Transaction ID : B8F882ADF1 Amount of Each Disbursement this Period 2500.00	
City Rancho Cucamonga State CA Zip Code 91739-2574	Purpose of Disbursement Contribution to committee Category/Type 011	Candidate Name Chabot, Paul, , ,	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Captain Higgins for Congress		Date of Disbursement MM / DD / YYYY 11 / 16 / 2016	
Mailing Address P.O. Box 61747		FEC Identification Number C C00617662 Transaction ID : B6831FB24AI Amount of Each Disbursement this Period 5000.00	
City Lafayette State LA Zip Code 70596-1747	Purpose of Disbursement Contribution to committee Category/Type 011	Candidate Name Higgins, Clay, , ,	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 03	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Mike Gallagher for Wisconsin		Date of Disbursement MM / DD / YYYY 11 / 01 / 2016	
Mailing Address P.O. Box 1027		FEC Identification Number C C00610212 Transaction ID : B0ECB8B8B Amount of Each Disbursement this Period 2500.00	
City Green Bay State WI Zip Code 54305-1027	Purpose of Disbursement Contribution to committee Category/Type 011	Candidate Name Gallagher, Mike, , ,	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional)..... ▶

10000.00

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

**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"/> 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)
The Guardian Fund

Full Name (Last, First, Middle Initial)
A. Paul Babeu for Congress

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	1		2	0	1	6		

Mailing Address P.O. Box 11186

City: Casa Grande
State: AZ
Zip Code: 85130-0148

FEC Identification Number

C C00588673

Purpose of Disbursement
Contribution to committee

011
Category/
Type

Transaction ID : B5E3971A98!

Amount of Each Disbursement this Period

2500.00

Candidate Name

Babeu, Paul, , ,

Office Sought: House
 Senate
 President
State: AZ District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)
B. Don Bacon for Congress

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	1		2	0	1	6		

Mailing Address P.O. Box 391368

City: Omaha
State: NE
Zip Code: 68139-1368

FEC Identification Number

C C00575167

Purpose of Disbursement
Contribution to committee

011
Category/
Type

Transaction ID : B613C009E5!

Amount of Each Disbursement this Period

2500.00

Candidate Name

Bacon, Don, , ,

Office Sought: House
 Senate
 President
State: NE District: 02

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)
C. Bergman for Congress

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	1		2	0	1	6		

Mailing Address N 5070 Cisco Lake Rd

City: Watersmeet
State: MI
Zip Code: 49969-9739

FEC Identification Number

C C00614214

Purpose of Disbursement
Contribution to committee

011
Category/
Type

Transaction ID : BC2CFE605!

Amount of Each Disbursement this Period

2500.00

Candidate Name

Bergman, Jack, , ,

Office Sought: House
 Senate
 President
State: MI District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

7500.00

**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"/> 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)
The Guardian Fund

A. Brian Mast for Congress

Full Name (Last, First, Middle Initial)
Date of Disbursement: 11 / 01 / 2016

Mailing Address 2600 S. Douglas Road
FEC Identification Number: C 000579896
Transaction ID : BA97F42883

City Coral Gables State FL Zip Code 33134-6127
Purpose of Disbursement Contribution to committee
Amount of Each Disbursement this Period: 2500.00

Candidate Name Mast, Brian, , ,
Category/Type: 011

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: FL District: 18
 Memo Item

B. FRIENDS OF TODD YOUNG, INC.

Full Name (Last, First, Middle Initial)
Date of Disbursement: 11 / 05 / 2016

Mailing Address PO BOX 1053
FEC Identification Number: C 000459255
Transaction ID : B8469723D60

City Bloomington State IN Zip Code 47402-1053
Purpose of Disbursement Contribution to committee
Amount of Each Disbursement this Period: 2500.00

Candidate Name Young, Todd, C., Rep.,
Category/Type: 011

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: IN District: 09
 Memo Item

C.

Full Name (Last, First, Middle Initial)
Date of Disbursement: / /

Mailing Address
FEC Identification Number: C

City State Zip Code
Purpose of Disbursement
Amount of Each Disbursement this Period:

Candidate Name
Category/Type:

Office Sought: House Senate President
Disbursement For:
 Primary General Other (specify) ▼

State: District:
 Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	22500.00

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) The Guardian Fund	FEC IDENTIFICATION NUMBER ▼ C C00493221
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Strategic Partners & Media		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address P.O. Box 480		Amount <input type="text"/>	
City Arnold	State MD	Zip Code 21012-0480	Transaction ID : ED18ECD5866C948DC85B
Purpose of Expenditure Newspaper advertising		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Babeu, Paul, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AZ</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Strategic Partners & Media		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address P.O. Box 480		Amount <input type="text"/>	
City Arnold	State MD	Zip Code 21012-0480	Transaction ID : E52CDE966C796420888F
Purpose of Expenditure Social media advertising		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Dunn, Neal, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Wilder, Gregory, , , **[Electronically Filed]** Date / /

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) The Guardian Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00493221 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Strategic Partners & Media		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2016	
Mailing Address P.O. Box 480		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2233.33</div>	
City Arnold	State MD	Zip Code 21012-0480	Transaction ID : E45ADB5A87AE7425FB8C
Purpose of Expenditure Social media advertising		Category/Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 29 / 2016
Name of Federal Candidate: Mast, Brian, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 18 State: FL
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">2233.33</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Strategic Partners & Media		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2016	
Mailing Address P.O. Box 480		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2233.33</div>	
City Arnold	State MD	Zip Code 21012-0480	Transaction ID : EF7E2FDD024E94469BCF
Purpose of Expenditure Social media advertising		Category/Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 30 / 2016
Name of Federal Candidate: Hoeber, Amie, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 06 State: MD
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">2233.33</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">4466.66</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Wilder, Gregory, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
12 / 08 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) The Guardian Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00493221 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Strategic Partners & Media		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2016	
Mailing Address P.O. Box 480		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2833.33</div>	
City Arnold	State MD	Zip Code 21012-0480	Transaction ID : E93DA9345EADE4BE5BE
Purpose of Expenditure Social media advertising		Category/Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 29 / 2016
Name of Federal Candidate: Bost, Mike, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 12 State: IL
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">2833.33</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Strategic Partners & Media		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2016	
Mailing Address P.O. Box 480		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2033.33</div>	
City Arnold	State MD	Zip Code 21012-0480	Transaction ID : E094A63A6E1284054997
Purpose of Expenditure Social media advertising		Category/Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 29 / 2016
Name of Federal Candidate: Bacon, Don, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: NE
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">2033.33</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">4866.66</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Wilder, Gregory, , ,

 [Electronically Filed]

 Date M M / D D / Y Y Y Y Y Y
 12 / 08 / 2016

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) The Guardian Fund	FEC IDENTIFICATION NUMBER ▼ C C00493221
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Strategic Partners & Media	<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address P.O. Box 480		Amount <input type="text"/>
City Arnold	State MD	Zip Code 21012-0480
Purpose of Expenditure Social media advertising	Category/Type <input type="text"/>	Transaction ID : EBD50C82C905840FCA02 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Bergman, Jack, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Strategic Partners & Media	<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address P.O. Box 480		Amount <input type="text"/>
City Arnold	State MD	Zip Code 21012-0480
Purpose of Expenditure Social media advertising	Category/Type <input type="text"/>	Transaction ID : E5519FD843A1E4633AEE Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Zeldin, Lee, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>	6766.66
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>	
(a) TOTAL Independent Expenditures	<input type="text"/>	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Wilder, Gregory, , , [Electronically Filed] Date / /

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) The Guardian Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00493221 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Strategic Partners & Media			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2016		
Mailing Address P.O. Box 480			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2233.33</div>		
City Arnold	State MD	Zip Code 21012-0480			
Purpose of Expenditure Social media advertising		Category/Type 	Transaction ID : E844AFB49407F46AA870 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 29 / 2016		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Gallagher, Mike, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: WI		
Calendar Year-To-Date Per Election for Office Sought 2233.33			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item Strategic Partners & Media			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2016		
Mailing Address P.O. Box 480			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5833.33</div>		
City Arnold	State MD	Zip Code 21012-0480			
Purpose of Expenditure Social media advertising		Category/Type 	Transaction ID : EDDBC8EF6AC7F438285/ Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 29 / 2016		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Glenn, Darryl, , ,			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: State: CO		
Calendar Year-To-Date Per Election for Office Sought 5833.33			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">8066.66</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Wilder, Gregory, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
12 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
The Guardian Fund
FEC IDENTIFICATION NUMBER
C C00493221

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
Strategic Partners & Media
Mailing Address P.O. Box 480
City Arnold State MD Zip Code 21012-0480
Purpose of Expenditure Social media advertising
Category/Type
Date of Public Distribution/Dissemination 10/29/2016
Amount 1833.33
Transaction ID : E0ADC2F06C57341F6AF5
Date of Disbursement or Obligation 10/29/2016

Name of Federal Candidate: Knight, Steve, , ,
Support Oppose
Office Sought: House Senate State: CA
District: 25
Calendar Year-To-Date Per Election for Office Sought 1833.33
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee
Strategic Partners & Media
Mailing Address P.O. Box 480
City Arnold State MD Zip Code 21012-0480
Purpose of Expenditure Social media advertising
Category/Type
Date of Public Distribution/Dissemination 10/29/2016
Amount 2833.38
Transaction ID : EDF7C9551BD6D45909B6
Date of Disbursement or Obligation 10/29/2016

Name of Federal Candidate: Babeu, Paul, , ,
Support Oppose
Office Sought: House Senate State: AZ
District: 01
Calendar Year-To-Date Per Election for Office Sought 3933.38
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 4666.71
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Wilder, Gregory, , ,
Signature

[Electronically Filed]

Date 12/08/2016

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) The Guardian Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00493221 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Strategic Partners & Media			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 29 / 2016</div>		
Mailing Address P.O. Box 480			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2333.33</div>		
City Arnold	State MD	Zip Code 21012-0480			
Purpose of Expenditure Social media advertising		Category/Type 	Transaction ID : E5455EF6EC86841D1997 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 29 / 2016</div>		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose McSally, Martha, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>02</u> State: <u>AZ</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2333.33</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item Strategic Partners & Media			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 29 / 2016</div>		
Mailing Address P.O. Box 480			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2500.00</div>		
City Arnold	State MD	Zip Code 21012-0480			
Purpose of Expenditure Social media advertising		Category/Type 	Transaction ID : EC91533F873FD4139909 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 29 / 2016</div>		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Curbelo, Carlos, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>26</u> State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2500.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">4833.33</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Wilder, Gregory, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12 / 08 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) The Guardian Fund	FEC IDENTIFICATION NUMBER ▼ C C00493221
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Strategic Partners & Media		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address P.O. Box 480		Amount <input type="text"/>	
City Arnold	State MD	Zip Code 21012-0480	Transaction ID : E746DEF2A27F24989B39
Purpose of Expenditure Social media advertising		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Chabot, Paul, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>31</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Strategic Partners & Media		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address P.O. Box 480		Amount <input type="text"/>	
City Arnold	State MD	Zip Code 21012-0480	Transaction ID : ECE3A18B32288427EBEB
Purpose of Expenditure Social media advertising		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Hurd, Will, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>23</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Wilder, Gregory, , , **[Electronically Filed]** Date / /

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) The Guardian Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00493221 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Strategic Partners & Media			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 29 / 2016</div>		
Mailing Address P.O. Box 480			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5333.33</div>		
City Arnold	State MD	Zip Code 21012-0480			
Purpose of Expenditure Social media advertising		Category/Type 	Transaction ID : E813C345DD8F140578FE Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 29 / 2016</div>		
Name of Federal Candidate: Heck, Joe, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 5333.33			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item Strategic Partners & Media			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 01 / 2016</div>		
Mailing Address P.O. Box 480			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">15000.00</div>		
City Arnold	State MD	Zip Code 21012-0480			
Purpose of Expenditure Social media advertising		Category/Type 	Transaction ID : E0B3A010E87D74863BB9 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 01 / 2016</div>		
Name of Federal Candidate: Heck, Joe, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought 20333.33			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">20333.33</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">65000.00</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Wilder, Gregory, , ,

 [Electronically Filed]

 Date M M / D D / Y Y Y Y Y Y

12 / 08 / 2016