The Guardian

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

DEC 11 11 45 AM '96

201 Park Avenue South
New York, NY 10003
212/598-8895
FAX 212/529-9804

VIA CERTIFIED MAIL

Deborah Connolly
Senior Counsel

December 4, 1996

Federal Election Commission
999 E. Street, N.W.
Washington, D.C. 20463

Re: Guardian Life Insurance Company of America Political Action Committee
FEC Identification No. C00173393
Post General Election Report

Gentlemen:

Enclosed is our Post General Election Report.

Very truly yours,

Deborah Connolly

Deborah Connolly
Senior Counsel

DC/jd
Enclosure

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM

DEC 11 11 45 AM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE

ADDRESS (number and street) [ ] Check if different than previously reported
201 PARK AVE. SOUTH

CITY, STATE and ZIP CODE
NEW YORK, NEW YORK 10003

2. FEC IDENTIFICATION NUMBER
C00173393

3. [ ] This committee qualified as a multicandidate committee **DURING THIS** Reporting Period on _____ (date).

4. TYPE OF REPORT

(a) [ ] April 15 Quarterly Report

[ ] July 15 Quarterly Report

[ ] October 15 Quarterly Report

[ ] January 31 Year End Report

[ ] July 31 Mid Year Report (Non-election Year Only)

[ ] Termination Report

Monthly Report Due On:

[ ] February 20 [ ] June 20 [ ] October 20
[ ] March 20 [ ] July 20 [ ] November 20
[ ] April 20 [ ] August 20 [ ] December 20
[ ] May 20 [ ] September 20 [ ] January 31

[ ] Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

[ ] Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? [ ] YES [✓] NO

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period 10-1-96 through 11-25-96		
6.	(a) Cash on Hand January 1, 19 96		$ 30,167.09
	(b) Cash on Hand at Beginning of Reporting Period	$ 32,897.33	
	(c) Total Receipts (from Line 19)	$ 3335.67	$ 8565.91
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 36,233.00	$ 38,733.00
7.	Total Disbursements (from Line 30)	$ 2,000.00	$ 4500.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 34,233.00	$ 34,233.00
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-376-3120

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
Edward K. Kane

Signature of Treasurer
Edward K Kane

Date
12-3-96

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

FEC FORM 3X
(revised 1/1/91)

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

(revised 1/1/91)

NAME OF COMMITTEE: GUARDIAN LIFE INS. CO. OF AMERICA POL. ACT. COMM.

REPORT COVERING PERIOD FROM 10-1-96 TO: 11-25-96

	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	3317.67	7559.91
ii. Unitemized	18.00	1006.00
iii. Total (add i and ii) ➤	3335.67	8565.91
b. Political Party Committees	0	0
c. Other Political Committees (such as PACs)	0	0
d. Total Contributions (add a iii, b and c) ➤	3335.67	8565.91
12. Transfers From Affiliated/Other Party Committees	0	0
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0
18. Transfers from Nonfederal Account for Joint Activity	0	0
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	3335.67	8565.91
20. Total Federal Receipts (subtract line 18 from line 19) ➤	3335.67	8565.91
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	0	0
ii. Non-Federal Share	0	0
b. Other Federal Operating Expenditures	0	0
c. Total Operating Expenditures (Add a i, a ii, and b) ➤	0	0
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	2000.00	4,500.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:	0	
a. Individuals/Persons Other Than Political Committees		0
b. Political Party Committees	0	0
c. Other Political Committees (such as PACs)	0	0
d. Total Contribution Refunds (Add a, b and c) ➤	0	0
29. Other Disbursements	0	0
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	2000.00	4,500.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	2000.00	4,500.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	3335.67	8565.91
33. Total Contribution Refunds (from line 28d)	0	0
34. Net Contributions (other than loans)(subtract line 33 from 32)	3335.67	8565.91
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0	0
36. Offsets to Operating Expenditures (from line 15)	0	0
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0	0

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 3

FOR LINE NUMBER 11a.

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)

Guardian Life Ins. Co. of America Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Michelle Babatian 127 Huron Drive Chatham, New Jersey 07928 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 165	semi monthly payroll deduction	$135 ($15 per pay period)
B. Michael Burns 552 Wilson Ave. Glen Ellyn, Illinois 60137 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: Sales Director Aggregate Year-to-Date > $ 230	semi monthly payroll deduction	$90 ($10.00 per pay period)
C. Armand De Palo 225 Aster Street Mascapegua Park, N.Y. 11762 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: Sr. Vice President Aggregate Year-to-Date > $ 265.88	semi monthly payroll deduction	$104.04 ($11.56 per pay period)
D. John Fagan 46 Temple Lane Suffern, N.Y. 10901 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 315	semi monthly payroll deduction	$135 ($15 per pay period)
E. Sanford Herman 14 Ramapo Trail Harrison, N.Y. 10528 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 188.08	semi monthly payroll deduction	$118.08 ($13.12 per pay period)
F. John Hurley 55 Meritoria Drive East Williston, N.Y. 11596 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 127.50	semi monthly payroll deduction	$67.50 ($7.50 per pay period)
G. Peter Hutchings 300 Central Park West New York, N.Y. 10024 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: Sr. Vice President Aggregate Year-to-Date > $ 268.75	semi monthly payroll deduction	$168.75 ($18.75 per pay period)

SUBTOTAL of Receipts This Page (optional) . . . . . >

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

SCHEDULE A **ITEMIZED RECEIPTS**

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PAGE 2 OF 3

FOR LINE NUMBER 11a.

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NAME OF COMMITTEE (in Full)

Guardian Life Insurance Co. of America Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Thomas Kabele, 24 Rural Drive, New Canaan, Connecticut 06840 — Receipt For: Primary / General / Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America; Occupation: Sr. Vice President; Aggregate Year-to-Date > $ 1150	semi monthly payroll deduction	$450 ($50 per pay period)
B. Douglas Kramer, 73 Brooke Club, Ossining, New York 10562 — Receipt For: Primary / General / Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America; Occupation: Sr. Vice President; Aggregate Year-to-Date > $ 230	semi monthly payroll deduction	$90 ($10 per pay period)
C. Terence Lynch, 22 Repen Court, Ridgewood, N.J. 07450 — Receipt For: Primary / General / Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America; Occupation: Vice President; Aggregate Year-to-Date > $ 113.15	semi monthly payroll deduction	$98.55 ($10.95 per pay period)
D. Eileen McDonnell, 1282 Mulberry Drive, Mahwah, N.J. 07430 — Receipt For: Primary / General / Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America; Occupation: Vice President; Aggregate Year-to-Date > $ 215	semi monthly payroll deduction	$135 ($15 per pay period)
E. John O'Callaghan, 405 St. Ives Drive, Severna Park, Maryland 21146 — Receipt For: Primary / General / Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America; Occupation: Sales Director; Aggregate Year-to-Date > $ 445	semi monthly payroll deduction	$135 ($15 per pay period)
F. John Pallotta, Jr., 38 Eileen Drive, Mahwah, New Jersey 07430 — Receipt For: Primary / General / Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America; Occupation: Sr. Vice President; Aggregate Year-to-Date > $ 690	semi monthly payroll deduction	$270 ($30 per pay period)
G. Edward Phelan, 743 Doncaster Drive, Walnut Creek, California 94598 — Receipt For: Primary / General / Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America; Occupation: Sales Director; Aggregate Year-to-Date > $ 368	semi monthly payroll deduction	$144 ($16 per pay period)

SUBTOTAL of Receipts This Page (optional) . . . . . >

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 3 OF 3

FOR LINE NUMBER 11a.

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NAME OF COMMITTEE (In Full)

Guardian Life Insurance Co. of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Sargent 231 Balmforth Street Black Rock, Connecticut 06605 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: CEO Aggregate Year-to-Date > $ 920	Semi monthly payroll deduction	$360 ($140 per pay period)
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Stephen Scarpati 1333 McKeel Street Yorktown Heights, N.Y. 10598 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 391	semi monthly payroll deduction	$153 ($17 per pay period)
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Henry Slattery 42 Harbor Park Drive Centerport, N.Y. 11721 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 445	semi monthly payroll deduction	$135 ($15 per pay period)
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
John Smith 41 Cedar Lake West Denville, New Jersey 07834 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Sr. Vice President Aggregate Year-to-Date > $ 920	Semi monthly payroll deduction	$360 ($140 per pay period)
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Franklin Sorrentino 3564 Verona Place Seaford, N.Y. 11783 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Sr. Vice President Aggregate Year-to-Date > $ 268.75	Semi monthly payroll deduction	168.75 ($18.75 per pay period)
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) 3317.67

FE8ANDB

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INS. CO. OF AMERICA POLITICAL ACTION COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Zimmer for U.S. Senate 507 Capitol Ct. N.E., Suite 100 Washington, D.C. 20002	Campaign contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10.22.96	1,000.00
B. Full Name, Mailing Address and ZIP Code Collins for Senator P.O. Box 11096 Bangor, Maine 04402-1096	Campaign contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10.22.96	500.00
C. Full Name, Mailing Address and ZIP Code Nancy Mayer for Senate Wayland Square, Box 603216 Providence Rhode Island 02906	Campaign contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10.22.96	500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

TOTAL This Period (last page this line number only) 2000.00

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 12-5-96
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

MRJ — PREPARER

12-11-96 — DATE PREPARED

FEC FORM 70-2 (12/92)