The Guardian

201 Park Avenue South
New York, NY 10003
212/598-8395
FAX 212/529-9301

Deborah Miaskowski
Counsel

VIA CERTIFIED MAIL

April 14, 1994

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 April 15 Quarterly Report**

Gentlemen:

Enclosed is our April 15 Quarterly Report.

Very truly yours,

Deborah Miaskowski

Deborah Miaskowski
Counsel

DM/jd
Enclosure

The Guardian
Life Insurance Company
of America • Est. 1860

94038960361

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Guardian Life Ins. Co. of America Political Action Committee

ADDRESS (number and street) ☐ Check if different than previously reported
201 Park Avenue South

CITY, STATE and ZIP CODE
New York, New York 10003

2. FEC IDENTIFICATION NUMBER
C00173393

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

4. TYPE OF REPORT

(a) ☒ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:

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

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

☐ Thirtieth day report following the General Election on _____ in the State of _____.

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period -1-94 through 3-31-94		
6. (a) Cash on Hand January 1, 1994		$ 35,637.72
(b) Cash on Hand at Beginning of Reporting Period	$ 35,637.72	
(c) Total Receipts (from Line 19)	$ 2,436.06	$ 2,436.06
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 38,073.78	$ 38,073.78
7. Total Disbursements (from Line 30)	$ 7,000.00	$ 7,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 31,073.78	$ 31,073.78
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 202-219-3420

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
4-13-94

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

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FEC FORM 3X
(revised 9/93)

FE4AN-01

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 Political Action Committee

REPORT COVERING PERIOD FROM 1-1-94 TO: 3-31-94

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	2,386.56	2,386.56	11(a)(i)
ii. Unitemized	49.50	49.50	11(a)(ii)
iii. Total ... (add i and ii) ➤	2,436.06	2,436.06	11(a)(iii)
b. Political Party Committees	0	0	11(b)
c. Other Political Committees (such as PACs)	0	0	11(c)
d. Total Contributions ... (add a iii, b and c) ➤	2,436.06	2,436.06	11(d)
12. Transfers From Affiliated/Other Party Committees	0	0	12
13. All Loans Received	0	0	13
14. Loan Repayments Received	0	0	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0	17
18. Transfers from Nonfederal Account for Joint Activity	0	0	18
19. Total Receipts ... (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	2,436.06	2,436.06	19
20. Total Federal Receipts ... (subtract line 18 from line 19) ➤	2,436.06	2,436.06	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0	0	21(a)(i)
ii. Non-Federal Share	0	0	21(a)(ii)
b. Other Federal Operating Expenditures	0	0	21(b)
c. Total Operating Expenditures ... (add a i, a ii, and b) ➤	0	0	21(c)
22. Transfers to Affiliated/Other Party Committees	0	0	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	7,000.00	7,000.00	23
24. Independent Expenditures (use Schedule E)	0	0	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	25
26. Loan Repayments Made	0	0	26
27. Loans Made	0	0	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0	0	28(a)
b. Political Party Committees	0	0	28(b)
c. Other Political Committees (such as PACs)	0	0	28(c)
d. Total Contribution Refunds ... (add a, b and c) ➤	0	0	28(d)
29. Other Disbursements	0	0	29
30. Total Disbursements ... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	7,000.00	7,000.00	30
31. Total Federal Disbursements ... (subtract line 21 a ii from line 30) ➤	7,000.00	7,000.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	2,436.06	2,436.06	32
33. Total Contribution Refunds (from line 28d)	0	0	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	2,436.06	2,436.06	34
35. Total Federal Operating Expenditures ... (add 21 a i and 21 b) ➤	0	0	35
36. Offsets to Operating Expenditures (from line 15)	0	0	36
37. Net Operating Expenditures ... (subtract line 36 from 35) ➤	0	0	37

FE4ANI01

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 3

FOR LINE NUMBER 11a i

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

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: President Aggregate Year-to-Date > $ 240	twice monthly payroll deduction	$240.00 ($40.00 per pay period)
B. Full Name, Mailing Address and ZIP Code Edward Kerswig 65-04 78th Street Middle Village, New York 11379 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 60	twice monthly payroll deduction	$60.00 ($10.00 per pay period)
C. Full Name, Mailing Address and ZIP Code Henry Slattery 615 E. Lindbergh Street Appleton, Wisconsin 54911 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 90	twice monthly payroll deduction	$90.00 ($15.00 per pay period)
D. Full Name, Mailing Address and ZIP Code Frank Sorrentino 3564 Verona Place Seaford, New York 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 > $	twice monthly payroll deduction	$90.00 ($15.00 per pay period)
E. Full Name, Mailing Address and ZIP Code John Pallotta, Jr. 38 Eileen Drive Mahwah, New Jersey 07438 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Sr. Vice President Aggregate Year-to-Date > $ 180.00	twice monthly payroll deduction	$180.00 ($30.00 per pay period)
F. Full Name, Mailing Address and ZIP Code David Perriello 4372 Astor Drive Orefield, Pennsylvania 18069 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 108	twice monthly payroll deduction	$108.00 ($18.00 per pay period)
G. Full Name, Mailing Address and ZIP Code Emily Crandall 71 Sullivan Drive West Orange, New Jersey 07052 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: V.P. and Assoc. general Counsel Aggregate Year-to-Date > $ 120	twice monthly payroll deduction	$120.00 ($20.00 per pay period)

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

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 3

FOR LINE NUMBER 11a i

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NAME OF COMMITTEE (In Full)
Guardian Life Ins. 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
John M. Smith 45 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 > $ 240	twice monthly payroll deduction	$240.00 ($40.00 per pay period)
B. Full Name, Mailing Address and ZIP Code Peter Freeman 144 Country Ridge Drive Rye Brook, New York 10573 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: 2nd Vice President Aggregate Year-to-Date > $ 60	twice monthly payroll deduction	$60.00 ($10.00 per pay period)
C. Full Name, Mailing Address and ZIP Code William Frentz 451 Cogenwaugh Road Cos Cob, Connecticut 06807 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 180	twice monthly payroll deduction	$180.00 ($30.00 per pay period)
D. Full Name, Mailing Address and ZIP Code 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: Vice President Aggregate Year-to-Date > $ 60	twice monthly payroll deduction	$60.00 ($10.00 per pay period)
E. Full Name, Mailing Address and ZIP Code William Broadbent 50 Hickory Drive Maplewood, New Jersey 07040 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 106.20	twice monthly payroll deduction	$106.20 ($17.70 per pay period)
F. Full Name, Mailing Address and ZIP Code 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 > $ 300	twice monthly payroll deduction	$300.00 ($50.00 per pay period)
G. Full Name, Mailing Address and ZIP Code Armand de Palo 228 Aster Street Massapequa Park, New York 11762 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Sr. Vice President Aggregate Year-to-Date > $ 69.36	twice monthly payroll deduction	$69.36 ($11.56 per pay period)

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

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

9 4 0 3 8 9 6 0 3 6 5

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 3 OF 3

FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

Guardian Life Ins. 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
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 > $ 90	twice monthly payroll deduction	$90.00 ($15.00 per pay period)
B. Full Name, Mailing Address and ZIP Code Sanford Herman 45 Runyon Place Scarsdale New York 10583 Receipt For: Primary General Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 75	twice monthly payroll deduction	$75.00 ($15.00 per pay period)
C. Full Name, Mailing Address and ZIP Code John Finan 46 Temple Lane Suffern, New York 10901 Receipt For: Primary General Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 60	twice monthly payroll deduction	$60.00 ($10.00 per pay period)
D. Full Name, Mailing Address and ZIP Code Stephen Sarpari 1333 Pine Hill Street Overpeck Heights New York 10518 Receipt For: Primary General Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 102	twice monthly payroll deduction	$102.00 ($17.00 per pay period)
E. Full Name, Mailing Address and ZIP Code Edward Finlan 373 Fenwick 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 > $ 96	twice monthly payroll deduction	$96.00 ($16.00 per pay period)
F. Full Name, Mailing Address and ZIP Code Michael Dianas 552 Wilson Avenue Glen Ellyn, Illinois 60137 Receipt For: Primary General Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Sales Director Aggregate Year-to-Date > $ 60	twice monthly payroll deduction	$60.00 ($10.00 per pay period)
G. Full Name, Mailing Address and ZIP Code Receipt For: Primary General Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) >

TOTAL This Period (last page this line number only) > 2386.56

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FEC/AN-01

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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

A. Full Name, Mailing Address and ZIP Code Health Insurance Political Action Committee (HIPAC) 1025 Conn. Ave. N.W. Suite 1200 Washington, D.C. 20036-3998	Purpose of Disbursement contribution to trade association PAC Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2-22-94	Amount of Each Disbursement This Period $5,000.00
B. Full Name, Mailing Address and ZIP Code Victory America 200 Park Avenue 26th Floor / Dilenschneider New York, New York 10166	Purpose of Disbursement contribution to national PAC Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3-10-94	Amount of Each Disbursement This Period $1,000.00
C. Full Name, Mailing Address and ZIP Code Nadler for Congress c/o Anna Louis 26 W. 70th St. New York, New York 10023	Purpose of Disbursement campaign contribution/ reception 3-14-94 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3-17-94	Amount of Each Disbursement This Period $1,000.00
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) $7,000.00

FE4AN10'

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 4-14-94
☐	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

SEH
PREPARER

4-21-94
DATE PREPARED

FEC FORM 70-2 (12/92)

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