

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

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="2012"/>	<input type="text" value="60207.66"/>	<input type="text" value="60207.66"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="84647.03"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="23047.72"/>	<input type="text" value="50163.44"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="107694.75"/>	<input type="text" value="110371.10"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="13625.84"/>	<input type="text" value="16302.19"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="94068.91"/>	<input type="text" value="94068.91"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2012 To: M M / D D / Y Y Y Y 06 / 30 / 2012

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).....	18264.00	37054.00
(ii) Unitemized	4783.72	13109.44
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	23047.72	50163.44
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	23047.72	50163.44
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
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))..... ▶	23047.72	50163.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	23047.72	50163.44

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13500.00	16000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	125.84	302.19
30. Federal Election Activity (2 U.S.C. §431(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)) ..	13625.84	16302.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13625.84	16302.19

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	23047.72	50163.44
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23047.72	50163.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 38
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. THOMAS SMOOT
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation Second Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4140734
 Amount of Each Receipt this Period
 100.00

B. MARGHERITA DIMANNI
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4140738
 Amount of Each Receipt this Period
 200.00

C. JOHN P MCCARTHY
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation Executive Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4140745
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
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 38
	<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. BRIAN KEATING
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co. Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4140751
 Amount of Each Receipt this Period
 100.00

B. DAVID JACOBY
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation CFO & VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4140752
 Amount of Each Receipt this Period
 90.00

C. DOUGLAS SCOTT DOLFI
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation EXECUTIVE VICE 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
 04 / 30 / 2012
Transaction ID : 4140753
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	290.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 38
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. BARBARA REGAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation Second Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4140754
 Amount of Each Receipt this Period
 100.00

B. ELIZABETH MOORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4140757
 Amount of Each Receipt this Period
 100.00

C. DONG AHN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation GROUP STRATEGY/BUSINESS PLANNING /<
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4140761
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
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 38
	<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. TRACY RICH
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co. Occupation Executive Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4140767
 Amount of Each Receipt this Period
 200.00

B. MICHAEL BYRNE
 Full Name (Last, First, Middle Initial)
 Mailing Address 206 SCHINDLER DRIVE
 City FLORHAM PARK State NJ Zip Code 07932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Occupation Vice 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
 04 / 30 / 2012
Transaction ID : 4140768
 Amount of Each Receipt this Period
 100.00

C. ALEXANDER GRANT
 Full Name (Last, First, Middle Initial)
 Mailing Address 345 ESSEX 57 ST, APT 16D Apt 16D
 City NEW YORK State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co Occupation Insurance
 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
 04 / 30 / 2012
Transaction ID : 4140769
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 10 OF 38
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

Full Name (Last, First, Middle Initial)
A. LESLIE BARBI

Mailing Address **7 HANOVER SQUARE**

City State Zip Code
NEW YORK NY 10004

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

Name of Employer Occupation
GUARDIAN LIFE INSURANCE CO Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
04 / 30 / 2012

Transaction ID : 4140770

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. SYLVAN FELDSTEIN

Mailing Address **7 HANOVER SQUARE**

City State Zip Code
NEW YORK NY 10004

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

Name of Employer Occupation
Guardian Life Insurance Co Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
04 / 30 / 2012

Transaction ID : 4140771

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C. DOUGLAS GREENE

Mailing Address **7 HANOVER SQUARE**

City State Zip Code
NEW YORK NY 10004

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

Name of Employer Occupation
Guardian Life Insurance Co. 2nd Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
04 / 30 / 2012

Transaction ID : 4140774

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **450.00**

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 38
	<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. RICHARD SCOTT
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co. Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4140775
 Amount of Each Receipt this Period
 150.00

B. MARK ABBOTT
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4140776
 Amount of Each Receipt this Period
 80.00

C. ENIS JURADO-NIEVES
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co. Occupation Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4140785
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	430.00
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 38
<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. Walter Skinner
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Hanover Sq
 City New York State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co Occupation Assistant Treasurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4140788
 Amount of Each Receipt this Period
 100.00

B. RICHARD O'DONNELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 46 LONGFELLOW LANE
 City MAHWAH State NJ Zip Code 07430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4140789
 Amount of Each Receipt this Period
 100.00

C. JOHN FLANNIGAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation Senior VP & Corporate Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4140790
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 38
<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. STEWART JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQ
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co. Occupation Senior Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4140792
 Amount of Each Receipt this Period
 60.00

B. BRAD THOMAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation EXECUTIVE ADMINISTRATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4140795
 Amount of Each Receipt this Period
 250.00

C. MARK MURPHY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 BECKER FARM RD
 City ROSELAND State NJ Zip Code 07068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co. Occupation AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : 4141395
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	510.00
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 14 OF 38
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. VINCENT D ADDONA
Full Name (Last, First, Middle Initial)
Mailing Address 7 HANOVER SQUARE
City NEW YORK State NY Zip Code 10004
FEC ID number of contributing federal political committee. C
Name of Employer Guardian Life Insurance Co Occupation AGENT
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 800.00

Date of Receipt 04 / 30 / 2012
Transaction ID : 4141403
Amount of Each Receipt this Period 200.00

B. DALE MAGNER
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 04 / 04 / 2012
Transaction ID : 4165239
Amount of Each Receipt this Period 1000.00

C. Jonathan Renfrew
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 3000.00

Date of Receipt 06 / 25 / 2012
Transaction ID : 4165243
Amount of Each Receipt this Period 3000.00

SUBTOTAL of Receipts This Page (optional)..... 4200.00
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 15 OF 38
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. GINA BIRCHALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR3171193330
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$50.00 Semi-Monthly)

B. MICHAEL BYRNE
 Full Name (Last, First, Middle Initial)
 Mailing Address 206 SCHINDLER DRIVE
 City FLORHAM PARK State NJ Zip Code 07932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR31711273330
 Amount of Each Receipt this Period 200.00
 P/R Deduction (\$100.00 Semi-Monthly)

C. JOHN CIFU
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 BROOKSIDE DR
 City GOSHEN State NY Zip Code 10924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co Occupation Senior Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR31711293330
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$50.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
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 16 OF 38
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. VINCENT D ADDONA
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co Occupation AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR31711303330
 Amount of Each Receipt this Period 400.00
 P/R Deduction (\$200.00 Semi-Monthly)

B. LARRY DIETZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co Occupation AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR31711313330
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$50.00 Semi-Monthly)

C. SYLVAN FELDSTEIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR31711373330
 Amount of Each Receipt this Period 300.00
 P/R Deduction (\$150.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 800.00
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 17 OF 38
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

Full Name (Last, First, Middle Initial)
A. MICHAEL FERIK

Mailing Address **7 HANOVER SQUARE**

City State Zip Code
NEW YORK NY 10004

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

Name of Employer Occupation
Guardian Life Insurance Co. Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
06 / 30 / 2012

Transaction ID : PR31711383330

Amount of Each Receipt this Period
100.00

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

Full Name (Last, First, Middle Initial)
B. ALEXANDER GRANT

Mailing Address **345 ESSEX 57 ST, APT 16D
Apt 16D**

City State Zip Code
NEW YORK NY 10022

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

Name of Employer Occupation
Guardian Life Insurance Co Insurance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
06 / 30 / 2012

Transaction ID : PR31711453330

Amount of Each Receipt this Period
200.00

P/R Deduction (\$100.00 Semi-Monthly)

Full Name (Last, First, Middle Initial)
C. DOUGLAS GREENE

Mailing Address **7 HANOVER SQUARE**

City State Zip Code
NEW YORK NY 10004

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

Name of Employer Occupation
Guardian Life Insurance Co. 2nd Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
06 / 30 / 2012

Transaction ID : PR31711483330

Amount of Each Receipt this Period
200.00

P/R Deduction (\$100.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **500.00**

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 38
	<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. LISA POWELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 3709 BARTON CREEK BLVD
 City AUSTIN State TX Zip Code 78735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co. Occupation Vice President BRC for Advanced Market
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR31711513330
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$250.00 Semi-Monthly)

B. STEWART JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQ
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co. Occupation Senior Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR31711543330
 Amount of Each Receipt this Period 120.00
 P/R Deduction (\$500.00 Semi-Monthly)

C. ENIS JURADO-NIEVES
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co. Occupation Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR31711573330
 Amount of Each Receipt this Period 400.00
 P/R Deduction (\$30.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	620.00
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 38
	<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. BRIAN KEATING
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co. Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : PR31711583330
 Amount of Each Receipt this Period 200.00
 P/R Deduction (\$100.00 Semi-Monthly)

B. MARK MURPHY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 BECKER FARM RD
 City ROSELAND State NJ Zip Code 07068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co. Occupation AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : PR31711713330
 Amount of Each Receipt this Period 400.00
 P/R Deduction (\$200.00 Semi-Monthly)

C. RICHARD O'DONNELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 46 LONGFELLOW LANE
 City MAHWAH State NJ Zip Code 07430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : PR31711733330
 Amount of Each Receipt this Period 200.00
 P/R Deduction (\$70.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	800.00
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 38
	<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. TRACY RICH
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co. Occupation Executive Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : PR31711813330
 Amount of Each Receipt this Period 400.00
 P/R Deduction (\$150.00 Semi-Monthly)

B. ELIZABETH ROGALIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co. Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : PR31711823330
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$50.00 Semi-Monthly)

C. RICHARD SCOTT
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co. Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : PR31711843330
 Amount of Each Receipt this Period 300.00
 P/R Deduction (\$100.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	800.00
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 38
<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. Walter Skinner
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Hanover Sq
 City New York State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co Occupation Assistant Treasurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : PR31849463330
 Amount of Each Receipt this Period 200.00
 P/R Deduction (\$0.00)

B. ROBERT REALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation Managing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : PR31884773330
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$50.00 Semi-Monthly)

C. THOMAS SMOOT
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation Second Vice President
 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
 06 / 30 / 2012
Transaction ID : PR31884783330
 Amount of Each Receipt this Period 200.00
 P/R Deduction (\$100.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	500.00
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 22 OF 38
<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. CHRISTOPHER SWANKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co Occupation Vice President, Group Dental & Vision
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR31884793330
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$50.00 Semi-Monthly)

B. ANDREW GORDON
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co Occupation Actuary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR31884813330
 Amount of Each Receipt this Period 80.00
 P/R Deduction (\$20.00 Semi-Monthly)

C. LINDA HOGAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Guardian Life Insurance Co Occupation Second Vice President - HR Business Pa
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR31884823330
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	280.00
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 38
<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. MARGHERITA DIMANNI
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR3188483330
 Amount of Each Receipt this Period 400.00
 P/R Deduction (\$100.00 Semi-Monthly)

B. ELIZABETH MOORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR31884843330
 Amount of Each Receipt this Period 200.00
 P/R Deduction (\$50.00 Semi-Monthly)

C. LESLIE BARBI
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation Managing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR31884873330
 Amount of Each Receipt this Period 400.00
 P/R Deduction (\$100.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
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 24 OF 38
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. JOHN FLANNIGAN
Full Name (Last, First, Middle Initial)
Mailing Address 7 HANOVER SQUARE
City NEW YORK State NY Zip Code 10004
FEC ID number of contributing federal political committee. **C**
Name of Employer GUARDIAN LIFE INSURANCE CO Occupation Senior VP & Corporate Controller
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR31884893330
Amount of Each Receipt this Period 200.00
P/R Deduction (\$50.00 Semi-Monthly)

B. DANIEL FALLER
Full Name (Last, First, Middle Initial)
Mailing Address 7 HANOVER SQUARE
City NEW YORK State NY Zip Code 10004
FEC ID number of contributing federal political committee. **C**
Name of Employer GUARDIAN LIFE INSURANCE CO. Occupation VICE PRESIDENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR32396093330
Amount of Each Receipt this Period 100.00
P/R Deduction (\$0.00)

C. JAMES BRYANT
Full Name (Last, First, Middle Initial)
Mailing Address 7 HANOVER SQUARE
City NEW YORK State NY Zip Code 10004
FEC ID number of contributing federal political committee. **C**
Name of Employer GUARDIAN LIFE INSURANCE CO Occupation Corporate Actuary
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR32398253330
Amount of Each Receipt this Period 100.00
P/R Deduction (\$0.00)

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
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 38
<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. MARK P NATHAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation DIRECTOR OF IT STRATEGY PLANNING & C
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR32398273330
 Amount of Each Receipt this Period 84.00
 P/R Deduction (\$0.00)

B. JOHN P MCCARTHY
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation Executive Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR32398293330
 Amount of Each Receipt this Period 200.00
 P/R Deduction (\$0.00)

C. DOUGLAS B DUBITSKY
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation VICE PRESIDENT PRODUCT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR32398313330
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$0.00)

SUBTOTAL of Receipts This Page (optional).....▶ 384.00
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 38
<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

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 INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

Full Name (Last, First, Middle Initial) A. DONG AHN		Date of Receipt
Mailing Address 7 HANOVER SQUARE		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code NEW YORK NY 10004		Transaction ID : PR32398363330
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="200.00"/>
Name of Employer GUARDIAN LIFE INSURANCE CO	Occupation GROUP STRATEGY/BUSINESS PLANNING /I	P/R Deduction (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) B. CHRIS CALOS		Date of Receipt
Mailing Address 7 HANOVER SQUARE		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code NEW YORK NY 10004		Transaction ID : PR32398383330
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer GUARDIAN LIFE INSURANCE CO	Occupation GROUP SALES MANAGEMENT	P/R Deduction (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. JOHN P MEEHAN		Date of Receipt
Mailing Address 7 HANOVER SQUARE		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code NEW YORK NY 10004		Transaction ID : PR32398403330
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer GUARDIAN LIFE INSURANCE CO	Occupation DIRECTOR, ENTERPRISE APPLICATION DE	P/R Deduction (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="400.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 38
	<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. MARLA ROMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : PR32398423330
 Amount of Each Receipt this Period 80.00
 P/R Deduction (\$0.00)

B. SARAH M VEGA
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 SOUTH STREET
 City PITTSFIELD State MA Zip Code 01201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation 2ND VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : PR32398453330
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$0.00)

C. STUART J SHAW
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation GROUP PRODUCT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : PR33152153330
 Amount of Each Receipt this Period 80.00
 P/R Deduction (\$0.00)

SUBTOTAL of Receipts This Page (optional).....▶	260.00
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 38
<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. BARBARA REGAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation Second Vice President
 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
 06 / 30 / 2012
Transaction ID : PR33152163330
 Amount of Each Receipt this Period 200.00
 P/R Deduction (\$0.00)

B. STEPHANIE SUSENS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation Senior Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : PR33152183330
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$0.00)

C. JARED M WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation Senior Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : PR33152193330
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$0.00)

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 29 OF 38
	<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. BARRY I BELFER
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation SENIOR VICE PRESIDENT & TREASURER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR33152203330
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$0.00)

B. VANESSA A HARGRAVE
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation VP, Chief Financial Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR33152213330
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$0.00)

C. LEONARD PELTZMANN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR39070133330
 Amount of Each Receipt this Period 500.00
 P/R Deduction (\$0.00)

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
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 30 OF 38
<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. DOUGLAS JAFFE
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR39070253330
 Amount of Each Receipt this Period 80.00
 P/R Deduction (\$0.00)

B. DOUGLAS SCOTT DOLFI
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation EXECUTIVE VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR39070293330
 Amount of Each Receipt this Period 200.00
 P/R Deduction (\$0.00)

C. THOMAS RAFFERTY
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR39070313330
 Amount of Each Receipt this Period 80.00
 P/R Deduction (\$0.00)

SUBTOTAL of Receipts This Page (optional).....▶	360.00
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 31 OF 38
	<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. MARK ABBOTT
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR40763653330
 Amount of Each Receipt this Period 160.00
 P/R Deduction (\$0.00)

B. SHARRI BACHMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR40763673330
 Amount of Each Receipt this Period 80.00
 P/R Deduction (\$0.00)

C. BRAD THOMAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 HANOVER SQUARE
 City NEW YORK State NY Zip Code 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GUARDIAN LIFE INSURANCE CO Occupation EXECUTIVE ADMINISTRATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR40763693330
 Amount of Each Receipt this Period 500.00
 P/R Deduction (\$0.00)

SUBTOTAL of Receipts This Page (optional)..... ▶ 740.00
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 32 OF 38
<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

Full Name (Last, First, Middle Initial) A. RONNIE ALTERMAN		Date of Receipt MM / DD / YYYY 06 / 30 / 2012
Mailing Address		Transaction ID : PR40763823330
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer GUARDIAN LIFE INSURANCE CO	Occupation 2ND VICE PRESIDENT	P/R Deduction (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. DAVID JACOBY		Date of Receipt MM / DD / YYYY 06 / 30 / 2012
Mailing Address 7 HANOVER SQUARE		Transaction ID : PR40763913330
City	State	Zip Code
NEW YORK	NY	10004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 180.00
Name of Employer GUARDIAN LIFE INSURANCE CO	Occupation CFO & VP	P/R Deduction (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name (Last, First, Middle Initial) C. EDUARDO BLANCO		Date of Receipt MM / DD / YYYY 06 / 30 / 2012
Mailing Address		Transaction ID : PR40763963330
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer GUARDIAN LIFE INSURANCE CO	Occupation Vice President, Chief Audit Executive	P/R Deduction (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	360.00
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 33 OF 38
<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)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

Full Name (Last, First, Middle Initial) A. DEBRA ZOPPY		Date of Receipt
Mailing Address		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code		Transaction ID : PR40764003330
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer GUARDIAN LIFE INSURANCE CO	Occupation DIRECTOR	P/R Deduction (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. KEVIN CAREY		Date of Receipt
Mailing Address		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code		Transaction ID : PR40764163330
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer GUARDIAN LIFE INSURANCE CO	Occupation COUNSEL	P/R Deduction (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. LAWRENCE HAZZARD		Date of Receipt
Mailing Address		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code		Transaction ID : PR40764613330
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="80.00"/>
Name of Employer GUARDIAN LIFE INSURANCE CO	Occupation VICE PRESIDENT	P/R Deduction (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="280.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 34 OF 38
(check only one)

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

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NAME OF COMMITTEE (In Full)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

A. DEBORAH DUNCAN
Full Name (Last, First, Middle Initial)
Mailing Address 7 HANOVER SQUARE
City NEW YORK State NY Zip Code 10004
FEC ID number of contributing federal political committee. C
Name of Employer GUARDIAN LIFE INSURANCE CO Occupation DIRECTOR
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 1000.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR40764843330
Amount of Each Receipt this Period 1000.00
P/R Deduction (\$0.00)

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date

Date of Receipt
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date

Date of Receipt
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	18264.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

Full Name (Last, First, Middle Initial)

A. AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		27		2012

Mailing Address

Transaction ID : 4165377

City State Zip Code
DC

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement

011
Category/ Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

B. Tommy Thompson For Senate Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		27		2012

Mailing Address PO Box 2539

Transaction ID : 4165383

City State Zip Code
Madison WI 53701

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement

011
Category/ Type

Candidate Name

Mr. Tommy Thompson
 Office Sought: House Senate President
 Disbursement For: 2012 Primary General Other (specify) ▼
 State: WI District:

Full Name (Last, First, Middle Initial)

C. Nebraskans For Kerrey

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		27		2012

Mailing Address PO Box 45820

Transaction ID : 4165384

City State Zip Code
Omaha NE 68145

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement

011
Category/ Type

Candidate Name

Mr. J Robert Kerrey
 Office Sought: House Senate President
 Disbursement For: 2012 Primary General Other (specify) ▼
 State: NE District:

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

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

8000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

Full Name (Last, First, Middle Initial)

A. Friends Of Pat Toomey

Mailing Address 2720 Jordan Road

City Orefield State PA Zip Code 18069

Purpose of Disbursement

011

Candidate Name

Sen. Pat Toomey

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	27	/	2012

Transaction ID : 4165387

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Gillibrand For Senate

Mailing Address 236 Massachusetts Ave Ne
Suite 110

City Washington State DC Zip Code 20002

Purpose of Disbursement

011

Candidate Name

Ms. Kirsten Gillibrand

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	22	/	2012

Transaction ID : 4165392

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Friends of Larry Taylor

Mailing Address PO Box 1208

City Friendswood State TX Zip Code 77549

Purpose of Disbursement

011

Candidate Name

Larry Taylor

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	19	/	2012

Transaction ID : 4165396

Amount of Each Disbursement this Period

1000.00

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

Full Name (Last, First, Middle Initial)

A. Texans for Kelly Hancock SPAC

Mailing Address P.O. Box 821349

City North Richland Hills State TX Zip Code 76182

Purpose of Disbursement

Category/
Type

Candidate Name

Kelly Hancock

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : 4165421

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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NAME OF COMMITTEE (In Full)
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE PAC)

Full Name (Last, First, Middle Initial)

A. JP Morgan Chase

Mailing Address 221 PARK AVE SOUTH

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	2

Transaction ID : 4165440

Amount of Each Disbursement this Period

4	6	.	0	9
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Full Name (Last, First, Middle Initial)

B. JP Morgan Chase

Mailing Address 221 PARK AVE SOUTH

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	1	2

Transaction ID : 4165446

Amount of Each Disbursement this Period

3	9	.	7	0
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Full Name (Last, First, Middle Initial)

C. JP Morgan Chase

Mailing Address 221 PARK AVE SOUTH

City NEW YORK State NY Zip Code 10004

Purpose of Disbursement

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	2

Transaction ID : 4165468

Amount of Each Disbursement this Period

4	0	.	5	8	4
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SUBTOTAL of Disbursements This Page (optional)..... ▶

1	2	5	.	8	4
---	---	---	---	---	---

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

1	2	5	.	8	4
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