

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the linesGUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN
LIFE PAC

ADDRESS (number and street)

7 HANOVER SQUARE

C/O EDWARD KANE

☐Check if different
than previously
reported. (ACC)

NEW YORK

NY

10004

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00173393

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☒July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2007

through

06

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. John Hurley

Signature of Treasurer

Electronically Filed by Mr. John Hurley

Date

04

21

2007

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

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

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
0	1	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		10500.54
(b) Cash on Hand at Beginning of Reporting Period	10500.54	
(c) Total Receipts (from Line 19)	5819.68	5819.68
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	16320.22	16320.22
7. Total Disbursements (from Line 31)	4038.79	4038.79
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	12281.43	12281.43
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

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 W Y
0 1 0 1 2 0 0 7

To:

M M D D Y Y W Y
0 6 3 0 2 0 0 7

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	2900.00	2900.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	2919.68	2919.68
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	5819.68	5819.68
(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) ➡	5819.68	5819.68
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 Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5819.68	5819.68
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5819.68	5819.68

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) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	4000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	38.79	38.79
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4038.79	4038.79
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4038.79	4038.79

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)	5819.68	5819.68
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5819.68	5819.68
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 / 21

(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.

Full Name (Last, First, Middle Initial)

Ms Sarah Awan-Johnson

Mailing Address 453 East 14th Street
Apt. 8C

City State Zip Code
New York NY 10009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.4204

Amount of Each Receipt this Period

40.00

Semi-Monthly Payroll Deduction

B.

Full Name (Last, First, Middle Initial)

Ms Sarah Awan-Johnson

Mailing Address 453 East 14th Street
Apt. 8C

City State Zip Code
New York NY 10009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.4127

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Mr. Michael F. Byrne

Mailing Address 206 Schindler Drive

City State Zip Code
Florham Park NJ 07932

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: SA11AI.4167

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

180.00

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 7 / 21

(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.

Full Name (Last, First, Middle Initial)

Mr. Michael F. Byrne

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
Compan

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
0 3 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.4168

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

B.

Full Name (Last, First, Middle Initial)

Mr. Michael F. Byrne

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
Compan

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.4169

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

C.

Full Name (Last, First, Middle Initial)

Mr. Michael F. Byrne

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
Compan

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
0 5 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.4170

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

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: PAGE 8 / 21

(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.

Full Name (Last, First, Middle Initial)

Mr. Michael F. Byrne

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
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.4102

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

B.

Full Name (Last, First, Middle Initial)

Mr. John Cifu

Mailing Address 8 Brookside Drive

City

Goshen

State

NY

Zip Code

10924

FEC ID number of contributing federal political committee.

C

Name of Employer
Berkshire Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.4175

Amount of Each Receipt this Period

50.00

Semi-Monthly Payroll Deduction

C.

Full Name (Last, First, Middle Initial)

Mr. John Cifu

Mailing Address 8 Brookside Drive

City

Goshen

State

NY

Zip Code

10924

FEC ID number of contributing federal political committee.

C

Name of Employer
Berkshire Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.4176

Amount of Each Receipt this Period

50.00

Semi-Monthly Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 21

(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.

Full Name (Last, First, Middle Initial)

Mr. John Cifu

Mailing Address 8 Brookside Drive

City

Goshen

State

NY

Zip Code

10924

FEC ID number of contributing federal political committee.

C

Name of Employer
Berkshire Life Insurance
Compa

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.4104

Amount of Each Receipt this Period

50.00

Semi-Monthly Payroll Deduction

B.

Full Name (Last, First, Middle Initial)

Michael D. Fleming

Mailing Address 58 Colgate Avenue

City

Yonkers

State

NY

Zip Code

10703

FEC ID number of contributing federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.4210

Amount of Each Receipt this Period

40.00

Semi-Monthly Payroll Deduction

C.

Full Name (Last, First, Middle Initial)

Michael D. Fleming

Mailing Address 58 Colgate Avenue

City

Yonkers

State

NY

Zip Code

10703

FEC ID number of contributing federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.4136

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 21

(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.

Full Name (Last, First, Middle Initial)

Mr. John P. Foley

Mailing Address 2 Gold Street
Apt. 4703

City State Zip Code
New York NY 10038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: SA11AI.4178

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

B.

Full Name (Last, First, Middle Initial)

Mr. John P. Foley

Mailing Address 2 Gold Street
Apt. 4703

City State Zip Code
New York NY 10038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.4179

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

C.

Full Name (Last, First, Middle Initial)

Mr. John P. Foley

Mailing Address 2 Gold Street
Apt. 4703

City State Zip Code
New York NY 10038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.4180

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 21

(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.

Full Name (Last, First, Middle Initial)

Mr. John P. Foley

Mailing Address 2 Gold Street
Apt. 4703

City State Zip Code
New York NY 10038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.4181

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

B.

Full Name (Last, First, Middle Initial)

Mr. John P. Foley

Mailing Address 2 Gold Street
Apt. 4703

City State Zip Code
New York NY 10038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.4106

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

C.

Full Name (Last, First, Middle Initial)

Mr. Alexander Grant

Mailing Address 345 Essex 57 Street
Apt. 16D

City State Zip Code
New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: SA11AI.4185

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

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: PAGE 12 / 21

(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.

Full Name (Last, First, Middle Initial)

Mr. Alexander Grant

Mailing Address 345 Essex 57 Street
Apt. 16D

City State Zip Code
New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.4186

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

B.

Full Name (Last, First, Middle Initial)

Mr. Alexander Grant

Mailing Address 345 Essex 57 Street
Apt. 16D

City State Zip Code
New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.4187

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

C.

Full Name (Last, First, Middle Initial)

Mr. Alexander Grant

Mailing Address 345 Essex 57 Street
Apt. 16D

City State Zip Code
New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.4188

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

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: PAGE 13 / 21

(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.

Full Name (Last, First, Middle Initial)

Mr. Alexander Grant

Mailing Address 345 Essex 57 Street
Apt. 16D

City State Zip Code
New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.4108

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas Greaney

Mailing Address 33-3411 Hudson Street

City State Zip Code
Jersey City NJ 07302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Asst. Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.4192

Amount of Each Receipt this Period

50.00

Semi-Monthly Payroll Deduction

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas Greaney

Mailing Address 33-3411 Hudson Street

City State Zip Code
Jersey City NJ 07302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Asst. Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.4193

Amount of Each Receipt this Period

50.00

Semi-Monthly Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

200.00

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 / 21

(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.

Full Name (Last, First, Middle Initial)

Mr. Thomas Greaney

Mailing Address 33-3411 Hudson Street

City

Jersey City

State

NJ

Zip Code

07302

FEC ID number of contributing federal political committee.

C

Name of Employer
Guardian Life Insurance
Company

Occupation

Asst. Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.4110

Amount of Each Receipt this Period

50.00

Semi-Monthly Payroll Deduction

B.

Full Name (Last, First, Middle Initial)

Craig Guiffre

Mailing Address 17 Pleasant Lane

City

Scotch Plains

State

NJ

Zip Code

07076

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 / D D / Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: SA11AI.4163

Amount of Each Receipt this Period

100.00

Payroll Deduction

C.

Full Name (Last, First, Middle Initial)

Craig Guiffre

Mailing Address 17 Pleasant Lane

City

Scotch Plains

State

NJ

Zip Code

07076

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
0 3 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.4164

Amount of Each Receipt this Period

100.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

250.00

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 / 21

(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.

Full Name (Last, First, Middle Initial)

Mr. Mondo U. Lee

Mailing Address 18 Nottingham Road

City

West Orange

State

NJ

Zip Code

07052

FEC ID number of contributing federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.4216

Amount of Each Receipt this Period

40.00

Semi-Monthly Payroll Deduction

B.

Full Name (Last, First, Middle Initial)

Mr. Mondo U. Lee

Mailing Address 18 Nottingham Road

City

West Orange

State

NJ

Zip Code

07052

FEC ID number of contributing federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.4138

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Mr. Dennis Manning

Mailing Address 81 Graenest Ridge Road

City

Wilton

State

CT

Zip Code

06897

FEC ID number of contributing federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation
Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 7

Transaction ID: SA11AI.4196

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

180.00

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 / 21

(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.

Full Name (Last, First, Middle Initial)

Mr. Dennis Manning

Mailing Address 81 Graenest Ridge Road

City

Wilton

State

CT

Zip Code

06897

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.4197

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

B.

Full Name (Last, First, Middle Initial)

Mr. Dennis Manning

Mailing Address 81 Graenest Ridge Road

City

Wilton

State

CT

Zip Code

06897

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.4198

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

C.

Full Name (Last, First, Middle Initial)

Mr. Dennis Manning

Mailing Address 81 Graenest Ridge Road

City

Wilton

State

CT

Zip Code

06897

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.4199

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

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: PAGE 17 / 21

(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.

Full Name (Last, First, Middle Initial)

Mr. Dennis Manning

Mailing Address 81 Graenest Ridge Road

City

Wilton

State

CT

Zip Code

06897

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	7

Transaction ID: SA11AI.4112

Amount of Each Receipt this Period

100.00

Semi-Monthly Payroll Deduction

B.

Full Name (Last, First, Middle Initial)

Richard O'Donnell

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
Compan

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	5		2	0	0	7

Transaction ID: SA11AI.4222

Amount of Each Receipt this Period

40.00

Semi-Monthly Payroll Deduction

C.

Full Name (Last, First, Middle Initial)

Richard O'Donnell

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
Compan

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	7

Transaction ID: SA11AI.4140

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

180.00

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 18 / 21

(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.

Full Name (Last, First, Middle Initial)

Mr. Douglas Phipps

Mailing Address 36 Hoyt Street

City

Darien

State

CT

Zip Code

06820

FEC ID number of contributing federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Vice President

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 5 / 2 0 0 7

Transaction ID: SA11AI.4228

Amount of Each Receipt this Period

40.00

Semi-Monthly Payroll Deduction

B.

Full Name (Last, First, Middle Initial)

Mr. Douglas Phipps

Mailing Address 36 Hoyt Street

City

Darien

State

CT

Zip Code

06820

FEC ID number of contributing federal political committee.

C

Name of Employer
Guardian Life Insurance
Compan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Vice President

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 7

Transaction ID: SA11AI.4142

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

2900.00

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)

PAGE 19 / 21

<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)

A.

Full Name (Last, First, Middle Initial)

Guardian Life PAC

Mailing Address 7 Hanover Square

City State Zip Code
New York NY 10004

Purpose of Disbursement
Ackerman for Congress

Candidate Name
Mr. Gary L Ackerman

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.4119

Date of Disbursement

05 / 08 / 2007

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Guardian Life PAC

Mailing Address 7 Hanover Square

City State Zip Code
New York NY 10004

Purpose of Disbursement
Committee To Re-elect Nydia Velazquez

Candidate Name
Nydia Velazquez

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.4116

Date of Disbursement

05 / 27 / 2007

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Guardian Life PAC

Mailing Address 7 Hanover Square

City State Zip Code
New York NY 10004

Purpose of Disbursement
Chris Dodd For President, Inc.

Candidate Name
CHRISTOPHER J DODD

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☒ President

Disbursement For:
☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.4121

Date of Disbursement

06 / 07 / 2007

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ►

4000.00

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

4000.00

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)

PAGE 20 / 21

<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)

A.

Full Name (Last, First, Middle Initial)

The Chase Manhattan Bank

Mailing Address 221 Park Avenue South

City

NEW York

State

NY

Zip Code

10003

Purpose of Disbursement

PAC Checking Account Fees

Candidate Name

001

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Transaction ID: SB29.4258

Date of Disbursement

01 / 12 / 2007

Amount of Each Disbursement this Period

8.37

B.

Full Name (Last, First, Middle Initial)

The Chase Manhattan Bank

Mailing Address 221 Park Avenue South

City

NEW York

State

NY

Zip Code

10003

Purpose of Disbursement

PAC Checking Account Fees

Candidate Name

001

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Transaction ID: SB29.4259

Date of Disbursement

02 / 13 / 2007

Amount of Each Disbursement this Period

7.46

C.

Full Name (Last, First, Middle Initial)

The Chase Manhattan Bank

Mailing Address 221 Park Avenue South

City

NEW York

State

NY

Zip Code

10003

Purpose of Disbursement

PAC Checking Account Fees

Candidate Name

001

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Transaction ID: SB29.4260

Date of Disbursement

03 / 13 / 2007

Amount of Each Disbursement this Period

6.35

SUBTOTAL of Disbursements This Page (optional)

22.18

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)

PAGE 21 / 21

<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

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. Full Name (Last, First, Middle Initial) The Chase Manhattan Bank	Transaction ID: SB29.4261 Date of Disbursement																				
Mailing Address 221 Park Avenue South	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	2		2	0	0	7												
City NEW York State NY Zip Code 10003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Checking Account Fees	<table border="1"> <tr> <td colspan="10">6.04</td> </tr> </table>	6.04																			
6.04																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) The Chase Manhattan Bank	Transaction ID: SB29.4262 Date of Disbursement																				
Mailing Address 221 Park Avenue South	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	1		2	0	0	7												
City NEW York State NY Zip Code 10003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Checking Account Fees	<table border="1"> <tr> <td colspan="10">5.71</td> </tr> </table>	5.71																			
5.71																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) The Chase Manhattan Bank	Transaction ID: SB29.4263 Date of Disbursement																				
Mailing Address 221 Park Avenue South	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	3		2	0	0	7												
City NEW York State NY Zip Code 10003	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Checking Account Fees	<table border="1"> <tr> <td colspan="10">4.86</td> </tr> </table>	4.86																			
4.86																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
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Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

16.61

TOTAL This Period (last page this line number only)

38.79