

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 lines

GUARDIAN 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 ZIPCODE

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day **PRE**-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on _____ in the State of _____

- (d) 30-Day **Post**-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 04 01 2010 through 06 30 2010

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 John Hurley

Signature of Treasurer Electronically Filed by John Hurley Date 07 15 2010

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							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

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

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		13212.48
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	15600.90									
(c) Total Receipts (from Line 19)	4551.72	9088.44								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	20152.62	22300.92								
7. Total Disbursements (from Line 31)	9615.09	11763.39								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	10537.53	10537.53								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

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

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	2980.00	4080.00
(ii) Unitemized	1171.72	4608.44
(iii) TOTAL (add Lines 11(a)(i) and (ii)	4151.72	8688.44
(b) Political Party Committees	400.00	400.00
(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)	4551.72	9088.44
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 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))	4551.72	9088.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4551.72	9088.44

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	9500.00	11500.00
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.....	115.09	263.39
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))..	9615.09	11763.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9615.09	11763.39

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	4551.72	9088.44
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4551.72	9088.44
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: (check only one)	PAGE 6 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.	Full Name (Last, First, Middle Initial) Michael Byrne		Date of Receipt
	Mailing Address 206 Schindler Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 27 / 2010
	City	State	Zip Code
	Florham Park	NJ	07932
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5016
Name of Employer Guardian Life Insurance		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 400.00	Employee Contribution

B.	Full Name (Last, First, Middle Initial) Michael Byrne		Date of Receipt
	Mailing Address 206 Schindler Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 25 / 2010
	City	State	Zip Code
	Florham Park	NJ	07932
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5035
Name of Employer Guardian Life Insurance		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 500.00	Employee Contribution

C.	Full Name (Last, First, Middle Initial) Michael Byrne		Date of Receipt
	Mailing Address 206 Schindler Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 25 / 2010
	City	State	Zip Code
	Florham Park	NJ	07932
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5077
Name of Employer Guardian Life Insurance		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 600.00	Employee Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 300.00
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 7 / 20
	<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.	Full Name (Last, First, Middle Initial) John Cifu		Date of Receipt MM / DD / YYYY 05 / 25 / 2010
	Mailing Address 8 Brookside Drive		Transaction ID: SA11AI.5048
	City Goshen	State NY	Zip Code 10924
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer Berkshire Life Insurance Co	Occupation Senior Vice President	Employee Contribution

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00
---	------------------------------------

B.	Full Name (Last, First, Middle Initial) John Cifu		Date of Receipt MM / DD / YYYY 06 / 25 / 2010
	Mailing Address 8 Brookside Drive		Transaction ID: SA11AI.5060
	City Goshen	State NY	Zip Code 10924
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer Berkshire Life Insurance Co	Occupation Senior Vice President	Employee Contribution

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	------------------------------------

C.	Full Name (Last, First, Middle Initial) VINCENT D ADDONA		Date of Receipt MM / DD / YYYY 04 / 27 / 2010
	Mailing Address 7 HANOVER SQ		Transaction ID: SA11AI.5088
	City NY	State NY	Zip Code 11203
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer	Occupation	Employee Contribution

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00
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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 / 20
(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)
VINCENT D ADDONA

Mailing Address 7 HANOVER SQ

City NY State NY Zip Code 11203

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: 05 / 25 / 2010
Transaction ID: SA11AI.5047
 Amount of Each Receipt this Period: 200.00
 Employee Contribution

B. Full Name (Last, First, Middle Initial)
VINCENT D ADDONA

Mailing Address 7 HANOVER SQ

City NY State NY Zip Code 11203

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 06 / 25 / 2010
Transaction ID: SA11AI.5059
 Amount of Each Receipt this Period: 200.00
 Employee Contribution

C. Full Name (Last, First, Middle Initial)
LARRY DIETZ

Mailing Address 7 HANOVER SQUARE

City NY State NY Zip Code 10004

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 25 / 2010
Transaction ID: SA11AI.5045
 Amount of Each Receipt this Period: 50.00
 Employee Contribution

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: PAGE 9 / 20

(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)
LARRY DIETZ

Mailing Address 7 HANOVER SQUARE

City State Zip Code
NY NY 10004

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 25 / 2010

Transaction ID: SA11AI.5057

Amount of Each Receipt this Period

50.00

Employee Contribution

B.

Full Name (Last, First, Middle Initial)
sylvan feldstein

Mailing Address 7 Hanover Square

City State Zip Code
NY NY 10004

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 25 / 2010

Transaction ID: SA11AI.5027

Amount of Each Receipt this Period

50.00

Employee Contribution

C.

Full Name (Last, First, Middle Initial)
sylvan feldstein

Mailing Address 7 Hanover Square

City State Zip Code
NY NY 10004

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 25 / 2010

Transaction ID: SA11AI.5068

Amount of Each Receipt this Period

50.00

Employee Contribution

SUBTOTAL of Receipts This Page (optional) ▶

150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 20
	<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.	Full Name (Last, First, Middle Initial) Alexander Grant	Date of Receipt MM / DD / YYYY 04 / 27 / 2010
	Mailing Address 345 Essex 57 St Apt 16D	Transaction ID: SA11AI.5008
	City State Zip Code New York NY 10022	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Employee Contribution
	Name of Employer Guardian Life Insurance Co Occupation Insurance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00

B.	Full Name (Last, First, Middle Initial) Alexander Grant	Date of Receipt MM / DD / YYYY 05 / 25 / 2010
	Mailing Address 345 Essex 57 St Apt 16D	Transaction ID: SA11AI.5026
	City State Zip Code New York NY 10022	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Employee Contribution
	Name of Employer Guardian Life Insurance Co Occupation Insurance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

C.	Full Name (Last, First, Middle Initial) Alexander Grant	Date of Receipt MM / DD / YYYY 06 / 25 / 2010
	Mailing Address 345 Essex 57 St Apt 16D	Transaction ID: SA11AI.5067
	City State Zip Code New York NY 10022	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Employee Contribution
	Name of Employer Guardian Life Insurance Co Occupation Insurance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00

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 11 / 20
	<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.	Full Name (Last, First, Middle Initial) Thomas Greaney		Date of Receipt MM / DD / YYYY 05 / 25 / 2010		
	Mailing Address 33-3411 Hudson St		Transaction ID: SA11AI.5021		
	City Jersey City	State NJ	Zip Code 07302	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		Employee Contribution		
	Name of Employer Guardian Life Insurance	Occupation Assistant Vice President	Aggregate Year-to-Date 250.00		

B.	Full Name (Last, First, Middle Initial) Thomas Greaney		Date of Receipt MM / DD / YYYY 06 / 25 / 2010		
	Mailing Address 33-3411 Hudson St		Transaction ID: SA11AI.5061		
	City Jersey City	State NJ	Zip Code 07302	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		Employee Contribution		
	Name of Employer Guardian Life Insurance	Occupation Assistant Vice President	Aggregate Year-to-Date 300.00		

C.	Full Name (Last, First, Middle Initial) Brian Keating		Date of Receipt MM / DD / YYYY 04 / 27 / 2010		
	Mailing Address 7 Hanover Square		Transaction ID: SA11AI.5004		
	City NY	State NY	Zip Code 10004	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Employee Contribution		
	Name of Employer	Occupation	Aggregate Year-to-Date 400.00		

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 12 / 20
(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)
 Brian Keating
 Mailing Address 7 Hanover Square
 City State Zip Code
 NY NY 10004
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 5 / 2 0 1 0
Transaction ID: SA11AI.5022
 Amount of Each Receipt this Period
 100.00
 Employee Contribution
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

B. Full Name (Last, First, Middle Initial)
 Brian Keating
 Mailing Address 7 Hanover Square
 City State Zip Code
 NY NY 10004
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 5 / 2 0 1 0
Transaction ID: SA11AI.5063
 Amount of Each Receipt this Period
 100.00
 Employee Contribution
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

C. Full Name (Last, First, Middle Initial)
 Mondo Lee
 Mailing Address 18 Nottingham Rd
 City State Zip Code
 West Orange NJ 07052
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 5 / 2 0 1 0
Transaction ID: SA11AI.5072
 Amount of Each Receipt this Period
 40.00
 Employee Contribution
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Guardian Life Insurance Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

SUBTOTAL of Receipts This Page (optional) ► 240.00
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 / 20
	<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) Dennis Manning	Date of Receipt MM / DD / YYYY 04 / 27 / 2010
	Mailing Address 81 Graenest Ridge Rd	Transaction ID: SA11AI.5005
	City State Zip Code Wilton CT 06897	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Employee Contribution
	Name of Employer Occupation Guardian Life Insurance Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) Dennis Manning	Date of Receipt MM / DD / YYYY 05 / 25 / 2010
	Mailing Address 81 Graenest Ridge Rd	Transaction ID: SA11AI.5023
	City State Zip Code Wilton CT 06897	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Employee Contribution
	Name of Employer Occupation Guardian Life Insurance Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Dennis Manning	Date of Receipt MM / DD / YYYY 06 / 25 / 2010
	Mailing Address 81 Graenest Ridge Rd	Transaction ID: SA11AI.5064
	City State Zip Code Wilton CT 06897	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Employee Contribution
	Name of Employer Occupation Guardian Life Insurance Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

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: PAGE 14 / 20
(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)
 KERRI MANSBERG
 Mailing Address 7 HANOVER SQUARE
 City State Zip Code
 NY NY 10004
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 5 / 2 0 1 0
Transaction ID: SA11AI.5024
 Amount of Each Receipt this Period
 50.00
 Employee Contribution
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

B. Full Name (Last, First, Middle Initial)
 KERRI MANSBERG
 Mailing Address 7 HANOVER SQUARE
 City State Zip Code
 NY NY 10004
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 5 / 2 0 1 0
Transaction ID: SA11AI.5065
 Amount of Each Receipt this Period
 50.00
 Employee Contribution
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

C. Full Name (Last, First, Middle Initial)
 Richard O'Donnel
 Mailing Address 46 Longfellow Lane
 City State Zip Code
 Mahwah NJ 07430
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 5 / 2 0 1 0
Transaction ID: SA11AI.5074
 Amount of Each Receipt this Period
 40.00
 Employee Contribution
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Guardian Life Insurance Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

SUBTOTAL of Receipts This Page (optional) ► 140.00
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 / 20
(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)
 Tracy Rich
 Mailing Address 7 Hanover Square
 City State Zip Code
 NY NY 10004
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 7 / 2 0 1 0
Transaction ID: SA11AI.5007
 Amount of Each Receipt this Period
 100.00
 Employee Contribution
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

B. Full Name (Last, First, Middle Initial)
 Tracy Rich
 Mailing Address 7 Hanover Square
 City State Zip Code
 NY NY 10004
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 5 / 2 0 1 0
Transaction ID: SA11AI.5025
 Amount of Each Receipt this Period
 100.00
 Employee Contribution
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

C. Full Name (Last, First, Middle Initial)
 Tracy Rich
 Mailing Address 7 Hanover Square
 City State Zip Code
 NY NY 10004
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 5 / 2 0 1 0
Transaction ID: SA11AI.5066
 Amount of Each Receipt this Period
 100.00
 Employee Contribution
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

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: PAGE 16 / 20
(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)
RICHARD SCOTT

Mailing Address 7 HANOVER SQUARE

City NY State NY Zip Code 10004

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 04 / 27 / 2010
Transaction ID: SA11AI.5011
Amount of Each Receipt this Period: 100.00
Employee Contribution

B.

Full Name (Last, First, Middle Initial)
RICHARD SCOTT

Mailing Address 7 HANOVER SQUARE

City NY State NY Zip Code 10004

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 05 / 25 / 2010
Transaction ID: SA11AI.5029
Amount of Each Receipt this Period: 100.00
Employee Contribution

C.

Full Name (Last, First, Middle Initial)
RICHARD SCOTT

Mailing Address 7 HANOVER SQUARE

City NY State NY Zip Code 10004

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 06 / 25 / 2010
Transaction ID: SA11AI.5070
Amount of Each Receipt this Period: 100.00
Employee Contribution

SUBTOTAL of Receipts This Page (optional) ► 300.00

TOTAL This Period (last page this line number only) ► 2980.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 20
(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)
CHARLIE DENT FOR CONGRESS

Mailing Address PO Box 442

City	State	Zip Code
Allentown	PA	18105

FEC ID number of contributing federal political committee. **C** C00386847

Name of Employer	Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	0

Transaction ID: SA11B.5111

Amount of Each Receipt this Period

400.00

Cost of rental of Bethlehem cafeteria for Charlie Dent event

SUBTOTAL of Receipts This Page (optional)	400.00
TOTAL This Period (last page this line number only)	400.00

**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)

<p>A. Full Name (Last, First, Middle Initial) Ackerman for congress</p> <p>Mailing Address PO Box 95</p> <p>City Fresh Meadows State NY Zip Code 11365</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name Ackerman for congress</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.5092</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) AMERICAN COMMERCIAL LINES INC. PAC</p> <p>Mailing Address 1701 East Market Street</p> <p>City Jeffersonville State IN Zip Code 47130</p> <p>Purpose of Disbursement Political Contributions</p> <p>Candidate Name AMERICAN COMMERCIAL LINES INC. PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.5096</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) CHARLIE DENT FOR CONGRESS</p> <p>Mailing Address PO Box 442</p> <p>City Allentown State PA Zip Code 18105</p> <p>Purpose of Disbursement Political Contribution</p> <p>Candidate Name CHARLIE DENT FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: PA District: 15</p>	<p>Transaction ID: SB23.5109</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

