GUARDIAN

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VIA CERTIFIED MAIL

Deborah Connolly
Second Vice President
Insurance Operations Counsel

October 12, 2000

Federal Election Commission
999 E. Street NW
Washington, DC 20463

Re: Guardian Life Insurance Co. of America
Political Action Committee
FEC Identification No. C00173393
October 15 Quarterly Report

Gentlemen:

Enclosed is our October 15, 2000 Quarterly Report.

Very truly yours,

Deborah Connolly

Deborah Connolly
2nd Vice President,
Insurance Operations Counsel

Enc.

The Guardian Life Insurance Company of America 7 Hanover Square, New York, NY 10004-2616
tel 212 598 8395 fax 212 919 2692 fax 212 919 2693 e-mail: deborah_connolly@gfc.com

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
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2000 OCT 19 P 1:03

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)

C00173393 091900 P 254
EDWARD K KANE
GUARDIAN LIFE INSURANCE COMPAN
Y OF AMERICA POLITICAL ACTION
7 HANOVER SQUARE
C/O EDWARD KANE
NEW YORK NY 10004

2. FEC IDENTIFICATION NUMBER

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

4. TYPE OF REPORT

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

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____

☐ 30-Day Post-Election Report following the General Election on _____ in the State of _____

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

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 7-1-2000 through 9-30-2000		$ 3993.50
6. (a) Cash on Hand January 1, 2000	$ 2425.57	
(b) Cash on Hand at Beginning of Reporting Period	$ 1986.14	$ 5777.04
(c) Total Receipts (from Line 19)	$ 4411.71	$ 9770.54
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 1064.60	$ 6423.43
7. Total Disbursements (from Line 30)	$ 3347.11	$ 3347.11
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 0	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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

Type or Print Name of Treasurer: Edward K. Kane

Signature of Treasurer: Edward Kane /dk

Date: 10-12-2000

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

FEC FORM 3X
(revised 9/93)

FEOAN088

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

(revised 1/1/91)

NAME OF COMMITTEE: Guardian Life Ins. Co of America Political Action Committee

REPORT COVERING PERIOD FROM 9.1.2000 TO 9.30.2000

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	1972.92	5720.12	11(a)(i)
ii. Unitemized	13.22	56.92	11(a)(ii)
iii. Total (add i and ii) ➤	1986.14	5777.04	11(a)(iii)
b. Political Party Committees	0	0	11(b)
c. Other Political Committees (such as PACs)	0	0	11(c)
d. Total Contributions (add a iii, b and c) ➤	1986.14	5777.04	11(d)
12. Transfers From Affiliated/Other Party Committees	0	0	12
13. All Loans Received	0	0	13
14. Loan Repayments Received	0	0	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0	17
18. Transfers from Nonfederal Account for Joint Activity	0	0	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	1986.14	5777.04	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	1986.14	5777.04	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0	0	21(a)(i)
ii. Non-Federal Share	0	0	21(a)(ii)
b. Other Federal Operating Expenditures	0	0	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	0	0	21(c)
22. Transfers to Affiliated/Other Party Committees	0	0	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	1064.60	5923.43	23
24. Independent Expenditures (use Schedule E)	0	0	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	25
26. Loan Repayments Made	0	0	26
27. Loans Made	0	0	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0	0	28(a)
b. Political Party Committees	0	0	28(b)
c. Other Political Committees (such as PACs)	0	0	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	0	0	28(d)
29. Other Disbursements	0	500.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	1064.60	6423.43	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	1064.60	6423.43	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	1986.14	7763.18	32
33. Total Contribution Refunds (from line 28d)	0	0	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	1986.14	7763.18	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0	0	35
36. Offsets to Operating Expenditures (from line 15)	0	0	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0	0	37

FEC/AN090

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 4

FOR LINE NUMBER 11a1

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

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Francis Bauer, 404 Eve Court, Bethlehem, Pennsylvania 18014 — Receipt For: Primary / General / Other (specify):	Employer: The Guardian Life Ins. Co. of America; Occupation: Director / Info Tech; Aggregate Year-to-Date: $ 120	semi monthly payroll deduction	$45 ($7.50 per pay period)
B. James Brancrentner, 942 Wafford Lane, Bethlehem, Pennsylvania 18017 — Receipt For: Primary / General / Other (specify):	Employer: The Guardian Life Ins Co of America; Occupation: Sr. Vice President; Aggregate Year-to-Date: $ 173.92	semi monthly payroll deduction	$65.22 ($10.87 per pay period)
C. Michael Berno, 552 Wilson Avenue, Glen Ellyn, Illinois 60137 — Receipt For: Primary / General / Other (specify):	Employer: The Guardian Life Ins Co of America; Occupation: Sales Director; Aggregate Year-to-Date: $ 160	semi monthly payroll deduction	$60.00 ($10 per pay period)
D. John Cifun, 8 Brookside Drive, Goshen, New York 10924 — Receipt For: Primary / General / Other (specify):	Employer: The Guardian Life Ins. Co. of America; Occupation: VP + Controller; Aggregate Year-to-Date: $ 120	semi monthly payroll deduction	$45.00 ($7.50 per pay period)
E. Armand de Palo, 228 Aster Street, Massapequa Park, New York 11762 — Receipt For: Primary / General / Other (specify):	Employer: The Guardian Life Ins. Co. of America; Occupation: Sr. Vice President; Aggregate Year-to-Date: $ 240	semi monthly payroll deduction	$90 ($15 per pay period)
F. Sanford Hermann, 14 Ranlagh Trail, Harrison, New York 10528 — Receipt For: Primary / General / Other (specify):	Employer: The Guardian Life Ins. Co. of America; Occupation: Vice President; Aggregate Year-to-Date: $ 210.08	semi monthly payroll deduction	$78.78 ($13.13 per pay period)
G. Full Name, Mailing Address and ZIP Code — Receipt For: Primary / General / Other (specify):	Name of Employer; Occupation; Aggregate Year-to-Date: $	Date (month, day, year)	Amount of Each Receipt this Period

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

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

FE9AN103

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 4

FOR LINE NUMBER 11a i

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

NAME OF COMMITTEE (In Full): Guardian Life Insurance Co. of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John Hurley 55 Meritoria Drive East Williston, New York 11596 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 120	semi monthly payroll deduction	$45 ($7.50 per pay period)
B. Full Name, Mailing Address and ZIP Code Linda Altschuler 131 Fifth Avenue New York, New York 10003 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: 2nd Vice President Aggregate Year-to-Date > $ 300	semi monthly payroll deduction	$112.50 ($18.75 per pay period)
C. Full Name, Mailing Address and ZIP Code Douglas Kramer 23 Brooke Club Ossining, New York 10562 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: Sr. Vice President Aggregate Year-to-Date > $ 140	semi monthly payroll deduction	$40.00 ($10.00 per pay period)
D. Full Name, Mailing Address and ZIP Code Terence Lynch 22 Reynen Court Ridgewood, New Jersey 07450 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 175.20	semi monthly payroll deduction	$65.70 ($10.95 per pay period)
E. Full Name, Mailing Address and ZIP Code Dennis Manning 81 Greenest Ridge Road Wilton, Connecticut 06897 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: Exec. Vice President Aggregate Year-to-Date > $ 600	semi monthly payroll deduction	$225 ($37.50 per pay period)
F. Full Name, Mailing Address and ZIP Code Mary Ann Masters 13 Hazel Avenue Edison, New Jersey 08820 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins Co of America Occupation: 2nd Vice President Aggregate Year-to-Date > $ 180	semi monthly payroll deduction	$67.50 ($11.25 per pay period)
G. Full Name, Mailing Address and ZIP Code Eileen McDonnell 481 First Street Oradell, New Jersey 07649 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins Co of America Occupation: Sr. Vice President Aggregate Year-to-Date > $ 240	semi monthly payroll deduction	$90 ($15.00 per pay period)

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

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

FEC/AN099

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11a

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

NAME OF COMMITTEE (In Full)
Guardian Life Ins. Co. of America Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. John O'Callaghan 405 St. Ives Drive Severna Park, Maryland 21242 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Sales Director Aggregate Year-to-Date > $ 240	semi monthly payroll deduction	$90 ($15.00 per pay period)
B. Francis Quinn, Jr. 304 Salem Avenue Spring Lake, New Jersey 07762 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 276	semi monthly payroll deduction	$103.50 ($17.25 per pay period)
C. Joseph Sargent 90 Lancelot Drive Fairfield, Connecticut 06430 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: President + CEO Aggregate Year-to-Date > $ 520	semi monthly payroll deduction	$200 ($40 per pay period)
D. Stephen Scarpati 1333 McKell Street Yorktown Heights, New York 10593 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins Co of America Occupation: Sr. Vice President Aggregate Year-to-Date > $ 240	semi monthly payroll deduction	$90 ($15 per pay period)
E. Henry Slattery 42 Harbour Park Drive Centerport, New York 11721 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 180	semi monthly payroll deduction	$67.50 ($11.25 per pay period)
F. Debra Smith 55 W 14 St. #12D New York, New York 10011 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 240	semi monthly payroll deduction	$90 ($15 per pay period)
G. Franklin Sorrentino 3564 Verona Place Seaford, New York 11783 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins Co of America Occupation: Sr. Vice President Aggregate Year-to-Date > $ 300	semi monthly payroll deduction	$112.50 ($18.75 per pay period)

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

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 4 OF 4

FOR LINE NUMBER (11a)

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

NAME OF COMMITTEE (In Full): Guardian Life Insurance Co. of America Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Jeremy Starr 382 Central Park West #10W New York, New York 10025 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins Co of America Occupation: Vice President Aggregate Year-to-Date > $ 312	semi monthly payroll deduction	$117 ($19.50 per pay period)
B. Gordon Wylie 459 Fort Hill Road Scarsdale, New York 10583 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Guardian Life Ins. Co. of America Occupation: Senior Counsel Aggregate Year-to-Date > $ 193.92	semi monthly payroll deduction	$72.72 ($12.12 per pay period)
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period

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

TOTAL This Period (last page this line number only) 1972.92

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Guardian Life Ins. Co. of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Committee to Re-Elect Nydia Velázquez 436 New Jersey Ave. SE Washington, D.C. 20003	campaign contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8.2.2000	500.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Rangel for Congress 2000 Manhattanville Station Box 5577 New York, New York 10027	campaign contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	8.24.2000	500.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Chase Bank 221 Park Ave So. New York, New York 10003	PAC bank fee Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	various	64.60
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

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

TOTAL This Period (last page this line number only) 1064.60

FEDA/NC99

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED (R/C) 10-12-00
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

JMD
PREPARER

10-19-00
DATE PREPARED

(6/2000)