

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** 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 2011 through 03 31 2011

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 09 20 2011

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

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	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		19161.17
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	19161.17									
(c) Total Receipts (from Line 19)	21979.72	21979.72								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	41140.89	41140.89								
7. Total Disbursements (from Line 31)	16981.78	16981.78								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	24159.11	24159.11								
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**

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)	18950.00	18950.00
(ii) Unitemized	3029.72	3029.72
(iii) TOTAL (add Lines 11(a)(i) and (ii)	21979.72	21979.72
(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)	21979.72	21979.72
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))	21979.72	21979.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	21979.72	21979.72

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.....	16863.05	16863.05
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.....	118.73	118.73
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))..	16981.78	16981.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16981.78	16981.78

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)	21979.72	21979.72
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21979.72	21979.72
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 / 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A.	Full Name (Last, First, Middle Initial) PETER ATWATER	Date of Receipt MM / DD / YYYY 03 / 31 / 2011
	Mailing Address 7 HANOVER SQUARE	Transaction ID: PR31711141852
	City State Zip Code NEW YORK NY 10004	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$1000.00 Semi-Monthly)
Name of Employer Guardian Life Insurance Co.	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) ROBERT BROATCH	Date of Receipt MM / DD / YYYY 03 / 31 / 2011
	Mailing Address 366 MOUNTAIN AVE	Transaction ID: PR31711231852
	City State Zip Code RIDGEWOOD NJ 07450	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$1500.00 Semi-Monthly)
Name of Employer Guardian Life Insurance Co.	Occupation Executive Vice President of Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

C.	Full Name (Last, First, Middle Initial) MICHAEL BYRNE	Date of Receipt MM / DD / YYYY 03 / 31 / 2011
	Mailing Address 206 SCHINDLER DRIVE	Transaction ID: PR31711271852
	City State Zip Code FLORHAM PARK NJ 07932	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$100.00 Semi-Monthly)
Name of Employer Guardian Life Insurance	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	2800.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 16
	<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) VINCENT D ADDONA		Date of Receipt
	Mailing Address 7 HANOVER SQUARE		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	NEW YORK	NY	10004
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Guardian Life Insurance Co		Occupation AGENT	Transaction ID: PR31711301852
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="600.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="600.00"/>
		P/R Deduction (\$200.00 Se-mi-Monthly)	

B.	Full Name (Last, First, Middle Initial) SYLVAN FELDSTEIN		Date of Receipt
	Mailing Address 7 HANOVER SQUARE		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	NEW YORK	NY	10004
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Guardian Life Insurance Co		Occupation Director	Transaction ID: PR31711371852
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="250.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="250.00"/>
		P/R Deduction (\$150.00 Se-mi-Monthly)	

C.	Full Name (Last, First, Middle Initial) ALEXANDER GRANT		Date of Receipt
	Mailing Address 345 ESSEX 57 ST, APT 16D Apt 16D		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	NEW YORK	NY	10022
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Guardian Life Insurance Co		Occupation Insurance	Transaction ID: PR31711451852
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="300.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="300.00"/>
		P/R Deduction (\$100.00 Se-mi-Monthly)	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1150.00"/>
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 8 / 16
	<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) DOUGLAS GREENE	Date of Receipt MM / DD / YYYY 03 / 31 / 2011
	Mailing Address 7 HANOVER SQUARE	Transaction ID: PR31711481852
	City State Zip Code NEW YORK NY 10004	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$100.00 Semi-Monthly)
Name of Employer Guardian Life Insurance Co.	Occupation 2nd Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) LISA POWELL	Date of Receipt MM / DD / YYYY 03 / 31 / 2011
	Mailing Address 3709 BARTON CREEK BLVD	Transaction ID: PR31711511852
	City State Zip Code AUSTIN TX 78735	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$250.00 Semi-Monthly)
Name of Employer Guardian Life Insurance Co.	Occupation Vice President BRC for Advanced Market	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) BRIAN KEATING	Date of Receipt MM / DD / YYYY 03 / 31 / 2011
	Mailing Address 7 HANOVER SQUARE	Transaction ID: PR31711581852
	City State Zip Code NEW YORK NY 10004	Amount of Each Receipt this Period 1300.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$100.00 Semi-Monthly)
Name of Employer Guardian Life Insurance Co.	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional)	1850.00
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 / 16
(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)
DENNIS MANNING
 Mailing Address **81 GRAENEST RIDGE RD**
 City **WILTON** State **CT** Zip Code **06897**
 Date of Receipt **03 / 31 / 2011**
Transaction ID: PR31711641852
 Amount of Each Receipt this Period **1300.00**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **Guardian Life Insurance** Occupation **Chief Executive Officer**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date **1300.00**
 P/R Deduction (\$100.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
DEANNA MULLIGAN
 Mailing Address **126 DINGLE RIDGE RD**
 City **NORTH SALEM** State **NY** Zip Code **10560**
 Date of Receipt **03 / 31 / 2011**
Transaction ID: PR31711701852
 Amount of Each Receipt this Period **5000.00**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **Guardian Life Insurance Co.** Occupation **Executive Vice President**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date **5000.00**
 P/R Deduction (\$5000.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
MARK MURPHY
 Mailing Address **4 BECKER FARM RD**
 City **ROSELAND** State **NJ** Zip Code **07068**
 Date of Receipt **03 / 31 / 2011**
Transaction ID: PR31711711852
 Amount of Each Receipt this Period **600.00**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **Guardian Life Insurance Co.** Occupation **AGENT**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date **600.00**
 P/R Deduction (\$200.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ► **6900.00**
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 / 16
	<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) AMY OSHINKSY	Date of Receipt MM / DD / YYYY 03 / 31 / 2011
	Mailing Address 7 HANOVER SQUARE	Transaction ID: PR31711751852
	City State Zip Code NEW YORK NY 10004	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$1000.00 Semi-Monthly)
Name of Employer Guardian Life Insurance Co.	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) TRACY RICH	Date of Receipt MM / DD / YYYY 03 / 31 / 2011
	Mailing Address 7 HANOVER SQUARE	Transaction ID: PR31711811852
	City State Zip Code NEW YORK NY 10004	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$150.00 Se-mi-Monthly)
Name of Employer Guardian Life Insurance Co.	Occupation Executive Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) RICHARD SCOTT	Date of Receipt MM / DD / YYYY 03 / 31 / 2011
	Mailing Address 7 HANOVER SQUARE	Transaction ID: PR31711841852
	City State Zip Code NEW YORK NY 10004	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$100.00 Se-mi-Monthly)
Name of Employer Guardian Life Insurance Co.	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	1650.00
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 11 / 16
(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)
JULIE CHIN
 Mailing Address **7 HANOVER SQUARE**
 City **NEW YORK** State **NY** Zip Code **10004**
 Date of Receipt **03 / 31 / 2011**
Transaction ID: PR31884901852
 Amount of Each Receipt this Period **500.00**
 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**
 P/R Deduction (\$500.00 Se-mi-Monthly)

B. Full Name (Last, First, Middle Initial)
JESS GELLER
 Mailing Address **7 HANOVER SQUARE**
 City **NEW YORK** State **NY** Zip Code **10004**
 Date of Receipt **03 / 31 / 2011**
Transaction ID: PR31884911852
 Amount of Each Receipt this Period **500.00**
 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**
 P/R Deduction (\$500.00 Se-mi-Monthly)

C. Full Name (Last, First, Middle Initial)
MICHAEL CEFOLE
 Mailing Address **7 HANOVER SQUARE**
 City **NEW YORK** State **NY** Zip Code **10004**
 Date of Receipt **03 / 31 / 2011**
Transaction ID: PR31884921852
 Amount of Each Receipt this Period **2000.00**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date **2000.00**
 P/R Deduction (\$2000.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**
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 / 16

(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)
DONALD SULLIVAN

Mailing Address 7 HANOVER SQUARE

City State Zip Code
NEW YORK NY 10004

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2011

Transaction ID: PR31884941852

Amount of Each Receipt this Period

1000.00

P/R Deduction (\$1000.00 Semi-Monthly)

B.

Full Name (Last, First, Middle Initial)
SEAN QUINN

Mailing Address 700 SOUTH STREET

City State Zip Code
PITTSFIELD MA 01201

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
03 / 31 / 2011

Transaction ID: PR31884951852

Amount of Each Receipt this Period

300.00

P/R Deduction (\$300.00 Se-mi-Monthly)

C.

Full Name (Last, First, Middle Initial)
OLEG GURVITS

Mailing Address 7 HANOVER SQUARE

City State Zip Code
NEW YORK NY 10004

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2011

Transaction ID: PR31884971852

Amount of Each Receipt this Period

300.00

P/R Deduction (\$300.00 Se-mi-Monthly)

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

18950.00

**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)

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<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) AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> 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) ▼	Transaction ID: 1220873 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 5000.00
B.	Full Name (Last, First, Middle Initial) Charlie Dent For Congress <hr/> Mailing Address PO Box 442 <hr/> City State Zip Code Allentown PA 18105 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. Charles Dent <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1220874 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) Dave Camp For Congress <hr/> Mailing Address 5915 Eastman Avenue Suite 100 <hr/> City State Zip Code Midland MI 48640 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. David Camp <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1220875 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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

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

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FOR LINE NUMBER:
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<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) Friends Of Joe Pitts	Transaction ID: 1220876 Date of Disbursement
	Mailing Address PO Box 775	<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2011"/>
	City Unionville State PA Zip Code 19375	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. Joseph R. Pitts	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 16	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends Of Joe Pitts	Transaction ID: 1220877 Date of Disbursement
	Mailing Address PO Box 775	<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
	City Unionville State PA Zip Code 19375	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. Joseph R. Pitts	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 16	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends Of Max Baucus	Transaction ID: 1220878 Date of Disbursement
	Mailing Address PO Box 586	<input type="text" value="02"/> / <input type="text" value="22"/> / <input type="text" value="2011"/>
	City Helena State MT Zip Code 59624	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Sen. Max Baucus	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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Detailed Summary Page

FOR LINE NUMBER:
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<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) Gillibrand For Senate	Transaction ID: 1220879 Date of Disbursement 03 / 01 / 2011
	Mailing Address 236 Massachusetts Ave Suite 110	Amount of Each Disbursement this Period 2500.00
	City Washington State DC Zip Code 20002	011 Category/ Type
	Purpose of Disbursement Candidate Name Ms. Kirsten Gillibrand	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Food Service Congressman Dent Breakfast Event
B.	Full Name (Last, First, Middle Initial) Guckenheimer Food Service	Transaction ID: 1220881 Date of Disbursement 02 / 10 / 2011
	Mailing Address 3900 Burgess Place	Amount of Each Disbursement this Period 363.05
	City Bethlehem State PA Zip Code 18017	011 Category/ Type
	Purpose of Disbursement Candidate Name Mr. Charles Dent	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Larson For Congress
C.	Full Name (Last, First, Middle Initial) Larson For Congress	Transaction ID: 1220990 Date of Disbursement 03 / 25 / 2011
	Mailing Address PO Box 479	Amount of Each Disbursement this Period 1000.00
	City Glastonbury State CT Zip Code 06033	011 Category/ Type
	Purpose of Disbursement Candidate Name Rep. John B. Larson	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 01	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

3863.05

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

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

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<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) Ribble For Congress Mailing Address PO Box 7200 City Appleton State WI Zip Code 54912 Purpose of Disbursement Candidate Name Rep. Reid J. Ribble Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1221128 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) Upton For All Of Us Mailing Address P.O. Box 490 City St. Joseph State MI Zip Code 49085 Purpose of Disbursement Candidate Name Mr. Frederick Upton Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 06 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1221129 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 1 1
	Amount of Each Disbursement this Period 2000.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ►

3000.00

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

16863.05