GUARDIAN

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2000 DEC 11 P 2:15

Deborah Connolly
Second Vice President
Insurance Operations Counsel

VIA CERTIFIED MAIL

December 7, 2000

Federal Election Commission
999 E Street NW
Washington, DC 20463

RE: Guardian Life Insurance Co. of America
Political Action Committee
FEC ID # C00173393
30 Day Post Election Report

Gentlemen:

Enclosed is our 30 Day Post Election Report.

Very truly yours,

Deborah Connolly

Deborah Connolly
Second Vice President,
Insurance Operations Counsel

DC/fap
Enc.

The Guardian Life Insurance Company of America 7 Hanover Square, New York, NY 10004-2616
tel: 212.598.8395 fax: 212.919.2693 fax: 212.919.2693 e-mail: deborah_connolly@glic.com

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

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2000 DEC 11 P 2:15

USE FEC MAILING LABEL OR TYPE OR PRINT

C00173393 102700 P
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. IS THIS REPORT AN AMENDMENT? ☐ YES ☐ NO

4. TYPE OF REPORT

☐ 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)

☐ 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 _____
☐ Termination Report

This report contains activity for ☐ Primary Election ☑ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 10-19-2000 through 11-27-2000		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	1290.76	7067.80
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	1290.76	7067.80
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	542.80	7466.23
(b) Total Offsets to Operating Expenditures (from Line 14)	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	542.80	7466.23
8. Cash on Hand at Close of Reporting Period (from Line 27)	3595.07	
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)	0	

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

Date: 12-6-2000

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 3
(revised 4/87)

FE0RN098

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full): Guardian Life Ins. Co. of America Political Action Committee

Report Covering the Period: From: 10-19-2000 To: 11-27-2000

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)	1295.28		11(a)(i)
(ii) Unitemized	5.48		11(a)(ii)
(iii) Total of contributions from individuals	1290.76	7067.80	11(a)(iii)
(b) Political Party Committees	0	0	11(b)
(c) Other Political Committees (such as PACs)	0	0	11(c)
(d) The Candidate	0	0	11(d)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	1290.76	7067.80	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES			12
13. LOANS:			
(a) Made or Guaranteed by the Candidate	0	0	13(a)
(b) All Other Loans	0	0	13(b)
(c) TOTAL LOANS (add 13(a) and (b))	0	0	13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	0	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0	0	15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	1290.76	7067.80	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES	42.80	236.20	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	500.00	6730.03	18
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	0	0	19(a)
(b) Of All Other Loans	0	0	19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	0	0	19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	0	0	20(a)
(b) Political Party Committees	0	0	20(b)
(c) Other Political Committees (such as PACs)	0	0	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	0	0	20(d)
21. OTHER DISBURSEMENTS	0	500.00	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	542.80	7466.23	22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	$ 2847.11	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	$ 1290.76	24
25. SUBTOTAL (add Line 23 and Line 24)	$ 4137.87	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	$ 542.80	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	$ 3595.07	27

FEC4A(Rev)

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	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 / Trips Tech Aggregate Year-to-Date > $ 150	semi monthly payroll deduction	$30.00 ($7.50 per pay period)
B. James Braungeuther 942 Wafford Lane Bethlehem, Pennsylvania 18017 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: The Guardian Life Ins. Co. of America Occupation: 2nd Vice President Aggregate Year-to-Date > $ 217.40	semi monthly payroll deduction	$43.48 ($10.87 per pay period)
C. Michael Byrne 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 > $ 200	semi monthly payroll deduction	$40.00 ($10.00 per pay period)
D. John Cifu 8 Brookside Drive Goshen, New York 10924 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 150	semi monthly payroll deduction	$30.00 ($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 > $ 285	semi monthly payroll deduction	$45.00 ($15.00 per pay period)
F. Sanford Herman 465 Fulling Mill Lane Fairfield, Connecticut 06430 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 262.60	semi monthly payroll deduction	$52.52 ($13.13 per pay period)
G. John Hurley 55 Meritoria Drive East Williston, New York 11596 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 150	semi monthly payroll deduction	$30.00 ($7.50 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 2 OF 4

FOR LINE NUMBER 11a

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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	Date (month, day, year)	Amount of Each Receipt this Period
A. Linda Ilkowitz, 131 Fifth Avenue, New York, New York 10003 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America / 2nd Vice President — Aggregate Year-to-Date > $ 775	semi monthly payroll deduction	$75.00 ($18.75 per pay period)
B. Douglas Kramer, 73 Brooke Club, Ossining, New York 10562 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America / Sr. Vice President — Aggregate Year-to-Date > $ 780	semi monthly payroll deduction	$40.00 ($10.00 per pay period)
C. Terence Lynch, 22 Reynen Court, Ridgewood, New Jersey 07450 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America / Vice President — Aggregate Year-to-Date > $ 219	semi monthly payroll deduction	$43.80 ($10.95 per pay period)
D. Dennis Manning, 81 Graenest Ridge Road, Wilton, Connecticut 06897 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America / Exec. Vice President — Aggregate Year-to-Date > $ 750	semi monthly payroll deduction	$150.00 ($37.50 per pay period)
E. Mary Ann Masters, 13 Hazel Avenue, Edison, New Jersey 08820 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America / 2nd Vice President — Aggregate Year-to-Date > $ 225	semi monthly payroll deduction	$45.00 ($11.25 per pay period)
F. Eileen Mc Donnell, 481 First Street, Oradell, New Jersey 07649 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America / Sr. Vice President — Aggregate Year-to-Date > $ 285	semi monthly payroll deduction	$45.00 ($15.00 per pay period)
G. John O' Callaghan, 405 St. Ives Drive, Severna Park, Maryland 21242 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America / Sales Director — Aggregate Year-to-Date > $ 310	semi monthly payroll deduction	$60.00 ($15.00 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 3 OF 4

FOR LINE NUMBER 11a i

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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	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Francis Quinn, Jr. 304 Salem Avenue Spring Lake, New Jersey 07762 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 345	semi monthly payroll deduction	$69.00 ($17.25 per pay period)
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Sargent 90 Lancelot Drive Fairfield, Connecticut 06430 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: President + CEO Aggregate Year-to-Date > $ 640	semi monthly payroll deductions	$120.00 ($40.00 per pay period)
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Stephen Scarpati 1333 McKell Street Yorktown Heights, New York 10593 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: Sr. Vice President Aggregate Year-to-Date > $ 300	semi monthly payroll deductions	$60.00 ($15.00 per pay period)
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Henry Slattery 42 Harbour Park Drive Centerport, New York 11721 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 225	semi monthly payroll deduction	$45.00 ($11.25 per pay period)
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Debra Smith 55 W 14th St. #12D New York, New York 10011 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 300	semi monthly payroll deductions	$60.00 ($15.00 per pay period)
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Franklin E. Sorrentino 3564 Verona Place Seaford, New York 11783 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: Sr. Vice President Aggregate Year-to-Date > $ 375	semi monthly payroll deductions	$75.00 ($18.75 per pay period)
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jeremy Starr 382 Central Park West #10W New York, New York 10025 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Guardian Life Ins. Co. of America Occupation: Vice President Aggregate Year-to-Date > $ 390	semi monthly payroll deductions	$78.00 ($19.50 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

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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	Date (month, day, year)	Amount of Each Receipt this Period
A. Jordon 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 > $ 242.40	semi monthly payroll deduction	$48.48 ($12.12 per pay period)
B. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer; Occupation; Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer; Occupation; Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer; Occupation; Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer; Occupation; Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer; Occupation; Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer; Occupation; Aggregate Year-to-Date > $		

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

TOTAL This Period (last page this line number only) 1285.28

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE OF
	FOR LINE NUMBER

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Nelson 2000 301 4th Street NE, Suite 201 Washington, DC 20002	Campaign contribution	10-24-2000	500.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Chase Bank 221 Park Ave So. New York, New York 10003	PAC bank fees	Various	42.80
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**

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

TOTAL This Period (last page this line number only) 542.80

EGAN/090

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) 12-7-00
☐	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	

Jmjs
PREPARER

12-11-00
DATE PREPARED

(6/2000)