PAGE 1/5

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. The Guardian Super PAC 2140 Three M Trail ADDRESS (number and street) (Check if address is changed) DeLand 32720 FL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS gwildercpa@hotmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 01 2021 C00797084 FEC IDENTIFICATION NUMBER > 3. IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Wilder, Gregory, B,, Type or Print Name of Treasurer Wilder, Gregory, B,, [Electronically Filed] 12 10 2021 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

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	orm 1 (Revised 02/2009) COMMITTEE	Page 2
	e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		_
(d)		Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nar	ne	
The Guardian	Super PAC	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representa	tive, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STAT	E ZIP CODE
Relationship: Connect	ed Organization Affiliated Committee Joint Fundraising Repres	sentative Leadership PAC Sponsor
. Custodian of Records: Id books and records.	entify by name, address (phone number optional) and position of the	he person in possession of committee
Wilder, C	Gregory, B, ,	
Mailing Address	2140 Three M Trail	
Mailing Address		
	DeLand	32720
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	954 - 328 - 2425
B. Treasurer: List the name a any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the commi assistant treasurer).	ittee; and the name and address of
Full Name Wilder, G	eregory, B, ,	
Mailing Address	2140 Three M Trail	
	DeLand FL	32720
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	954 - 328 - 2425

FEC For	m 1 (Revised 02/2009)	Page 4
Full Name of Designated	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other safety deposit be Name of Bank,		ds accounts, rents
safety deposit be	Depository, etc. Bank of America ,230 N Woodland Blvd	ds accounts, rents
safety deposit be Name of Bank,	Depository, etc. Bank of America ,230 N Woodland Blvd	ds accounts, rents
safety deposit be Name of Bank,	Depository, etc. Bank of America ,230 N Woodland Blvd	ds accounts, rents
safety deposit be Name of Bank,	Depository, etc. Bank of America 230 N Woodland Blvd DeLand FL 32720	ds accounts, rents
safety deposit be Name of Bank,	Depository, etc. Bank of America 230 N Woodland Blvd DeLand CITY STATE	
safety deposit be Name of Bank, Mailing Address	Depository, etc. Bank of America 230 N Woodland Blvd DeLand CITY STATE Depository, etc.	ZIP CODE
safety deposit be Name of Bank, Mailing Address	Depository, etc. Bank of America 230 N Woodland Blvd DeLand CITY STATE Depository, etc.	ZIP CODE
safety deposit be Name of Bank, Mailing Address	Depository, etc. Bank of America 230 N Woodland Blvd DeLand CITY STATE Depository, etc.	ZIP CODE
safety deposit be Name of Bank, Mailing Address	Depository, etc. Bank of America 230 N Woodland Blvd DeLand CITY STATE Depository, etc.	ZIP CODE
safety deposit be Name of Bank, Mailing Address	Depository, etc. Bank of America 230 N Woodland Blvd DeLand CITY STATE Depository, etc.	ZIP CODE

: 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: