

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation OKLAHOMANS FOR A CONSERVATIVE FUTURE INC		3. FEC Identification Number C C90014739
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 4 NE 10TH STREET #427		
(c) City, State and ZIP Code OKLAHOMA CITY OK 73104		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report 24-Hour Report
- October 15 Quarterly Report 48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment? No Yes, it amends the report filed on / /

5. COVERING PERIOD: FROM / / THROUGH / /

6. TOTAL CONTRIBUTIONS.....

7. TOTAL INDEPENDENT EXPENDITURES

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
ELIZABETH BEACHAM	<i>ELIZABETH BEACHAM</i>	06/19/2014

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

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
OKLAHOMANS FOR A CONSERVATIVE FUTURE INC

Full Name (Last, First, Middle Initial) of Payee MEDIA AD VENTURES, INC.		Date of Public Distribution/Dissemination 06 / 18 / 2014	
Mailing Address 8136 OLD KEENE MILL ROAD SUITE A-300		Amount 65000.00	
City SPRINGFIELD	State VA	Zip Code 22152	Transaction ID : F57.4167
Purpose of Expenditure RADIO AD BUY; ALSO IN SUPPORT OF SHANNON		Category/Type	Office Sought: <input type="checkbox"/> House State: OK <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JAMES PAUL LANKFORD		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1290444.80		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SHINE CREATIVE, LLC		Date of Public Distribution/Dissemination 06 / 18 / 2014	
Mailing Address 1220 L ST NW SUITE 100-455		Amount 1500.00	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : F57.4166
Purpose of Expenditure RADIO AD PRODUCTION; ALSO IN SUPPORT OF SHANNON		Category/Type	Office Sought: <input type="checkbox"/> House State: OK <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JAMES PAUL LANKFORD		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1291944.80		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee TALENT PAYMASTER, INC.		Date of Public Distribution/Dissemination 06 / 18 / 2014	
Mailing Address 4905 DEL RAY AVENUE SUITE 401		Amount 726.43	
City BETHESDA	State MD	Zip Code 20814	Transaction ID : F57.4170
Purpose of Expenditure RADIO AD PRODUCTION; ALSO IN SUPPORT OF SHANNON		Category/Type	Office Sought: <input type="checkbox"/> House State: OK <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JAMES PAUL LANKFORD		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1292671.23		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	67226.43
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	67226.43