

# 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 <b>CITIZENLINK (formerly FOCUS ON THE FAMILY ACTION)</b>		3. FEC Identification Number <b>C C90008186</b>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 8655 EXPLORER DRIVE		
(c) City, State and ZIP Code COLORADO SPRINGS CO 80920		
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  /  /  10 / 21 / 2014  
THROUGH  /  /  10 / 22 / 2014

6. TOTAL CONTRIBUTIONS.....  600000.00  
7. TOTAL INDEPENDENT EXPENDITURES .....  247025.18

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.

<b>TYPE OR PRINT NAME OF PERSON COMPLETING FORM</b>	<b>SIGNATURE</b>	<b>DATE</b>
Rich Caldwell	<i>Rich Caldwell</i>	10/22/2014
	<i>[Electronically Filed]</i>	

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-A ITEMIZED RECEIPTS

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 FILER (In Full)  
CITIZENLINK (formerly FOCUS ON THE FAMILY ACTION)

<b>A. Full Name (Last, First, Middle Initial)</b> Freedom Partners Chamber of Commerce, Inc.			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2014		
Mailing Address 2200 Wilson Blvd. Ste. 102-533			<b>Transaction ID : F56.000001</b>		
City	State	Zip Code	Amount of Each Receipt this Period		
Arlington	VA	22201	600000.00		
FEC ID number of contributing federal political committee.			C		
Name of Employer			Occupation		

<b>B. Full Name (Last, First, Middle Initial)</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y		
Mailing Address			Amount of Each Receipt this Period		
City	State	Zip Code	C		
FEC ID number of contributing federal political committee.			C		
Name of Employer			Occupation		

<b>C. Full Name (Last, First, Middle Initial)</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y		
Mailing Address			Amount of Each Receipt this Period		
City	State	Zip Code	C		
FEC ID number of contributing federal political committee.			C		
Name of Employer			Occupation		

<b>D. Full Name (Last, First, Middle Initial)</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y		
Mailing Address			Amount of Each Receipt this Period		
City	State	Zip Code	C		
FEC ID number of contributing federal political committee.			C		
Name of Employer			Occupation		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	600000.00
<b>TOTAL</b> This Period (last page carry total to Line 6) .....	600000.00

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
CITIZENLINK (formerly FOCUS ON THE FAMILY ACTION)

Full Name (Last, First, Middle Initial) of Payee Majority Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2014	
Mailing Address 135 Professional Drive, Suite 104		Amount 88611.81	
City State Zip Code Ponte Vedra Beach, FL 32082	Category/Type 004	Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Purpose of Expenditure Direct mail (also opposes Kay Hagan)		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: Thom Tillis		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 88611.81			

Transaction ID : F57.000001

Full Name (Last, First, Middle Initial) of Payee Majority Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2014	
Mailing Address 135 Professional Drive, Suite 104		Amount 17460.08	
City State Zip Code Ponte Vedra Beach, FL 32082	Category/Type 004	Office Sought: <input type="checkbox"/> House State: CO <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Purpose of Expenditure Direct mail (also opposes Mark Udall)		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: Cory Gardner		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 69581.63			

Transaction ID : F57.000002

Full Name (Last, First, Middle Initial) of Payee Majority Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2014	
Mailing Address 135 Professional Drive, Suite 104		Amount 21400.76	
City State Zip Code Ponte Vedra Beach, FL 32082	Category/Type 004	Office Sought: <input type="checkbox"/> House State: AR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Purpose of Expenditure Direct mail (also opposes Mark Pryor)		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: Tom Cotton		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 71039.86			

Transaction ID : F57.000003

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	127472.65
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
CITIZENLINK (formerly FOCUS ON THE FAMILY ACTION)

Full Name (Last, First, Middle Initial) of Payee Majority Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2014	
Mailing Address 135 Professional Drive, Suite 104		Amount 13593.83	
City State Zip Code Ponte Vedra Beach FL 32082	Transaction ID : F57.000004		
Purpose of Expenditure Direct mail (also opposes Bruce Braley)	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Joni Ernst		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		13593.83	

Full Name (Last, First, Middle Initial) of Payee Majority Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2014	
Mailing Address 135 Professional Drive, Suite 104		Amount 44366.25	
City State Zip Code Ponte Vedra Beach FL 32082	Transaction ID : F57.000005		
Purpose of Expenditure Direct mail (also opposes Mary Landrieu)	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: LA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Bill Cassidy		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		44366.25	

Full Name (Last, First, Middle Initial) of Payee Majority Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2014	
Mailing Address 135 Professional Drive, Suite 104		Amount 30280.40	
City State Zip Code Ponte Vedra Beach FL 32082	Transaction ID : F57.000006		
Purpose of Expenditure Direct mail (also opposes Greg Orman)	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: KS <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Roberts		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		30280.40	

(a) SUBTOTAL of Itemized Independent Expenditures.....	88240.48
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
CITIZENLINK (formerly FOCUS ON THE FAMILY ACTION)

Full Name (Last, First, Middle Initial) of Payee Majority Strategies		Date of Public Distribution/Dissemination 10 / 22 / 2014	
Mailing Address 135 Professional Drive, Suite 104		Amount 31312.05	
City Ponte Vedra Beach	State FL	Zip Code 32082	Transaction ID : F57.000007
Purpose of Expenditure Direct mail (also opposes Mark Begich)	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: AK District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Daniel S. Sullivan		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 96408.37		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31312.05
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	247025.18