



## Form CPF 22: REPORT OF BALLOT QUESTION EXPENDITURES BY CORPORATION OR ORGANIZATION

### Office of Campaign and Political Finance

Commonwealth  
of Massachusetts

File with: Director  
Office of Campaign and Political Finance  
One Ashburton Place  
Boston, MA 02108  
617-979-8300

- 60<sup>th</sup> day preceding election  
 5<sup>th</sup> day of the month  
 20<sup>th</sup> day of the month  
 November 20<sup>th</sup>  
 January 20<sup>th</sup>

Please print or type, except signatures.

1. Name of Corporation/Organization: National Education Association
2. Address: 1201 - 16th St NW, Washington DC 20009
3. Reporting Period: Jan. 1, 2009 to Jan. 20, 2010  
Month Day Year Month Day Year
4. The expenditures below were made to (check one) support \_\_\_\_\_ / oppose X  
 Question Number NA relating to sales tax rollback  
 Submitted to the voters on Nov. 2, 2010 (Describe question briefly)  
(Election Date)
5. Expenditure(s) (attach additional pages if necessary):

Date Paid	To Whom Paid	Address	Purpose	Amount or Value
10/20/09	Coaliton for Our Communities	P.O. Box 139 Boston 02133	Contribution	\$125,000
Total expenditures on this report				\$125,000
Total expenditures previously reported				-0-
Total expenditures to date				\$125,000

\*In-kind contributions should be included here.

OVER

## LIABILITIES\*

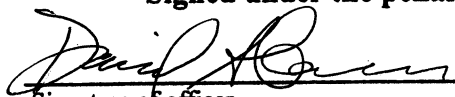
Date Incurred	To Whom Due	Address	Purpose	Amount
Total liabilities on this report				0
Liabilities previously reported and still outstanding				0
Total outstanding liabilities**				0

\* A liability exists and must be reported if the association or group has received a good or service that it has not paid for, even if the association or group has not received a bill or invoice. If the amount of the liability has not been determined or is in dispute, the liability should be estimated or reported as "to be determined" or "in dispute."

\*\* Final report must show zero liabilities.

I certify that this report is a true statement of the amount or value of every gift, payment, expenditure or contribution or promise to give, pay, expend or contribute, together with the date, purpose and full name and address of the person to who it was made.

**Signed under the penalties of perjury.**


1/20/2010  
 \_\_\_\_\_  
 Signature of officer Date

**WHO NEEDS TO FILE THIS FORM?** Once an organization has made political contributions or expenditures or incurred liabilities to support candidates or political committees in excess of the "incidental threshold" (i.e., \$15,000 or 10% of such organization's gross revenues for the previous year, whichever is less), a duly qualified officer must file this report. The report must disclose all contributions and expenditures made and liabilities incurred during the calendar year. The obligation to file a report continues for each year thereafter until the year after a year in which the incidental threshold is not reached.

### **WHERE SHOULD THIS FORM BE FILED?**

**State and County Candidates or Committees:** If contributions or expenditures are made to support or oppose state or county candidates or committees this form should be filed with OCPF.

**Municipal Candidates or Committees:** If contributions or expenditures are made to support or oppose municipal candidates or committees this form should be filed with the city or town clerk or election commission.

### **WHERE CAN I GET MORE INFORMATION?**

OCPF Interpretive Bulletin IB-88-01  
 Call OCPF at (617) 727-8352 or (800) 462-OCPF