

BLANCHARD, MILLER, LEWIS & STYERS, P. A.

L A W Y E R S

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CHARLES F. BLANCHARD
OF COUNSEL

March 25, 2008

VIA HAND DELIVERY

Kim Westbrook-Strach
Deputy Director of Campaign Finance
North Carolina Board of Elections
Post Office Box 27255
Raleigh, North Carolina 27611

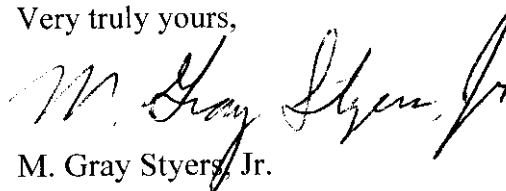
***RE: 24-Hour Notice of Candidate-Specific Communications
National Education Association***

Dear Ms. Strach:

Enclosed are the original and one copy of the 24-Hour Notice of Candidate-Specific Communications and related forms for the National Education Association. Please stamp the copy as filed and return to me via my courier.

If you or your staff has any questions regarding this registration statement and report, please do not hesitate to call me at 919-755-3993.

Very truly yours,



M. Gray Styers, Jr.


MGS/skp
Enclosures

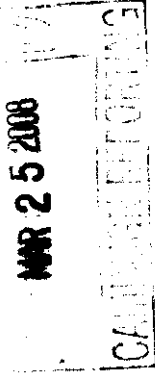
Cc: Margaret E. McCormick. (w/encl.)

{00022072.DOC;1}

Amendment
 Yes No

24-Hour Notice of Disbursements for Candidate-Specific Communications

1. Reporting Entity Information	
a. Full Name of Entity Making Disbursement NATIONAL EDUCATION ASSOCIATION	
c. Type (Check one) <input type="checkbox"/> Individual <input type="checkbox"/> Other Organization <input checked="" type="checkbox"/> Nonprofit Organization	
d. Federal ID Number 52-1140991	
b. Mailing Address (include City, State and Zip Code) and Phone Number 1201 16th Street, N.W Washington D.C. 20036	
e. Employer's Name or Principal Place of Business Washington D.C.	
f. Occupation Labor Organization	
2. Period Covered	
Start	End
March 24, 2008 to April 5, 2008	
3. Custodian of Books	
a. Full Name of Entity's Custodian of Books and Accounts Lily Eskelsen, Secretary-Treasurer	
b. Mailing Address (include City, State and Zip Code) and Phone Number NEA 1201 16th Street, N.W. Washington, D.C. 20036	
c. Employer's Name or Principal Place of Business National Education Association	
d. Occupation Secretary-Treasurer	
4. Total Contributions ALL Pages	
\$	0
5. Total Expenditures ALL Pages	
\$	360,000
CERTIFICATION	
I certify that this entity is in full compliance with Article 22G and Article 22H. I further certify that this statement is complete, true and correct.	
Printed Name of Signer Margaret E. McCormick, Counsel	Date 3/24/08
Signature 	



Controlling/Directing Entity List

1. Entities Sharing/Exercising Control

a. Full Name of Entity		NONE	
b. Mailing Address (include City, State and Zip Code) and Phone Number		N/A	
c. Employer's Name or Principal Place of Business		N/A	
d. Occupation			
a. Full Name of Entity			
b. Mailing Address (include City, State and Zip Code) and Phone Number		N/A	
c. Employer's Name or Principal Place of Business		N/A	
d. Occupation			
a. Full Name of Entity			
b. Mailing Address (include City, State and Zip Code) and Phone Number		N/A	
c. Employer's Name or Principal Place of Business		N/A	
d. Occupation			

Receipts for Candidate-Specific Communications

1. Receipt Information			
a. Item Num	b. Full Name, Mailing Address & Phone Number (include city, state, and zip)	c. Date (mm/dd/yyyy)	d. Amount
1.	National Education Association - general treasury funds 1201 16th Street N.W. Washington, D. C. 20036	03/19/2008	\$ 360,000
			\$
			\$
			\$
			\$
			\$
2. Total Receipts THIS Page (sum all the '1d' entries on this page)			\$ 360,000
3. Total Receipts ALL Pages (sum all the '1d' entries on all receipt pages)			\$ 360,000

Disbursements for Candidate-Specific Communications

1. Disbursement Information			
a. Item Num	b. Disbursement Date (mm/dd/yyyy)	c. Communication Date (mm/dd/yyyy)	d. Purpose (including title(s) of communication(s))
	3/19/08	3/24/08-4/05/08	grassroots lobbying ad "You Can Find Her"
e. Full Name, Mailing Address (include city, state, and zip) & Phone Number			
BUYING TIME 2715 M Street, N.W. Suite 400 Washington D.C. 20007			
Candidate Full Name	Office Sought	Disbursement For:	f. Amount
Beverly Purdue	<input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Council of State (specify): GOVERNOR	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): grassroots lobbying	\$ 360,000
Candidate Full Name	Office Sought	Disbursement For:	
	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Council of State (specify):	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Candidate Full Name	Office Sought	Disbursement For:	
	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Council of State (specify):	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
a. Item Num	b. Disbursement Date (mm/dd/yyyy)	c. Communication Date (mm/dd/yyyy)	d. Purpose (including title(s) of communication(s))
e. Full Name, Mailing Address (include city, state, and zip) & Phone Number			
Candidate Full Name	Office Sought	Disbursement For:	f. Amount
	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Council of State (specify):	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	\$
Candidate Full Name	Office Sought	Disbursement For:	
	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Council of State (specify):	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Candidate Full Name	Office Sought	Disbursement For:	
	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Council of State (specify):	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
2. Total Disbursements THIS Page			\$ 360,000
3. Total Disbursements ALL Pages			\$ 360,000

(sum all the 'if' entries on this page)

(sum all the 'if' entries on all disbursement pages)