

Lamberti Jeffrey M
Form 4
June 24, 2010

FORM 4

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549**

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
Lamberti Jeffrey M

2. Issuer Name and Ticker or Trading Symbol
CASEYS GENERAL STORES INC
[CASY]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)

210 N.E. DELAWARE AVENUE, SUITE 200

(Street)

3. Date of Earliest Transaction (Month/Day/Year)
06/23/2010

Director 10% Owner
 Officer (give title below) Other (specify below)

ANKENY, IA 50021

(City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
Common Stock				(A) or (D)			
			Code	V	Amount	(D)	Price
Common Stock					25,000	D	
Common Stock					400	I	As custodian under UTMA
Restricted stock unit ⁽²⁾	06/23/2010	06/23/2010	A	2,000	A \$ 0	2,000	D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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(2) Pursuant to 2009 Stock Incentive Plan. This RSU award vested on date of grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure.

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