

**Political Organization
 Report of Contributions and Expenditures**

▶ See Separate instructions.

A For the period beginning **October 16**, 20 **10** and ending **January 30**, 20 **11**

B Check applicable boxes: Initial report Change of address Amended report Final report

1 Name of organization **Lead Iowa** **Employer identification number**
27-2751523

2 Mailing address (P.O. Box or number, street, and room or suite number)
PO Box 701
 City or town, state, and ZIP code
Des Moines, IA 50303

3 E-mail address of organization **lead Iowa@gmail.com** **4** Date organization was formed
6/1/2010

5a Name of custodian of records **Ryan Ball** **5b** Custodian's address
PO Box 701
Des Moines, IA 50303

6a Name of contact person **Kelli Todd** **6b** Contact person's address
PO Box 701
Des Moines, IA 50303

7 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number
 City or town, state, and ZIP code

8 Type of report (check only one box)

a First quarterly report (due by April 15)

b Second quarterly report (due by July 15)

c Third quarterly report (due by October 15)

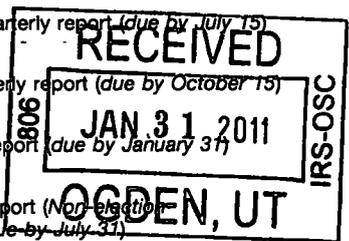
d Year-end report (due by January 31)

e Mid-year report (Non-election year only due by July 31)

f Monthly report for the month of: _____
 (due by the 20th day following the month shown above, except the December report, which is due by January 31)

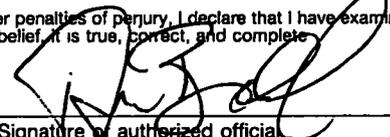
g Pre-election report (due by the 12th or 15th day before the election)
 (1) Type of election: _____
 (2) Date of election: _____
 (3) For the state of: _____

h Post-general election report (due by the 30th day after general election)
 (1) Date of election: _____
 (2) For the state of: _____



9 Total amount of reported contributions (total from all attached Schedules A)	9	3500.00
10 Total amount of reported expenditures (total from all attached Schedules B)	10	1512.61

Sign Here Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of authorized official: 

Date: **1/27/11**

SCANNED FEB 03 2011

Schedule A Itemized Contributions		Schedule A page 2 of 3
Name of organization Lead Iowa		Employer identification number 27-2751523
Contributor's name, mailing address and ZIP code Kum & Go 8400 Westown Pkwy West Des Moines, IA 50266-6270	Name of contributor's employer Kum & Go	Amount of contribution \$ 2500.00
	Contributor's occupation Convenience Store Operator	
	Aggregate contributions year-to-date . . . ▶ \$ 2500.00	Date of contribution 10/30/2010
Contributor's name, mailing address and ZIP code Hewlett Packard Financial Operations PO Box 2810 Colorado Springs, CO 80901	Name of contributor's employer Hewlett Packard	Amount of contribution \$ 1000.00
	Contributor's occupation Financial	
	Aggregate contributions year-to-date . . . ▶ \$ 2000.00	Date of contribution 11/15/2010
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution \$
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution \$
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution \$
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution \$
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution \$
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution \$
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution \$
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	Date of contribution
Subtotal of contributions reported on this page only. Enter here and also include this amount in the total on line 9 of Form 8872 . . . ▶		\$ 3500.00

Schedule B Itemized Expenditures		Schedule B page _____ of _____
Name of organization Lead Iowa		Employer identification number 27-2751523
Recipient's name, mailing address and ZIP code Veridian Credit Union 1827 Ansborough Ave. Waterloo, IA 50701	Name of recipient's employer	Amount of expenditure \$ 25.00
	Recipient's occupation	Date of expenditure 10/28/2010
Purpose of expenditure Purchase of checks		
Recipient's name, mailing address and ZIP code Kelli Todd 1017 W. Benton St. #12 Iowa City, IA 52246	Name of recipient's employer Lead Iowa	Amount of expenditure \$ 785.86
	Recipient's occupation Executive Director	Date of expenditure 11/23/2010
Purpose of expenditure Payroll		
Recipient's name, mailing address and ZIP code Heritage Payroll Services 1501 Ingersoll Ave, STE 101 Des Moines, IA 50309	Name of recipient's employer Lead Iowa	Amount of expenditure \$ 104.62
	Recipient's occupation Professional Services	Date of expenditure 12/22/2010
Purpose of expenditure Payroll services		
Recipient's name, mailing address and ZIP code Heritage Payroll Services 1501 Ingersoll Ave, STE 101 Des Moines, IA 50309	Name of recipient's employer Lead Iowa	Amount of expenditure \$ 107.02
	Recipient's occupation Professional Services	Date of expenditure 12/23/2010
Purpose of expenditure Payroll services		
Recipient's name, mailing address and ZIP code Kelli Todd 1017 W. Benton St. #12 Iowa City, IA 52246	Name of recipient's employer Lead Iowa	Amount of expenditure \$ 489.11
	Recipient's occupation Executive Director	Date of expenditure 12/23/2010
Purpose of expenditure Payroll		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure \$
	Recipient's occupation	Date of expenditure
Purpose of expenditure		
Subtotal of expenditures reported on this page only. Enter here and also include this amount in the total on line 10 of Form 8872		\$ 1512.61

