FORM 4

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

OMB APPROVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)															
1. Name and Address of Reporting Person* Pierce Deborah J.				FULL HOUSE RESORTS INC [FLL]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O FULL HOUSE RESORTS, INC., 4670 SOUTH FORT APACHE ROAD, SUITE 190													fficer (give title below) Other (specify below) Chief Financial Officer				
(Street)				_X_Form								_X_ Form fil	idual or Joint/Group Filing(Check Applicable Line) filed by One Reporting Person filed by More than One Reporting Person				
LAS VE	GAS, NV	(State)	(Zip)			200					~ •.•					0 1	
				Table I - Non-Derivative Securities Acquired, Dis 2A. Deemed 3. Transaction 4. Securities Acquired 5. Amou										unt of Securities 6. 7. Nature			
(Instr. 3)			Date	Exect any	Execution Date, if		f Co	Code (Instr. 8)		(A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	Beneficia	ally Owned Following Transaction(s)		Ownership Form:	
				(Mondi Bay, Tour)			Code	V	Amour	(A) or	Price	(msu. 3 a	nu +)			(Instr. 4)	
Common	Common Stock 09/		09/10/2014					A		10,00	· ` ′	\$ 1	60,800	0,800		D	
Reminder	Report on a s	senarate line for	each class of secur	ities h	eneficia	lly o	wned	direct	tly or	indirectl	v						
		<u> </u>	0.001 0.000 0.1 00001	10000		, 0	,,,,,		Pers cont	ons wh	no respor n this for	m are	e not requ		ormation spond unle trol numbe	ss	1474 (9-02)
			,	<i>e.g.</i> , p	uts, cal		arrar	-	tions	, conver	tible secu	rities)		1			
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Y	Execution Da	te, if	Transaction N Code (Instr. 8) I S		of Deri Secu Acqu (A) o Disp of (I (Inst	Number		and Expiration Date (Month/Day/Year)		Ame Und Secu	itle and ount of lerlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Owners Form o Derivat Security Direct (or Indir	Beneficial Ownersh (Instr. 4)
					Code	V	(A)	(D)	Date Exer		Expiration Date	Title	Amount or Number of Shares				
Repor	ting O	wners							·I								
									Dolo	tionshin							
Reporting Owner Name / Address				Director			0% wner	0%		Officer			Other				
4670 SO	L HOUSE		, INC. ROAD, SUITE	190					Ch	nief Fin	nancial O	ffice	r				

Signatures

/s/ Deborah J. Pierce	09/10/2014
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.