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	3)													
1. Name and Address of Reporting Person* LEE DANIEL R				2. Issuer Name and Ticker or Trading Symbol FULL HOUSE RESORTS INC [FLL] 3. Date of Earliest Transaction (Month/Day/Year) 11/28/2014 4. If Amendment, Date Original Filed(Month/Day/Year)					x_	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
C/O FULL HOUSE RESORTS, INC.,, 4670 SOUTH FORT APACHE ROAD, SUITE 190 (Street)			X												
			X F						e)						
LAS VEGAS, NV 89147 (City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					quired,							
(Instr. 3) Date		2. Transaction Date (Month/Day/Yea			3. Tra Code (Instr.	nsaction 4	4. Securities Acquire (A) or Disposed of ((Instr. 3, 4 and 5)		ired 5. Amount of Owned Follow Transaction(s)		Securities Beneficially ving Reported		6. Ownership Form:	Beneficial	
				(Mon	th/Day/Year	Coo	de V) or D) Pri		tr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
										233	3,369			D	
Reminder:		separate line for each	a class of securities b	peneficial	lly owned di	ectly or	Person in this	orm are no	t requi	red to r	llection of		on contain form displ		1474 (9-02)
		separate line for each		- Deriva	tive Securit	es Acq	Person in this a curre uired, Dispo	orm are nontry valid Cosed of, or B	ot requi OMB cor eneficial	red to r ntrol nu lly Own	llection of respond u umber.				1474 (9-02)
Reminder:		3. Transaction	Table II 3A. Deemed Execution Date, if	- Deriva (e.g., p 4. Transac Code	tive Securitiuts, calls, was 5. Num Derivat Securiti	es Acquerrants, per of ve es d (A) psed of	Person in this a curre uired, Dispo	form are not not ly valid Conservertible servertible and Date	eneficial curities) 7. T of U	red to r ntrol nu	llection of respond u umber. ned	8. Price of	9. Number Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Owners Form o Derivat Securit Direct (or India	11. Nat hip of Indir Benefic ive Owners (Instr. 4
Reminder: 1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II 3A. Deemed Execution Date, if any	- Deriva (e.g., p 4. Transac Code	5. Num Derivat Securiti Acquire or Disp (D) (Instr. 3	es Acquerrants, per of ve es d (A) psed of	Person in this is a curre uired, Disposoptions, co	orm are nontly valid Consed of, or Bonvertible servisable and Date (//Year)	eneficial curities) 7. T of U	red to rentrol number of the n	llection of respond u umber. ned	8. Price of Derivative Security	9. Number Derivative Securities Beneficially Owned Following Reported	of 10. Owners Form o Derivat Securit Direct (or Indir	11. Nathip of India Benefit Owners (Instr. 4

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
LEE DANIEL R C/O FULL HOUSE RESORTS, INC., 4670 SOUTH FORT APACHE ROAD, SUITE 190 LAS VEGAS, NV 89147	X		Chief Executive Officer		

Signatures

/s/ Daniel R. Lee	12/02/2014
**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).
- (1) The option provides for vesting with respect to 25% of the shares subject to the stock option on November 28, 2015 and will continue to vest with respect to an additional 1/48th of the shares subject to the stock option on each monthly anniversary thereafter, subject to Mr. Lee's continued service through the applicable vesting date.

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.