RECEIVED t: 415.389.6800 f: 415.388.6874

2014 JAN -6 AM 8: 53 FEC MAIL CENTER

January 3, 2014

Federal Election Commission 999 E Street, NW Washington, DC 20463

Re: Registration of Iowa State PAC (Ameristar PAC) as Federal Committee

To Whom It May Concern:

Enclosed with this letter is a Form 1, registering an existing political action committee (Ameristar PAC) as a federal committee.

Ameristar has long operated this committee for the sole purpose of making contributions and expenditures in connection with Iowa state and local elections; accordingly, it is, and has been, registered as an Iowa state PAC. It has not previously participated in federal elections; until recently, Ameristar maintained a separate federal PAC for that purpose.

Recently, however, Ameristar merged with Pinnacle Entertainment, Inc., with the latter being the surviving entity. The decision was made to terminate the Iowa PAC, and to transfer the remaining funds into the existing Pinnacle Entertainment PAC, which is already registered as a federal committee (Coo394122). To accomplish this purpose, the Ameristar Iowa PAC is now being registered as a federal committee in accordance with Advisory Opinion No. 1985-18, and as an affiliated committee of the Pinnacle Entertainment PAC.

Please let me know if you have any questions.

Sincerely,

Chris Skinnell

Enclosures cc:

FEC FORM 1

STATEMENT OF ORGANIZATION

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				OMEROS MANL CENTER
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
AMERISTAR PAC				
ADDRESS (number and street)	P.O. BOX 363			
(Check if address is changed)	COUNCIL BLUFFS		IA L	51502
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES (Check if address is changed)	-	e-mailaddress) star.com; sscally@nmgov	law.com	
COMMITTEE'S WEB PAGE ADI	ORESS (URL)			
(Check if address is changed)	<u>.</u>			
2. DATE 12 31	2013			
3. FEC IDENTIFICATION N	JMBER C	The sales of the s		
4. IS THIS STATEMENT X	NEW (N) OR	AMENDED (A)		
I certify that I have examined the	nis Statement and to the bes	t of my knowledge and belief	f it is true, correct i	and complete.
T D				
Type or Print Name of Treasure	Monty Terhune	7		
Signature of Treasurer	mille		Date O /	02 2014
NOTE: Submission of false, errone	•	n may subject the person signin	_	he penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commi Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

ı	FEC Fo	orm 1 (Revised 02/2009) Page 2			
		COMMITTEE			
(a)	Candidate Committee: a) This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)	d	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate			
Nam	information below.) Name of				
Cano	Candidate				
	didete y Affiliati	Office State Senate President District			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name of Candidate					
Par	ty Con	mmittee: (National, State (Democratic,			
(d)		(National, State (Democratic, This committee is a republican, etc.) Par			
Political Action Committee (PAC):					
(e)	x	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization i			
		Corporation W/o Capital Stock Labor Organization			
		Membership Organization Trade Association Cooperative			
		In addition, this committee is a Lobbyist/Registrant PAC.			
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)			
	In addition, this committee is a Lobbyist/Registrant PAC.				
		In addition, this committee is a Le≘dership PAC. (Identify sponsor on line 6.)			
Joir	nt Func	draising Representative:			
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.			
	Committees Participating in Joint Fundraiser				
	1.				
	2.				
	3.				
	4.				
	→.				

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FEC Form 1 (Revised 0		Page 3
Write or Type Committee Name AMERISTAR PAC	,	
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
ameristan casings, inc.		
Mailing Address	3773 HOWARD HUGHES PARKWAY, SUITE 490S	
	LAS VEGAS NV 89169	<u>' </u>
	CITY STATE	ZIP CODE
Relationship: X Connected	Organization Affiliated Committee Joint Fundraising Representative Le	eadership PAC Sponsor
 Custodian of Records: Iden books and records. 	tify by name, address (phone number optional) and position of the person in po	ssession of committee
Full Name	RHUNE	
Mailing Address	P.O. BOX 363	
	COUNCIL BLUFFS IA 51502	
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	
8. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the nassistant treasurer).	ame and address of
Full Name MONTY TE	RHUNE	
Mailing Address	P.O. BOX 363	
	<u> </u>	
	COUNCIL BLUFFS CITY IA 51502 STATE	ZIP CODE
Title or Position Treasurer		396 3050

l	FEC Form 1 (Revised 2	2/2009)	Page 3
W	rite or Type Committee Name	3	
AME	RISTAR PAC		
6.	Name of Any Connected (Organization, Affiliated Committee, Leadership PAC Sponso	sor or Joint Fundraising Representative
PI	nnacie entertainnent,	inc pacada pinnacle entertatument pac	
			1111111111
	Mailing Address	2350 KERNER BLVD, SUITE 250	
		SAN RAFAEL	CA 94901 _
		CITY	STATE ZIP CODE
	Relationship: Connected Organization	Affiliated Committee Leadership PAC Sponso	or Joint Fundraising Representative
7.	Custodian of Records: Idea books and records.	ntify by name, address (phone number optional) and position	ion of the person in possession of committe
	Full Name		
	Mailing Address		
	Title or Position	CITY	STATE ZIP CODE
		Telephone num	nber
8.	Tressurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the assistant treasurer).	e committee; and the name and address of
	Full Name of Treasurer		
	Mailing Address		
	The Date	CITY	STATE ZIP CODE
	Title or Position	Telephone num	nber
			-

FEC Form 1 (Revise	ed 2/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position			
	Telephone	number	
Banks or Other Depositor safety deposit boxes or mai Name of Bank, Depository,		mittee deposits (funds, holds accounts, rents
AMERICA	N NATIONAL		
Mailing Address	333 WEST BROADWAY		
	COUNCIL BLUFFS	IA	51503
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
		<u> </u>	
Mailing Address			
		لناا	<u> </u>
	CITY	STATE	ZIP CODE

			_
FEC Form 1 (Revi	ised 2/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position			
	Tel	ephone number	
9. Banks or Other Deposit safety deposit boxes or m	tories: List all banks or other depositories in which naintains funds.	the committee deposits funds	, holds accounts, rents
Name of Bank, Depositor	ry, etc.		
1			1
<u></u>			
Mailing Address		<u> </u>	
	CITY	STATE	ZIP CODE
Name of Bank, Depositor	ry, etc.		
Mailing Address			
		ا ليا ليب	
	CITY	STATE	ZIP CODE

Page 1 of 1

From: (415) 389-6800
CATE CASTONGUAY
NIELSEN, MERKSAMER ET AL
2350 KERNER BOULEVARD
SUITE 250
SAN RAFAEL, CA 94941

Origin ID: SRFA

Ship Date: 03.JAN14 ActWgt: 1.0 LB CAD: 2407613/INET3430

Delivery Address Bar Code

Ref# Invoice# PO# Dept#

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FEDERAL ELECTIONS COMMISSION
FEDERAL ELECTIONS COMMISSION
999 E STREET N W

WASHINGTON, DC 20463

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(8/2013)