Only

PAGE 1/5

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Caesars Entertainment Corporation Political Action Committee One Caesars Palace Dr ADDRESS (number and street) (Check if address is changed) Las Vegas 89109-NVCITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS MagdaluyoK@Caesars.com (Check if address is changed) Optional Second E-Mail Address CECPAC@CAESARS.COM COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 08 2016 C00239947 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. **KELLEY MAGDALUYO** Type or Print Name of Treasurer KELLEY MAGDALUYO [Electronically Filed] 06 08 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2				
		OMMITTEE • Committee:					
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Name of Candidate							
	didate y Affiliati	Office Sought: House Senate President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Nam Cand	e of didate						
Par	ty Con	/ Committee: (National, State (Democratic,					
(d)		This committee is a or subordinate) committee of the	Republican, etc.) Party				
Poli	itical A	ction Committee (PAC):					
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is				
		Corporation Wo 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 s committee. (i.e., nonconnected committee)	egregated fund or party				
		In addition, this committee is a Lobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Join	nt Fund	raising Representative:					
(g)	П	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t					
(h)		committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.					
	Committees Participating in Joint Fundraiser						
	1.						
	2.						
	3.						
	4.						

	-			
_	FEC Form 1 (Revised (02/2009)		Page 3
	rite or Type Committee Name	_		
_(Caesars Enterta	ainment Corporation	Political Actio	n Committee
6.	Name of Any Connected C	Organization, Affiliated Committee, Join	nt Fundraising Representat	ive, or Leadership PAC Sponsor
C	aesars Entertainmen	t Corporation		
	Moiling Address	1 Caesars Palace Dr		
	Mailing Address			
		Las Vegas	NV	89109-8969
		CITY	STATI	E ZIP CODE
	Relationship: X Connected	Affiliated Committee	Joint Fundraising Repres	entative Leadership PAC Sponsor
7.	books and records.	tify by name, address (phone number	optional) and position of th	e person in possession of committee
	Full Name KELLEY N	iagdaluyo 		
	Mailing Address	1 Caesars Palace Dr		
	ag / taa. eee			
		Las Vegas	, NV	89109-8969
	Title or Position	CITY	STATE	ZIP CODE
	Custodian of Records		Telephone number	702 - 407 - 6204
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of assistant treasurer).	the treasurer of the commit	tee; and the name and address of
	Full Name KELLEY M of Treasurer			
	Mailing Address	1 Caesars Palace Dr		
		1		
		Las Vegas	, , , , , , NV	89109-8969 _
		CITY	STATE	ZIP CODE
	Title or Position Treasurer	1	Telephone number	702 407 6204
			rerepriorie flumber	

FEC For i	m 1 (Revised 02/2009)	Page 4						
Full Name of Designated	Jennifer Forkish	1						
Agent								
Mailing Address	One Caesars Palace Drive							
	Las Vegas NV 89109-8969	-						
	CITY STATE ZIP	CODE						
Title or Position Designated Age	ent Telephone number 702 - 407	6529						
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.								
	Wells Fargo Bank N.A.							
Mailing Address	P.O. Box 6995							
	Portland OR 97228-6995							
	CITY STATE ZIP	CODE						
Name of Bank,	Name of Bank, Depository, etc.							
Mailing Address								
	CITY STATE ZIP	CODE						

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F1N Transaction ID:

Statement of Organization amended to change Designated Agent.

Form/Schedule: Transaction ID: