

CALCUTTA POOL APPLICATION

Montana Department of Justice, Gambling Control Division
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OFFICE USE ONLY
APPROVED: _____
DISAPPROVED: _____
INVESTIGATION: _____

An organization seeking authorization from the Department of Justice to conduct a Calcutta Pool must supply the following information in accordance with 23-5-115, Montana Code Annotated. This form must be completed in its entirety. Attach additional sheets of paper if necessary.

SELECTED MONTANA CODE ANNOTATED AND ADMINISTRATIVE RULE EXCERPTS

(To obtain a complete copy of the rules and statutes, send \$10.00 by check only, made out to "State Treasurer", to the address shown on this form.)

Definition: Pursuant to Mont. Admin. R. 23.16.2801 (1) "Calcutta pool" means a form of auction pool wherein participants in the pool bid on the competitors in an underlying event with each successful bidder wagering the amount he has bid on the competitor he has "purchased"; at the conclusion of the underlying event the pool of wagers placed on all competitors is divided amongst the pool participants who have "purchased" the winners of the underlying event according to the rules of the particular Calcutta pool.

Mont. Admin. R. 23.16.2803 (2) All applications for authorization to conduct Calcutta pools should be received by the department at least 10 working days before the start of the auction. The department may process an application received by FAX. An application may not receive approval if received by the department with less than 10 working days before the start of the tournament.

	DATE	TIME	LOCATION (Name & Address)
CALCUTTA AUCTION			
NAME TYPE OF EVENT _____			

Federal ID Number: _____

Account Number: _____

Actual or best estimate of number of competitors in the underlying event:

Value of prizes to be awarded from the pool:

(A prize may be a percentage of the wagers. Provide the percentage for each place paid.)

Projected costs of administering the pool:

Intended use of the proceeds of the pool:

ATTACH TO THIS APPLICATION A COPY OF YOUR RULES USED TO CONDUCT THE CALCUTTA. THE RULES ARE REQUIRED TO BE PUBLICLY POSTED.

I CERTIFY THAT THIS INFORMATION IS TRUE AND CORRECT

AUTHORIZED SIGNATURE

PRINT NAME OF PERSON SIGNING

DATE

ADDRESS

PHONE NUMBER*

ORGANIZATION

*Please list a phone where you can be reached from 8:00a.m. to 5:00p.m., Monday through Friday.