## **FISCAL NOTE**

(Return original ar	nd 10 copies)					
Bill/Resolution No.: HB 1212			Amendment to:			
Requested by Legislative Council			Date of Request: <u>1-8-99</u>			
Please estima funds, countie				above measur	re for state gen	eral or specia
Narrative:						
medical servic	e provider. It	does not add a	members of the h any additional me uncil are included	mbers so ther	e are no addition	
2. State fiscal eff	fect in dollar ar	mounts:				
	1997-99 B General Fund		1999-2001 E General Fund	Biennium Special Funds	2001-03 E General Fund	Biennium Special Funds
Revenues:	-0-	-0-	-0-	-0-	-0-	-0-
Expenditures:	-0-	-0-	-0-	-0-	-0-	-0-
3. What, if any, is	s the effect of t	his measure o	n the appropriation	on for your age	ency or departn	nent:
a. For rest of 1997-99 biennium:			N/A			
b. For the 1999-2001 biennium		ium:	-0-			,
c. For the 20	n:	-0-			-	
4. County, City,	and School D	<b>District</b> fiscal e	ffect in dollar amo	ounts:		
			2001 Biennium 2001-03 Bienniu			
Counties Cities	School Districts	Counties	Sch Cities Distr		nties Cities	School Districts
-0-			-0-		-0-	
If additional space			Signed	RAIS	amel	
attach a supplemental sheet.			Typed NameRobert A. Barnett			
Date Prepared:	1-12-99		Department	DepartmentND Department of Health		
			Phone Num	ber <u>328-2</u>	392	