

office

(Prepare in triplicate)

FISCAL NOTE

Prepared in regard to:

S.B. #379
(list bill or resolution and number, if available, or subject)

Amendment to: _____
(list bill or resolution and number)

REQUESTED BY: _____ DATE OF RECEIPT _____ 19__

In the following space note the fiscal effect in dollars of the legislative proposal. If additional space is needed attach a supplementary sheet. Please type.

No cost to this department, since Tax Department will handle refunds.

Date of preparation: 1-30-67

Signed _____

By _____