

(Prepare in triplicate)

FISCAL NOTE

Prepared in regard to :

Senate Concurrent Resolution No. 4079.
(List bill or resolution and number, if available, or subject)

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

REQUESTED BY: Legislative Council DATE OF RECEIPT 3/15 19 71

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.

| | |
|----------------|--------------|
| Staff time | \$ 4,848 |
| Office expense | 5,705 |
| Meeting costs | <u>6,370</u> |
| Total | \$16,923 |

Date of preparation: 3/15/71

Signed _____

Typed Name Dean F. Bard

Department Legislative Council