

(Return in triplicate)

FISCAL NOTE

Bill/Resolution No.: House Bill No. 1175 Amendment to: _____

Requested by: Legislative Council Date of Receipt: 1/4/85

Please estimate the fiscal impact of the above measure for:

State general or special funds Counties Cities

In the following space note the fiscal effect in dollars of this measure:

Narrative:

Costs to provide for this optional benefit are as follows:

Travel	\$ 1,000
Postage	5,000
Printing	10,000
Supplies	2,000
Data Processing	<u>50,000</u>
	\$ 68,000

State Fiscal Effect:

<u>1985-86</u>		<u>1986-87</u>		<u>Biennium Total</u>	
<u>Special Funds</u>	<u>General Fund</u>	<u>Special Funds</u>	<u>General Fund</u>	<u>Special Funds</u>	<u>General Fund</u>
\$34,000	-	\$34,000	-	\$68,000	-

County and City Fiscal Effect:

<u>1985-86</u>		<u>1986-87</u>		<u>Biennium Total</u>	
<u>Counties</u>	<u>Cities</u>	<u>Counties</u>	<u>Cities</u>	<u>Counties</u>	<u>Cities</u>
-	-	-	-	-	-

If additional space is needed, attach a supplemental sheet.

Signed 

Typed Name Alan Person

Date prepared: 1/8/85

Department Public Employees Retirement