

(Return in triplicate)

FISCAL NOTE

Bill/Resolution No.: _____ Amendment to: HB 1480

Requested by: Legislative Council Date of Receipt: _____

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:

FEB 24 1989

Because guardianship proceedings for a proposed ward is in the place where the proposed ward resides or is present and expected to remain during the pendency of the proceedings, there would be no additional costs for the State Hospital.

I could not estimate the county or city fiscal effects.

State Fiscal Effect:

<u>1989-90</u>		<u>1990-91</u>		<u>Biennium Total</u>	
<u>General Fund</u>	<u>Special Funds</u>	<u>General Fund</u>	<u>Special Funds</u>	<u>General Fund</u>	<u>Special Funds</u>

County and City Fiscal Effect:

<u>1989-90</u>		<u>1990-91</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 Gene O. Wahl

Typed Name Gene O. Wahl

Date Prepared: 2/23/89

Department North Dakota State Hospital