

(Return in triplicate)

AMENDED
FISCAL NOTE

FEB 7 1989

Bill/Resolution No.: _____ Amendment to: SB 2059

Requested by: Legislative Council Date of Receipt: 2/6/89

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:

We estimate the cost to be under \$5,000.

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 *Mike Schwindt*

Typed Name Mike Schwindt

Date Prepared: 2/7/89

Department Human Services