

(Return in triplicate)

FISCAL NOTE

Bill/Resolution No.: SB 2129 Amendment to: _____

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:

This bill will not have any fiscal impact to the State, Counties or Cities. However, if approved, would allow the Commissioner of Insurance to raise additional revenue to fund the Insurance Department's budget through fees collected by the Insurance Department from primarily insurance companies and agents.


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>
-0-	-0-	-0-	-0-	-0-	-0-

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>
-0-	-0-	-0-	-0-	-0-	-0-

If additional space is needed, attach a supplemental sheet.

Signed 

Typed Name MERLE T. PEDERSON

Date Prepared: 1-4-88

Department INSURANCE DEPARTMENT