

(Return in triplicate)

FISCAL NOTE

Bill/Resolution No.: SB 2415 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:

Board Administration position would decrease revenue from Special Funds, approximately \$11,000.00 annually. The increase in original Salon registration will increase the Special Fund revenue to \$2250.00.

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>
	\$8,750.00		\$8,750.00		\$17,500.00

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 *Lavata Becker*

Typed Name Lavata Becker

Date Prepared: 1-23-89

Department ND State Board of Cosmetology