

FISCAL NOTE

Return in triplicate)

Bill/Resolution No.: HB 1205 Amendment to: _____

Requested by Legislative Council Date of Request: 1-5-93

1. Please estimate the fiscal impact (in dollar amounts) of the above measure for state general or special funds, counties, and cities.

Narrative:

The fiscal impact has been included in the appropriations appearing in HB 1015.

2. State fiscal effect in dollar amounts:

1991-93 <u>Biennium</u>		1993-95 <u>Biennium</u>		1995-97 <u>Biennium</u>	
<u>General</u> <u>Fund</u>	<u>Special</u> <u>Funds</u>	<u>General</u> <u>Fund</u>	<u>Special</u> <u>Funds</u>	<u>General</u> <u>Fund</u>	<u>Special</u> <u>Funds</u>

Revenues:

Expenditures:

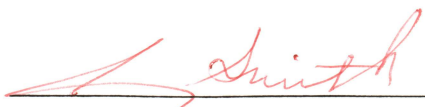
3. What, if any, is the effect of this measure on the appropriation for your agency or department:

- a. For rest of 1991-93 biennium: _____
- b. For the 1993-95 biennium: _____
- c. For the 1995-97 biennium: _____

4. County and City fiscal effect in dollar amounts:

1991-93 <u>Biennium</u>		1993-95 <u>Biennium</u>		1995-97 <u>Biennium</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 Arvy Smith

Department OMB

Phone Number 224-2685

Date Prepared: _____