(Prepare	in	triplicate
TTCDATE		LITPITCALE

L NOTE			
number, if available, or subject)			
solution and number)			
REQUESTED BY: Legislative Council DATE OF RECEIPT 3/15 19 71			
In the following space note the fiscal effect in dollars of the legislative proposal. If additional space is needed attach a supplementary sheet. Please type.			
\$ 3,231 25,470 4,088			
\$32,789			

Typed Name

Department

Dean F. Bard

Legislative Council