

(Prepare in triplicate)

FISCAL NOTE

Prepared in regard to:

SENATE BILL NO. 2259

(List bill or resolution and number, if available, or subject)

Amendment to: _____

(List bill or resolution and number)

Requested by: _____ Date of receipt: _____ 19__

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)

In reference to Senate Bill 2259 these Amendments will have no fiscal impact upon any city or county in the state.

Our revenue is by assessment, levied on the dairy farmers of the state, which is used by the Commission for the promotion of Dairy products.

The estimated income of Bill 2259 is projected from the last fiscal year of gross income reported to the Dairy Department at Bismarck.

This income totaled about 78 million dollars. At the new rate of $\frac{1}{2}$ of 1 percent, this would amount to about \$390,000. (Three hundred ninety thousand dollars) with an estimated refund of \$98,000. (Ninety eight thousand dollars), the Commission would have about \$292,000. (Two hundred ninety two thousand dollars) for promotion activity.

The previous rate of $\frac{1}{2}$ -cent per pound of butterfat generated \$149,360. (One hundred forty-nine thousand three hundred sixty dollars), during the last fiscal year, with refunds totaling \$27,166.78 (Twenty seven thousand, one hundred sixty-six dollars and ninety four cents) to use for promotion this last year.

There are unknowns to be considered, Volume of Production, Price, and Amount of refunds.

If it appears this legislative proposal may have a fiscal effect upon one or more of the cities and counties of this state but your agency does not have the information available, or cannot gather the information on a timely basis, to allow a dollar estimate, please check one or more of the following:

_____ The measure does have a fiscal impact in an unknown amount

_____ The measure does have a fiscal impact in a dollar amount estimated on the basis of inadequate information. (Enter dollar estimate in space above).

_____ The fiscal impact of the measure is unknown.

Date of preparation: _____

Signed



Typed Name

Gene Pelton

Department

N.D. DAIRY PRODUCTS PROMOTION COMMISSION