FISCAL NO	TE	
Prepared in regard to:		•
(List bill or resolution and nu		,
(List bill or resolution and nu	mber, if ava	ilable, or subject)
Amendment to:	1	dhow
Amendment to: (List bill or resolution and number)		
Requested by: Legislative Council		
Date of receipt: December 26	19 78	
In the following space note the filegislative proposal. If addition supplementary sheet. (Please type	nal space is	
'Ho fiscal impact"		
•		
•		
	Signed	
	Typed Name	W. Van Heuvelen
Date Prepared: January 4, 1979	Department	State Department of Health