| (Return in triplicate) <u>FISCAL</u> | NOTE JAN 1 0 1989 |
|---|---|
| Bill/Resolution No.: HB 1194 | |
| Requested by: Legislative Council | Date of Receipt:01/04/89 |
| Please estimate the fiscal impact o X State general or special funds In the following space note the fis measure: | Counties Cities |
| Narrative: | |
| No fiscal impact. | |
| | |
| State Fiscal Effect: | |
| 1989-90 1990 General Special General Fund Funds Fund | -91 Biennium Total Special General Special Funds Fund Funds |
| County and City Fiscal Effect: | |
| 1989-90 1990- Counties Cities Counties | |
| If additional space is needed, attach a supplemental sheet. | Signed Sparb Collins Typed Name Sparb Collins |
| Date Prepared:01/09/89 | Department OMB |