(Return in triplicate) <u>FISCAL NOTE</u>

Bill/Resolution No.: <u>HB 1109</u> Amendment to: ______

Requested by Legislative Council Date of Request: <u>1-3-91</u>

Please estimate the fiscal impact of the above measure for:

In the following space note the fiscal effect in dollars of this measure:

Counties

Cities

State general or special funds

 $\underline{\text{Narrative}}$: No fiscal impact can be determined. The savings will be to the agencies.

State Fiscal Effect:

1991-92		1992-93		Biennium Total	
General	Special	General	Special	General	Special
Fund	Funds	_Fund	Funds	Fund	Funds

County and City Fiscal Effect:

1991-92		1992-93		Biennium Total	
Counties	Cities	Counties	Cities	Counties	Cities

If additional space is needed, attach a supplemental sheet.

Date Prepared: 1490

Typed Name Department OMB

Phone Number 2680