FISCAL NOTE

| (Re | turn in triplicate) | | |
|--------------|--|--|---|
| | l/Resolution No.: SB 2050 | Amendment to: | |
| Req | uested by Legislative Council | Date of Request:l | 2-21-92 |
| 1. | Please estimate the fiscal impa measure for state general or sp | act (in dollar amounts pecial funds, counties | of the above and cities. |
| 2. | Fringe benefits 6,840 x 12 x 2 = Travel 1,200 x 12 x 2 = Operating Exp. 12,500 x3 sites x2 = Equipment Exp. 10,000 x 3 sites = | \$576,000 164,160 28,800 75,000 30,000 \$873,960 | es in the State at the as facility inspector. |
| | 1991-93 | 1993-95 | 1995-97 |
| | <u>Biennium</u> General Special | Biennium | <u>Biennium</u> |
| | <u>Fund</u> <u>Funds</u> | General Special <u>Fund</u> <u>Funds</u> | General Special <u>Fund</u> <u>Funds</u> |
| Re | venues: | 873,960 | 873,960 |
| | | | 0,73,700 |
| X | penditures: | 873,960 | 873,960 |
| 3. | What, if any, is the effect of your agency or department: | this measure on the ap | propriation for |
| | a. For rest of 1991-93 biennium: | The state of the s | |
| | b. For the 1993-95 biennium: 873, | 960 | |
| | c. For the 1995-97 biennium: 873, | 960 | |
| | | | |
| 4. | County and City fiscal effect i | n dollar amounts: | |
| | 1991-93 | 1993-95 | 1995-97 |
| | <u>Biennium</u> <u>Counties</u> Cities | <u>Biennium</u> | <u>Biennium</u> |
| | <u>Counties</u> <u>Cities</u> | <u>Counties</u> <u>Cities</u> | <u>Counties</u> <u>Cities</u> |
| | | 0 | 0 0 |
| If a atta | dditional space is needed, ch a supplemental sheet. | Signed | amil |
| | | Typed Name Robert | A. Barnett |
| Date | Prepared: | Department Health | n & Consolidated Labs |
| | | Phone Number 224 | -2392 |