FISCAL ESTIMATE WORKSHEET Detailed Estimate of Annual Fiscal Effect DOA-2047(R06/99)	X ORIGINAL CORRECTED	UPDATED SUPPLEMENTAL	l	or Bill No./Adm. Rule No. Comm 5, 20, 21, 22, 27	Amendment No.
Subject Installation of Manufactured Hor	mes				
I. One-time Costs or Revenue Impacts for	State and/or Local G	Government (do not include	e in aı	nnualized fiscal effect):	
II. Annualized Costs:			Annualized Fiscal impact on State funds from:		
A. State Costs By Category			\$	() Increased Costs	\$ Decreased Costs
State Operations - Salaries and Fringe	es		+(	0 FTE)	(- 0
(FIE Position Changes)					-
State Operations - Other Costs					-
Local Assistance					-
Aids to Individuals or Organizations			\$	0	\$ -0
TOTAL State Costs By Categor	у		\$		¢
B. State Costs By Source of Funds GPR				Increased Costs	Decreased Costs
FED				0	-0
PRO/PRS					_
SEG/SEG-S			\$		\$ -
III. State Revenues- Complete this only when proposal will increase or decrease state revenues (e.g., tax increase, decrease in license fee, etc.)				Increased Rev.	Decreased Rev.
GPR Taxes			+	75,000	-
GPR Earned			+	72,000	-
FED			\$_	75,000	-
PRO/PRS			ļ		\$ -
SEG/SEG-S					
TOTAL State Revenues					
	NET ANN	)00 UALIZED FISCAL IMPA	CT		
		<u>STATE</u>		1	LOCAL
NET CHANGE IN COSTS	\$			\$	
NET CHANGE IN REVENUES	\$			\$	

FISCAL ESTIMATE WORKSHEET

LRB or Bill No./Adm. Rule No. Amendment No.

Agency/Prepared by: (Name & Phone No.)	Authorized Signature/Telephone No.	Date
Commerce/Jim Quast 266-9292		