Administrative Rules Stamp

FEB 2 7 2003

SECRETARY OF STATE ADMINISTRATIVE RULES

MATT BLUNT Secretary of State Administrative Rules Division BLUE TRANSMITTAL

| _ | RULE TRANSMITTAL | | | | | | | |
|----|--|---|------------|-------------------------|---------------|-----------------|--|--|
| _ | A "SEPARATE" rule transmittal sheet must be used for EACH individual rulemaking. | | | | | | | |
| | | | | | | | | |
| ١. | Rule N | | | | _ | | | |
| | | te File Name 4 CSR 240-123.0 | | | | | | |
| | Name of Person to call with questions about this rule: Bruce H. Bates | | | | | | | |
| | Contex | | Phone | 573-751-7434 | FAX | 573-751-9285 | | |
| | Data E | · | Phone | Same as above | _ FAX | Same as above | | |
| | Interag | ency Mailing Address Gover | nor Office | Building, 200 Madison S | t., Jeffersor | City, MO, 65101 | | |
| | | | | | | | | |
| | | ory Provision for Rulemaking | | | | | | |
| | Authority 700.040 Provide Most Current RSMo Year 2000 Date Filed With the Joint Committee on Administrative Rules Exempt per Sections 536.024 and 536.037, RSMo Supp. 1998, and Executive Order No. 97-97 (June 27, 1997) | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 3. | CHEC | K, IF INCLUDED: | FO | RMS, List by Mo-For | rm Numb | er, # of Pages | | |
| | Y | Cover Letter | | · | | | | |
| | Y | Affidavit | | | | | | |
| | Y | Cost Statements | | | | | | |
| | | Public Entity Fiscal Note | OT | HER | | | | |
| | <u>Y</u> | Private Entity Fiscal Note | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| ٠. | RULE | ULEMAKING ACTION TO BE TAKEN | | | | | | |
| | | Emergency Rulemaking, Must Specify Effective Date | | | | | | |
| | X | Y Proposed Rulemaking (New Rule or Amendment or Rescission of Existing Rule) | | | | | | |
| | | Order of Rulemaking (MUST complete page 2 of this transmittal) | | | | | | |
| | | Withdrawal (Rule, Amendment, Rescission or Emergency) | | | | | | |
| | | Rule Action Notice | | | | | | |
| | | _ In Addition | | , | | | | |
| | | | | | | | | |
|). | | SPECIFIC INSTRUCTIONS: In this space indicate any special instructions (e.g., specify | | | | | | |
| | publica | ation date preference, identify material incorporated by references, etc:) | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

RULE TRANSMITTAL (PAGE 2)

| E. | ORDER OF | F RULEMAKING: Rule Number | | |
|----|--|---|--|--|
| | 1a. | Effective Date for the Order Statutory 30 days or later specific date | | |
| | 1b. | Does the Order of Rulemaking contain changes to the rule text? YES NO | | |
| | 1c. | If the answer is YES, please complete section F. If the answer is NO, Stop here. | | |
| F. | Please provide a complete list of the changes in the rule text for the order or rulemaking indicating the specific section, subsection, subparagraph, part, etc., where each change found. | | | |
| | | ext continues to a third page, insert a continuous section break and, in section 3, delete the footer | | |

NOTE: ALL changes MUST be specified here in order for those changes to be made in the rule as published in the *Missouri Register* and the *Code of State Regulations*.