

support the tax for 5 cents on smoking, I can only support one tax on cigarettes, and that's a 2 cent tax for cancer research. However, if we go a step further, we tax 5 cents, 2 cents, the government comes in with 25 cents, pretty soon you're not going to have any money, people are going to buy them in other states, going to start rolling their own, going to start using snoose, they're going to quit smo'ing. But this body says, that's all right, let's tax them anyway. Let's get them. So, I've had my little say. I thank you, Mr. President. Thank you, members of the body, for listening. Thank you.

SPEAKER BAACK: Thank you, Senator Haberman. Senator Bernard-Stevens.

SENATOR BERNARD-STEVENS: Thank you, Mr. Speaker, members of the body. Just wanted to rise and respond to, at least for the record, to make sure that the record is clear on some of the comments that Senator Schellpeper was making. Stan and I have had this kind of discussion for the last couple days, and we just simply have a difference of viewpoint, and that's fine. That's what the process is all about, a merging of those viewpoints. But if the argument is going to be that we don't want to advance LB 22 because, again, we want to wait and see what the spending is going to be, that is a bogus argument, and I want to, once again, emphasize that argument is bogus. If you just take some time over the weekend, or if you have...if you have time even today after we advance LB 22 and you look at the budget book, LB 541, as we passed, had significant cuts in state spending so that we could maintain health care in the State of Nebraska, significant cuts. If you turn to page 36, at your convenience, some time over the weekend, so that this argument can become clear, you'll see the change in spending from the...in the first year of the biennium and the second year of the biennium by agency. And it will have the two-year change, and anything in parenthesis is a reduction. If you also...and that goes on from page 36 over to page 43, reduction, after reduction, after reduction. Those are the reductions that you took when you voted for LB 541. If you then go back, sometime, and look at...on page 18, significant reductions, major reductions, then you're going to see some of the other areas that were affected as well. The question is not, are we going to raise revenue so that we can do extra spending? The question is, after you analyze the reductions that have been made, and have also been made on Medicaid side, can you live with those reductions? Or, to rephrase it another way, in order to