

**LEGISLATIVE FISCAL OFFICE**

Fiscal Note Worksheet

Person Preparing Fiscal Note:

BILL #:

DRAFTING #:

Phone Number of this Person:

STATUS OF BILL:

DEPARTMENT:

AUTHOR:

DATE SENT TO AGENCY:	DATE RETURNED TO LFO:	ANALYST:
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**Expenditure Increase (Decrease)**

STATE COSTS	FY 26-27	FY 27-28	FY 28-29	FY 29-30	FY 30-31	Total
Personal Services	\$0	\$0	\$0	\$0	\$0	\$0
Operating Expenses	\$0	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0
Other Charges	\$0	\$0	\$0	\$0	\$0	\$0
Equipment	\$0	\$0	\$0	\$0	\$0	\$0
<b>Total State Expenditures</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**PERSONNEL**

(By Classification)

# Pos / Av Sal	# Pos / Av Sal	# Pos / Av Sal	# Pos / Av Sal	# Pos / Av Sal
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**Means of Finance for Above Expenditures**

FISCAL YEAR	SGF	SGR	Dedicated	Federal	Local	Total
26-27	\$0	\$0	\$0	\$0	\$0	\$0
27-28	\$0	\$0	\$0	\$0	\$0	\$0
28-29	\$0	\$0	\$0	\$0	\$0	\$0
29-30	\$0	\$0	\$0	\$0	\$0	\$0
30-31	\$0	\$0	\$0	\$0	\$0	\$0
<b>Total Expenditures</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

\* Specify the fund source being used

**Narrative Explanation of Expenditure Impact**

**1) Implementation Costs:**

**2) Source of Funds** (Include any alternative sources that may be available):

**State ALL Assumptions and show ALL CALCULATIONS. If there is no fiscal impact, clearly and completely explain why.**

\_\_\_\_\_  
Signature of Agency Head or Designee

\_\_\_\_\_  
Signature of Person Preparing Fiscal Note

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BILL #:

STATUS OF BILL:

**Revenue Increase (Decrease)**

<b>FISCAL YEAR</b>	<b>SGF</b>	<b>SGR</b>	<b>Dedicated</b>	<b>Federal</b>	<b>Local</b>	<b>Total</b>
26-27	\$0	\$0	\$0	\$0	\$0	\$0
27-28	\$0	\$0	\$0	\$0	\$0	\$0
28-29	\$0	\$0	\$0	\$0	\$0	\$0
29-30	\$0	\$0	\$0	\$0	\$0	\$0
30-31	\$0	\$0	\$0	\$0	\$0	\$0
<b>Total Revenues</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**Narrative Explanation of Revenue Impact**

State *ALL* Assumptions and show *ALL* CALCULATIONS. If there is no fiscal impact, clearly and completely explain why.

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BILL #:

STATUS OF BILL:

CONTINUATION SHEET

EXPLANATION OF ESTIMATES:

EXPENDITURES: (Continued)

State *ALL* Assumptions and show *ALL* CALCULATIONS. If there is no fiscal impact, clearly and completely explain why.

REVENUES: (Continued)

State *ALL* Assumptions and show *ALL* CALCULATIONS. If there is no fiscal impact, clearly and completely explain why.