PREPARED BY: DATE PREPARED: PHONE: Liz Hruska February 15, 2017 402-471-0053 **LB 188**

Revision: 00

FISCAL NOTE

LEGISLATIVE FISCAL ANALYST ESTIMATE

ESTIMATE OF FISCAL IMPACT - STATE AGENCIES (See narrative for political subdivision estimates)						
	FY 201	17-18	FY 2018-19			
	EXPENDITURES	REVENUE	EXPENDITURES	REVENUE		
GENERAL FUNDS						
CASH FUNDS						
FEDERAL FUNDS						
OTHER FUNDS						
TOTAL FUNDS						

Any Fiscal Notes received from state agencies and political subdivisions are attached following the Legislative Fiscal Analyst Estimate.

No fiscal impact.

ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY & POLT. SUB. RESPONSES						
LB: 188	AM:	AGENCY/POLT. SUB: Nebraska Supreme Court	AGENCY/POLT. SUB: Nebraska Supreme Court (05)			
REVIEWED I	BY: Joe Wilcox	DATE: 2/21/2017	PHONE: (402) 471-4178			
COMMENTS: No basis to dispute the Nebraska Supreme Court estimate of minimal Fiscal Impact to the Agency from LB188.						

ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY & POLT. SUB. RESPONSES					
LB: 188 AM: (25)	AGENCY/POLT. SUB: Nebraska Department of Health and Human Svcs				
REVIEWED BY: Joe Wilcox	DATE: 1/20/2017 PHONE: (402) 471-4178				
COMMENTS: No basis to dispute the Nebraska Department of Health and Human Services estimate of No Fiscal Impact to the Agency from LB 188.					

$LB^{(1)}$	188						FISCAL NOTE
State Ag	gency OR P	Political Subdivision Name: (2	Suprem	ne Court			
Prepared by: (3) Eric Asboe		Date	Prepared: (4)	2/16/17	Phone: (5)	1-4138	
		ESTIMATE PROV	IDED BY ST	ATE AGENO	CY OR POLITIC	CAL SUBDIVISI	ON
		F	Y 2017-18			FY 2018	8-19
		<u>EXPENDITUR</u>		REVENUE	EXPEN	DITURES	<u>REVENUE</u>
GENER	RAL FUNI	DS					
CASH F	FUNDS						
FEDER	AL FUNI	os	<u> </u>				
OTHER	R FUNDS		<u></u>		_		
TOTAI	L FUNDS						
Explana	ation of Es	stimate:					
Minima	l ficcel in	manat an animt anamatia	بالمويد لمصمم	lood			
IVIIIIIII	ii iiscai ii	npact on court operation	ilis allu work	loau.			
		DDEAKD	23727 D27 3.64	IOD ODIEGO			
Persona	al Services		<u>JWN BY MA.</u>	IOR OBJECT	<u>rs of expend</u>	<u> </u>	
	POSIT	ION TITLE	NUMBER OI 17-18	F POSITION 18-19		17-18 <u>DITURES</u>	2018-19 EXPENDITURES
	10011		17 10	10 10	EZEL ELV	<u>DIT CILLS</u>	<u> EXTENDITORES</u>
Benefits	s						
Operati	ng						
Travel.							
Capital	outlay						
-	-	nents					
TO	ΓAL						

FISCAL NOTE

2017

	ESTIMATE PROVI	DED BY STATE AGENCY (OR POLITICAL S	SUBDIVISION			
State Agency or Political S	Subdivision Name:(2) Depa	artment of Health and Hu	man Services				
Prepared by: (3) Pat Weber	Date Prepared:(4) 1-12-17			Phone: (5) 471-6351			
	FY 2017-2018			FY 2018-2019			
	EXPENDITURES	REVENUE	EXPE	NDITURES	REVENUE		
GENERAL FUNDS							
CASH FUNDS			-				
FEDERAL FUNDS			-				
OTHER FUNDS			<u>-</u>				
TOTAL FUNDS	\$0			\$0			
=							
Return by date specified or 72		whichever is earlier.					
Explanation of Estima	ate:						
There is no fineal insu	and to the Demontres of		Ci				
rnere is no liscar imp	eact to the Department	oi neaith and numa	an Services.				
	M	AJOR OBJECTS OF EXPEN	DITURE				
PERSONAL SERVICES:		NUMBER	OF POSITIONS	2017-2018	2018-2019		
	POSITION TITLE	17-18	1819	EXPENDITURES	EXPENDITURES		
Donofita							
•							
IVIAL				\$0	\$0		