

PREPARED BY: Nikki Swope  
 DATE PREPARED: October 28, 2019  
 PHONE: 402-471-0042

# LB 643

Revision: 01

Updated for the 2020 Session. Includes any amendments adopted to-date.

## FISCAL NOTE

### LEGISLATIVE FISCAL ANALYST ESTIMATE

<b>ESTIMATE OF FISCAL IMPACT – STATE AGENCIES</b> (See narrative for political subdivision estimates)				
	<b>FY 2020-21</b>		<b>FY 2021-22</b>	
	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.

LB643 relates to a firefighter or firefighter-paramedic who is a member of a paid fire department of a municipality or a rural or suburban fire protection district. LB643 provides that the death or disability of a firefighter or firefighter-paramedic due to breast cancer or ovarian cancer is prima facie evidence that the death or disability was caused while in the line of duty.

LB643 would increase the city's liability. Additional costs associated with the provisions LB643 cannot be determined.

ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY & POLT. SUB. RESPONSE		
<b>LB: 643</b>	<b>AM:</b>	AGENCY/POLT. SUB: <b>Lancaster County</b>
REVIEWED BY: Joe Wilcox	DATE: 11/12/2019	PHONE: (402) 471-4178
COMMENTS: No basis to dispute the Lancaster County estimate of No Fiscal Impact to the County from LB 643.		

Please complete ALL (5) blanks in the first three lines.

**2020**

**LB<sup>(1)</sup> 643**

**FISCAL NOTE**

State Agency OR Political Subdivision Name: <sup>(2)</sup> Lancaster County

Prepared by: <sup>(3)</sup> Kerry P. Eagan      11-3-19      Phone: <sup>(5)</sup> 402 441-6865

**ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION**

	<u>FY 2020-21</u>		<u>FY 2021-22</u>	
	<u>EXPENDITURES</u>	<u>REVENUE</u>	<u>EXPENDITURES</u>	<u>REVENUE</u>
GENERAL FUNDS	_____	_____	_____	_____
CASH FUNDS	_____	_____	_____	_____
FEDERAL FUNDS	_____	_____	_____	_____
OTHER FUNDS	_____	_____	_____	_____
<b>TOTAL FUNDS</b>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>

Explanation of Estimate:

**BREAKDOWN BY MAJOR OBJECTS OF EXPENDITURE**

Personal Services:

<u>POSITION TITLE</u>	<u>NUMBER OF POSITIONS</u>		<u>2020-21</u>	<u>2021-22</u>
	<u>20-21</u>	<u>21-22</u>	<u>EXPENDITURES</u>	<u>EXPENDITURES</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Benefits.....	_____	_____	_____	_____
Operating.....	_____	_____	_____	_____
Travel.....	_____	_____	_____	_____
Capital outlay.....	_____	_____	_____	_____
Aid.....	_____	_____	_____	_____
Capital improvements.....	_____	_____	_____	_____
<b>TOTAL.....</b>	_____	_____	_____	_____