Department/	Agency Fiscal Estimate Form - Summary
	Department Name
	Agency Code
	Fiscal Estimate Compiled by Date Submitted to OFPR
128th	Legislature
	LD#
	LR # (if no LD)
	Item #
Bill Title	
	Item Type (Original Bill or Amendment)
For Amendmen	ts:
	Does amendment change the fiscal impact? (Yes or No)
	Is fiscal estimate incremental or does it replace original bill's estimate? (I or R)
Summary of Im	pact
61.40 M	
Select One or M	Iore of the Following: (Please explain in text box at bottom regardless of selection)
	No Fiscal Impact
	Minor Cost/Minor Revenue Decrease (Costs can be absorbed - no change to budget)
	Minor Savings/Minor Revenue Increase (No change to budget)
	Fiscal Impact (Complete Fiscal Impact Detail - next tab)
	State Mandate
	Other Fiscal Impacts (Bond Issue, Referendum or Correctional/Judicial Impacts)
Department/Ag	
local units of gov	ions in cost, savings or revenue impacts. Describe any new responsibilities. If mandate, indicate new requirements for vernment.

Department Name Agency Code Tiscal Estimate Compiled by Date Submitted to OFFR Legislature LD # Logislature LD # LR # (if no LD) Hem # D Program #: Title: Program Title Text Box for Initiative Description or "Blippies"/Appropriation or Allocations Paragraphs: Text Box for Initiative Description or "Blippies"/Appropriation or Allocations Paragraphs: Personal Services Section: (Please attach excel spreadsheet for detail estimate exported from BFMS system to justify requested amount. Remember that BFMS may not be updated for most recent salary and benefit rates. This can be compensated for by starting the position a step higher than otherwise anticipated. Contact your budget analyst for help producing an estimate thru BFMS.) Job Class Title Account # Leg. Count FTE Count 2016-17 2017-18 2018-19 2019-20 2020-21 Total - Personal Services All Other & Capital Expenditure Information Account # C&O Code 2016-17 2017-18 2018-19 2019-20 2020-21 Total - All Other Total - Capital Expenditures Romeron Formation:
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Account # C&O Code 2016-17 2017-18 2018-19 2019-20 2020-21
Transfer Information: Account # C&O Code From Acct. # To Account # 2016-17 2017-18 2018-19 2019-20 2020-21
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Detail of Assumptions:
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