

FISCAL ESTIMATE WORKSHEET

2005 Session

Detailed Estimate of Annual Fiscal Effect
DOA-2047 (R10/94)

ORIGINAL UPDATED
 CORRECTED SUPPLEMENTAL

LRB or Bill No./Adm. Rule No.
DWD 277

Amendment No.

Subject
Notice to home care consumers and workers

I. One-time Costs or Revenue Impacts for State and/or Local Government (do not include in annualized fiscal effect):

0

II. Annualized Costs:	Annualized Fiscal impact on State funds from:	
	Increased Costs	Decreased Costs
A. State Costs by Category		
State Operations - Salaries and Fringes	\$0	\$0 -
(FTE Position Changes)	0 (FTE)	0
State Operations - Other Costs	0	0 -
Local Assistance	0	0 -
Aids to Individuals or Organizations	0	0 -
TOTAL State Costs by Category	\$0	\$0
B. State Costs by Source of Funds	Increased Costs	Decreased Costs
GPR	\$0	\$0-
FED	0	0
PRO/PRS	0	0 -
SEG/SEG-S	0	0 -
III. State Revenues - Complete this only when proposal will increase or decrease state revenues (e.g., tax increase, decrease in license fee, etc.)	Increased Rev.	Decreased Rev.
GPR Taxes		\$ -
GPR Earned		-
FED		-
PRO/PRS		-
SEG/SEG-S		-
TOTAL State Revenues		\$0-

NET ANNUALIZED FISCAL IMPACT

	<u>STATE</u>	<u>LOCAL</u>
NET CHANGE IN COSTS	0	0
NET CHANGE IN REVENUES	0	0

Agency/Prepared by: (Name & Phone No.)
Elaine Pridgen (608) 267-9403

Authorized Signature/Telephone No.

Date