**FISCAL NOTE**

Agency:

Appropriation/Allocation:

General subject of regulation:

Citation of regulation:

Estimated appropriations required (in thousands of dollars)

**Expenditures/Revenues**

|  |  |
| --- | --- |
|  | FY \_\_AppropriationRequested |
| (Thousands of Dollars) |
| **OPERATING EXPENDITURES** | **FY\_\_\_** | **FY \_\_\_** | **FY \_\_\_** |
| Personal ServicesTravelServicesCommoditiesCapital OutlayGrants & BenefitsMiscellaneous |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  **TOTAL OPERATING** |  |  |  |

|  |  |
| --- | --- |
| **FUNDING SOURCE** | (Thousands of Dollars) |
| 100210031004100510071037 | Federal ReceiptsGF MatchGeneral FundGF/Program (DGF)I/A Rcpts (Other)GF/MH (UGF) |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **POSITIONS** |  |  |  |
| Full-timePart-timeTemporary |  |  |  |
|  |  |  |
|  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **CHANGE IN REVENUES** |  |  |  |

Date Prepared by: [Signature]

 [name and title, printed]

 [division/department]

 Phone No.: