FISCAL ESTIMATE WORKSHEET		2005 Session			
Detailed Estimate of Annual Fiscal Effect DOA-2047 (R10/94)	☑ ORIGINAL ☐ UPDATED☐ CORRECTED☐ SUPPLEMENTAL	LRB or Bill No. DWD 59	l No./Adm. Ru	le Amendment No.	
Subject					
Grants Supporting Community Child Care		mant (da na	at in aluda in	annualized ficeal	
. One-time Costs or Revenue Im effect):	pacts for State and/or Local Governi	nent (ao no	ot include in	annuanzeu nscar	
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I. Annualized Costs:		Annualized Fiscal impact on State for Increased Costs Decrease			
A. State Costs by Category		Increas	sed Costs	Decreased Costs	
State Operations - Salaries and	Fringes	\$0		\$0 -	
(FTE Position Changes)		0 (FTE)	0	
		0		0	
State Operations - Other Costs				-	
		0		0	
Local Assistance				-	
Aide to ladiciduale en Occasioni		0		0	
Aids to Individuals or Organization	DIIS			-	
TOTAL State Code by C	`atogon/	\$0		\$0	
TOTAL State Costs by Category		Increased Costs		Decreased Costs	
3. State Costs by Source of Fund	S	increas	sea Costs	Decreased Costs	
GPR		\$0		\$0-	
		0			
FED				0	
		0		0	
PRO/PRS				-	
050/050.0		0		0	
SEG/SEG-S				-	
II. State Revenues - Complete this only when proposal will increase or decrease state revenues (e.g., tax increase, decrease increase)		Increa	sed Rev.	Decreased Rev.	
license fee,	, <u> </u>			\$ -	
GPR Taxes	,				
000 5					
GPR Earned				-	
FED				_	
FED					
PRO/PRS				_	
SEG/SEG-S				-	
TOTAL State Revenues				\$0-	
		<u> </u>		l	
	NET ANNUALIZED FISCAL IMPA	ACT			
	<u>STATE</u>		LOC	CAL	
NET CHANGE IN COSTS 0		0			
	,	Ŭ			
NET CHANGE IN REVENUES 0		0			

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