

**FISCAL NOTE**  
 LEGISLATIVE FISCAL ANALYST ESTIMATE

<b>ESTIMATE OF FISCAL IMPACT – STATE AGENCIES</b> (See narrative for political subdivision estimates)				
	<b>FY 2018-19</b>		<b>FY 2019-20</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.**

This bill establishes the Discriminatory Wage Practices Act. This bill changes the standard that prohibits wage discrimination on the basis of sex from wages that are at a rate "less for equal work" to wages that are "less for comparable work."

There would be minimal, one-time cost to the Equal Opportunity Commission which can be handled within existing resources.

<b>ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY &amp; POLT. SUB. RESPONSE</b>			
LB: 1014	AM:	AGENCY/POLT. SUB: Attorney General	
REVIEWED BY: Neil Sullivan	DATE: 1/29/2018	PHONE: <a href="tel:4024714179">(402) 471-4179</a>	
COMMENTS: No basis to disagree with the Attorney General estimate of no fiscal impact from LB 1014.			

<b>ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY &amp; POLT. SUB. RESPONSE</b>			
LB: 1014	AM:	AGENCY/POLT. SUB: Nebraska Equal Opportunity Commission	
REVIEWED BY: Neil Sullivan	DATE: 1/26/2018	PHONE: <a href="tel:4024714179">(402) 471-4179</a>	
COMMENTS: Insufficient information to concur or dispute with the Nebraska Equal Opportunity Commission estimate of fiscal impact from LB 1014.			

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

**2018**

**LB<sup>(1)</sup> 1014**

**FISCAL NOTE**

State Agency OR Political Subdivision Name: <sup>(2)</sup> Attorney General

Prepared by: <sup>(3)</sup> Josh Shasserre Date Prepared: <sup>(4)</sup> 1-26-18 Phone: <sup>(5)</sup> 471-2687

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

	<u>FY 2018-19</u>		<u>FY 2019-20</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>	<b>=====</b>	<b>=====</b>	<b>=====</b>	<b>=====</b>

Explanation of Estimate:

No Fiscal Impact

**BREAKDOWN BY MAJOR OBJECTS OF EXPENDITURE**

Personal Services:

<u>POSITION TITLE</u>	<u>NUMBER OF POSITIONS</u>		<u>2018-19</u>	<u>2019-20</u>
	<u>18-19</u>	<u>19-20</u>	<u>EXPENDITURES</u>	<u>EXPENDITURES</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Benefits.....	_____	_____	_____	_____
Operating.....	_____	_____	_____	_____
Travel.....	_____	_____	_____	_____
Capital outlay.....	_____	_____	_____	_____
Aid.....	_____	_____	_____	_____
Capital improvements.....	_____	_____	_____	_____
<b>TOTAL.....</b>	<b>_____</b>	<b>_____</b>	<b>_____</b>	<b>_____</b>

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

**2018**

**LB<sup>(1)</sup> 1014**

**FISCAL NOTE**

State Agency OR Political Subdivision Name: <sup>(2)</sup> Nebr Equal Opportunity Comm

Prepared by: <sup>(3)</sup> Kathleen Bogenreif Date Prepared: <sup>(4)</sup> 1-24-18 Phone: <sup>(5)</sup> 402-471-4061

ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION

	<u>FY 2018-19</u>		<u>FY 2019-20</u>	
	<u>EXPENDITURES</u>	<u>REVENUE</u>	<u>EXPENDITURES</u>	<u>REVENUE</u>
GENERAL FUNDS	<u>2,500.00</u>	_____	_____	_____
CASH FUNDS	_____	_____	_____	_____
FEDERAL FUNDS	_____	_____	_____	_____
OTHER FUNDS	_____	_____	_____	_____
TOTAL FUNDS	<u>2,500.00</u>	=====	=====	=====

Explanation of Estimate: **Research and develop appropriate forms and rules to enforce these changes.**

There may be some investigation impact caused by this bill. At this time it is hard to determine how much of an impact it would be.

BREAKDOWN BY MAJOR OBJECTS OF EXPENDITURE

Personal Services:

<u>POSITION TITLE</u>	<u>NUMBER OF POSITIONS</u>		<u>2018-19</u>	<u>2019-20</u>
	<u>18-19</u>	<u>19-20</u>	<u>EXPENDITURES</u>	<u>EXPENDITURES</u>
Benefits.....	_____	_____	_____	_____
Operating.....	_____	_____	<u>2,500.00</u>	_____
Travel.....	_____	_____	_____	_____
Capital outlay.....	_____	_____	_____	_____
Aid.....	_____	_____	_____	_____
Capital improvements.....	_____	_____	_____	_____
TOTAL.....	_____	_____	<u>2,500.00</u>	_____