PREPARED BY: DATE PREPARED: PHONE: Scott Danigole January 25, 2019 471-0055

**LB 324** 

Revision: 00

## **FISCAL NOTE**

LEGISLATIVE FISCAL ANALYST ESTIMATE

| ESTIMATE OF FISCAL IMPACT - STATE AGENCIES (See narrative for political subdivision estimates) |              |         |              |         |  |  |  |  |  |
|--|--------------|---------|--------------|---------|--|--|--|--|--|
|  | FY 201       | 9-20    | FY 2020-21   |         |  |  |  |  |  |
|  | 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.

LB 324 provides for any local governing body, the (Public Service) commission, or any public safety answering points involved in providing next-generation 911 service, shall, except for failure to use reasonable care or for intentional acts, be immune from liability or the payment of damages in providing next-generation 911 service.

No fiscal impact.

| ADIVIII                 | NISTRATIVE SERVICE | S STATE BUDGET DIVISION: REVIEW OF                         | AGENCY & POLT. SUB. RESPONSE           |  |  |
|-------------------------|--------------------|--|--|--|--|
| LB: 324                 | AM:                | AGENCY/POLT. SUB: Nebraska Public Service Commission (014) |  |  |  |
| REVIEWED BY: Joe Wilcox |                    | DATE: 01/25/2019   | PHONE: (402) 471-4178                  |  |  |
| COMMENTS<br>Agency from | ·                  | e Nebraska Public Service Commission (PS                   | C) estimate of No Fiscal Impact to the |  |  |

| $LB^{(1)}$                                      | 324          |            |                 |                           |                             |                         |              | <b>FISCAL NOTE</b>      |
|---|--------------|------------|-----------------|---------------------------|-----------------------------|-------------------------|--------------|-------------------------|
| State Agency OR Political Subdivision Name: (2) |              |            |                 | Public Service Commission |                             |                         |              |                         |
| Prepare   | ed by: (3)   | Laurie C   | asados          | Da                        | te Prepared: <sup>(4)</sup> | 1/24/2019               | Phone: (5)   | 402-471-0252            |
|   |              | ES         | TIMATE PROV     | VIDED B                   | Y STATE AGEN                | NCY OR POLITIC          | CAL SUBDIVIS | SION                    |
|   |              |            | FY              | 7 <b>2019-2</b> 0         | 2019-20                     |                         | FY 2020-21   |                         |
|   |              | <u>E</u>   | XPENDITURE      |                           | REVENUE                     | <u>EXPENDI</u>          |              | REVENUE                 |
| GENE  | RAL FUN      | DS _       |                 |                           |                             | _                       |              |                         |
| CASH 1  | FUNDS        | _          |                 | _                         |                             | _                       |              |                         |
| FEDER   | RAL FUNI     | DS         |                 |                           |                             |                         |              |                         |
| OTHE  | R FUNDS      | _          |                 |                           |                             |                         |              |                         |
| TOTAL   | L FUNDS      |            |                 |                           |                             |                         |              |                         |
| Explana   | ation of E   | stimate:   |                 | _                         |                             |                         |              |                         |
| This hi   | ill has no   | fiscal imp | act for the Pul | olic Servi                | ice Commissio               | n                       |              |                         |
| 11113 101                                       | iii rias rio | nocai inip |                 |                           | ice Commissio               |                         |              |                         |
|   |              |            |                 |                           |                             |                         |              |                         |
|   |              |            |                 |                           |                             |                         |              |                         |
|   |              |            | BREAKDO         | WN BY N                   | AJOR OBJECT                 | 'S OF EXPENDI'          | <br>ΓURE     |                         |
| Person  | al Service   | s:         |                 | HIMBED                    | OF POSITION                 | 0 2010                  |              |                         |
|   | POSIT        | ION TITL   |                 | 19-20                     | OF POSITION <u>20-21</u>    | S 2019<br><u>EXPEND</u> |              | 2020-21<br>EXPENDITURES |
|   |              |            |                 |                           |                             |                         |              |                         |
| Benefit   | s            |            |                 |                           |                             |                         |              |                         |
| Operati   | ing          |            |                 |                           |                             |                         |              |                         |
| Travel.   |              |            |                 |                           |                             |                         |              |                         |
| Capital   | outlay       |            |                 |                           |                             |                         |              |                         |
| Aid   |              |            |                 |                           |                             |                         |              |                         |
| -   | -            |            |                 |                           |                             |                         |              |                         |
| TO  | TAL          |            |                 |                           |                             |                         |              |                         |