**STATEMENT OF PURPOSE**

**[Provide a brief narrative summary]**

**FISCAL NOTE**

This legislation will have no impact on the state’s General fund or any dedicated fund or federal fund because **[Provide a brief description of why there will be no fiscal impact]**.

|  |  |  |  |
| --- | --- | --- | --- |
| **Fiscal Note Features** | **Yes** | **No** | **Description** |
| Would any excess spending be automatically drawn from PESF (or any other fund) or added to a deficiency warrant? |[ ] [ ]   |
| Does the bill have any revenue impacts for units of local government? |[ ] [ ]   |
| Has the fiscal note been reviewed by a third party (DFM or LBO)? |[ ] [ ]   |

**Contact:**

 **Name**

 **Agency Name**

 **Phone Number**