

1. From the Main Tracking Page, Search for a Bill and click on the Bill Number to open the Bill Details Page
2. Click on the Fiscal Note Support Forms button

Bill Details

Explain This Page

SB0001/HB0001*

Public Health - As enacted, prohibits a healthcare provider from performing on a minor or administering to a minor a medical procedure if the performance or administration of the procedure is for the purpose of enabling a minor to identify with, or live as, a purported identity inconsistent with the minor's sex. - AN ACT to amend Tennessee Code Annotated, Title 28; Title 29; Title 33; Title 34; Title 36; Title 37; Title 39; Title 40; Title 49; Title 56; Title 63; Title 68 and Title 71, relative to medical care of the young.

Sponsored by: **Johnson/Lamberth** Crawford, Hulsey, Hill, Holsclaw, Hawk, Hicks, Alexander, Moon, Eldridge, Faison, Zachary, Carringer, Davis, Richey, Howell, Cochran, Raper, Sexton, Vital, Helton-Haynes, Fritts, Ragan, Rudd, Slater, Powers, Baum, Keisling, Rudder, Hale, Butler, Williams, Sherrill, Garrett, Boyd, Bricken, Sparks, Lynn, Bulso, Marsh, McCalmon, Cepicky, Kumar, Doggett, Capley, Haston, Todd, Reedy, Darby, Grills, Littleton, Martin, Moody, White, Warner, Gant, Leatherwood, Crowe, Yager, White, Reeves, Bailey, Bowling, Haile, Stevens, Jackson, Hensley, Taylor, Rose,

Bill Analysis Fiscal Note Support Forms Commerce Impact Amendments Assignments

More Bill Information

3. Click Add New Fiscal Note Support Form Button

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SB1322 Fiscal Note Support Forms

There are currently no fiscal note support forms for the selected bill.

Add New Fiscal Note Support Form

The Fiscal Note Support Form page will be displayed.

***indicates required fields**

SB0039 Fiscal Note Support Form

* Denotes Required Field

General Information

* Bill or Amendment Number
(e.g. SB0001, HA0001, or other description)

* Bill or Amendment Type

- Original Bill
 Corrected Bill
 Amendment(s)
 Corrected Amendment(s)

* Preparer's Name

* Phone Number

 () -

* E-mail Address

* Explain specifically how this bill or amendment will impact your department or programs.

What changes, if any, will the bill or amendment make to the current operation of your department or agency? If the bill or amendment will impact future plans or policies of the department or agency that have not yet been implemented, please identify those changes as well.

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[Save Changes](#)

- Enter the Bill or Amendment Number.
- Select the Bill or Amendment Type.
- Enter the Preparer's Name.
- Enter the Phone Number.
- Enter the Email Address.
- In the text field, explain specifically how this bill or amendment will affect the department or programs.
- Click on the Save Changes button.

State Fiscal Impacts

- Enter the Increase and/or Decrease information for the Fiscal Year
- One-Time amounts
- Recurring amounts
- Fund Affected for the State Expenditures and State Revenues.

Note: Notice there are words that have question marks [?] beside them. Hover the mouse over the question mark and a brief definition for the word will display.

- In the text fields provided, enter the required information
- If State Revenue is forgone and/or if the dollar amount or source of funding will change beyond the first two fiscal years.
- Enter the State Net Fiscal Effect.
- Since this is a required field, if there is no state fiscal impact, enter a zero.
- Click on the Save Changes button.

Local Fiscal Impacts

- Enter the Increase and/or Decrease information for the Fiscal Year
- One-Time amounts (Mandatory and Permissive)
- Recurring amounts (Mandatory and Permissive) for the Local Expenditures
- Local Revenues
- In the text fields provided, enter the required information for additional explanation of local impact.
- If Local Revenue is forgone... and/or if the dollar amount or source of funding will change beyond the first two fiscal years.

Enter the Local Net Fiscal Effect.

- Since this is a required field, if there is no local fiscal impact, enter a zero
- If there is knowledge that there will be a local fiscal impact, but the amount cannot be calculated, enter a zero in the field and explain that the amount cannot be calculated in the Additional explanation of local impact field.
- Click on the Save Changes button.

Federal Fiscal Impacts

- Enter the Increase and/or Decrease information for the Fiscal Year
- One-Time amounts
- Recurring amounts
- Fund Affected for the Federal Funding.
- In the text fields provided, enter the required information to Identify federal programs to which these funds are attached and/or if the dollar amount or source of funding will change beyond the first two fiscal years.
- Click on the Save Changes button.

Other Fiscal Impacts

- In the text field provided, enter the required information.
- If the impact cannot be placed into the fields
- It is not specifically quantifiable
- It is a cost avoidance
- If additional information is needed to explain the fiscal impact(s)

Other Fiscal Impacts

If the impact cannot be placed into the above fields, is not specifically quantifiable, is a cost avoidance, or if additional information is needed to explain the fiscal impact(s), please elaborate.