<table>
<thead>
<tr>
<th>BILL NUMBER:</th>
<th>AUTHOR:</th>
</tr>
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<tbody>
<tr>
<td>INTRO/AMEND DATE:</td>
<td>AUTHOR’S POLITICAL PARTY:</td>
</tr>
<tr>
<td>BILL STATUS:</td>
<td></td>
</tr>
</tbody>
</table>

1) BILL SUBJECT:

2) FROM DEPARTMENT:

3) IS THIS ITEM SPECIFICALLY REFERENCED IN THE LEGISLATIVE PLATFORM?

4) WHICH POLICY-RELATED MATTER IS OF CONCERN WITH THIS BILL?

5) HOW WOULD THIS BILL IMPACT THE COUNTY? (*Current practices, responsibility, authority, pros/cons, affected programs and/or services, etc.*)

6) IMPACT ON COUNTY PROGRAM:
   - SANTA BARBARA COUNTY IMPACT: □ Major □ Minor □ None
   - STATEWIDE IMPACT: □ Major □ Minor □ None

   *Explanation of Impacts:*

7) WOULD THIS BILL IMPACT:
   a. Efficient service delivery and operations? □ YES □ NO
   b. Fiscal stability? □ YES □ NO
   c. Inter-agency cooperation? □ YES □ NO
   d. Local control? □ YES □ NO
   e. Protection of safety net services? □ YES □ NO
   f. Community sustainability/economic stability? □ YES □ NO

*Additional Comments:*
COUNTY OF SANTA BARBARA
LEGISLATIVE ANALYSIS FORM

8) FISCAL IMPACT ON THE COUNTY:
☐ Revenue Increase     ☐ Revenue Decrease     ☐ Unfunded Mandate
☐ Cost Increase        ☐ Cost Decrease        ☐ Undetermined
☐ None

Additional Comments:

9) OTHER AGENCIES THAT SHOULD REVIEW THIS BILL:

Please list other agencies below:

10) CSAC POSITION ON BILL:
☐ Support               ☐ Oppose
☐ Oppose unless Amended ☐ Watch
☐ Support if Amended    ☐ No position taken

11) OTHER LOCAL OR STATEWIDE ORGANIZATIONS THAT HAVE TAKEN A POSITION ON THIS BILL:
(Indicate support or opposition for each)

12) PROPOSED AMENDMENTS: (Attach separate sheet)

13) RECOMMENDATION:
☐ Active Support*       ☐ Support if Amended*
☐ Active Opposition*    ☐ Oppose unless Amended*
☐ Watch                 ☐ No Position (Why?)
☐ Concerns (Why? Explain in #6)

* Indicates that the department believes that the Board of Supervisors should take a formal position on this bill

Additional Comments:

14) LEGISLATIVE ANALYSIS FORM PREPARED BY:

Telephone extension:

E-mail address: