

HB

27

<TARGET><BILL>HB 27</BILL><SUBJECT>HB
27</SUBJECT><COMM>HMLV27</COMM></TARGET>

CS FOR HOUSE BILL NO. 27(MLV)

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTY-SEVENTH LEGISLATURE - FIRST SESSION

BY THE HOUSE SPECIAL COMMITTEE ON MILITARY AND VETERANS' AFFAIRS

Offered:
Referred:

Sponsor(s): REPRESENTATIVES THOMAS, HERRON, FEIGE, AND SADDLER, Millett, Thompson

A BILL

FOR AN ACT ENTITLED

1 **"An Act relating to the disposition of remains of a member of the armed forces if the**
2 **member dies while in a duty status."**

3 **BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

4 * **Section 1.** AS 26.05 is amended by adding a new section to read:

5 **Sec. 26.05.262. Disposition of remains of members of organized militia on**
6 **duty status under Military Record of Emergency Data Form (DD Form 93).** If a
7 member of the organized militia who is in active state service has executed the United
8 States Department of Defense Military Record of Emergency Data Form (DD Form
9 93), or its successor form, to serve as a record of emergency data and, on that form,
10 has designated a person who is authorized to direct the disposition of the member's
11 remains if the member dies while in a duty status as described in 10 U.S.C. 1481,
12 notwithstanding any other provision of law, the person authorized to direct the
13 disposition of remains on the executed form has the right to make the decisions
14 concerning the disposition of the member's remains.

1 * **Sec. 2.** AS 26.10 is amended by adding a new section to read:

2 **Sec. 26.10.065. Disposition of remains of state resident armed forces**
3 **personnel on duty status.** (a) Except as provided in (b) of this section, if a state
4 resident who is a member of the armed forces has executed the United States
5 Department of Defense Military Record of Emergency Data Form (DD Form 93), or
6 its successor form, to serve as a record of emergency data and, on that form, has
7 designated a person who is authorized to direct the disposition of the member's
8 remains if the member dies while in a duty status as described in 10 U.S.C. 1481,
9 notwithstanding any other provision of law, the person authorized to direct the
10 disposition of remains on the executed form has the right to make the decisions
11 concerning the disposition of the member's remains.

12 (b) If a state resident who is a member of the United States Coast Guard has
13 executed the United States Coast Guard Designation of Beneficiaries and Record of
14 Emergency Data Form (CG-2020D), or its successor form, to serve as a record of
15 emergency data and, on that form, has designated a person who is authorized to direct
16 the disposition of the member's remains if the member dies while in a duty status as
17 described in 10 U.S.C. 1481, notwithstanding any other provision of law, the person
18 authorized to direct the disposition of remains on the executed form has the right to
19 make the decisions concerning the disposition of the member's remains.



REPRESENTATIVE BILL THOMAS

ALASKA STATE LEGISLATURE DISTRICT 5

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Sponsor Statement for HB 27

“An Act Relating to the Disposition of Remains of a Member of the Military if the Member Dies While in a Duty Status.”

The Department of Defense requires all active duty service members, reservists, and guard members to fill out a DD Form 93. This form has crucial information that is used by the Department of Defense in the event of an emergency and to direct service members remains to their proper resting place. The DD Form 93 is updated every year and before each deployment so that the most current information is available.

Unfortunately, there have been occasions where the disposition of a service member's remains have been delayed due to conflicts between the DD Form 93 and state statute. This results in even more distress in an already sorrowful situation.

Currently, Alaska's statutes do not specifically recognize the DD Form 93. HB 27 remedies this problem by aligning our state statutes with current military procedure which will avoid potential and unnecessary conflicts should a service member die in the line of duty.

I strongly urge your support of HB 27.

27-LS0191VB
Bannister
1/26/11

CS FOR HOUSE BILL NO. 27()
IN THE LEGISLATURE OF THE STATE OF ALASKA
TWENTY-SEVENTH LEGISLATURE - FIRST SESSION

BY

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Sponsor(s): REPRESENTATIVES THOMAS, HERRON, FEIGE, AND SADDLER, Millett, Thompson

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19 make the decisions concerning the disposition of the member's remains.



REPRESENTATIVE BILL THOMAS

ALASKA STATE LEGISLATURE DISTRICT 5

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Changes in CSHB 27

“An Act Relating to the Disposition of a Member of the Military if the Member Dies while in a Duty Status”

It was brought to our attention that there was question as to whether United States Coast Guard (USCG) service members would be covered under this provision.

Due to its unique status, the USCG is only considered “military personnel” during times of war but otherwise operate under Homeland Security, hence the need to specifically recognize them and their form (which mirrors the DD Form 93) in a new section, 2 (b).

Additionally, in Section 2, “military personnel” was changed to “armed forces” to encompass the USCG.

HB27 Testifier List

MARK B. SAN SOUCI

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See item 13a. on page 2 and instructions for same item number at the bottom of page 4 for required actions to be taken by Service members to designate a person authorized to direct disposition (PADD).

RECORD OF EMERGENCY DATA

PRIVACY ACT STATEMENT

AUTHORITY: 5 USC 552, 10 USC 655, 1475 to 1480 and 2771, 38 USC 1970, 44 USC 3101, and EO 9397 (SSN)
PRINCIPAL PURPOSES: This form is used by military personnel and Department of Defense civilian and contractor personnel, collectively referred to as civilians, when applicable. For military personnel, it is used to designate beneficiaries for certain benefits in the event of the Service member's death. It is also a guide for disposition of that member's pay and allowances if captured, missing or interned. It also shows names and addresses of the person(s) the Service member desires to be notified in case of emergency or death. For civilian personnel, it is used to expedite the notification process in the event of an emergency and/or the death of the member. The purpose of soliciting the SSN is to provide positive identification. All items may not be applicable.
ROUTINE USES: None.
DISCLOSURE: Voluntary; however, failure to provide accurate personal identifier information and other solicited information will delay notification and the processing of benefits to designated beneficiaries if applicable.

INSTRUCTIONS TO SERVICE MEMBER

This extremely important form is to be used by you to show the names and addresses of your spouse, children, parents, and any other person(s) you would like notified if you become a casualty (other family members or fiancé), and, to designate beneficiaries for certain benefits if you die. IT IS YOUR RESPONSIBILITY to keep your Record of Emergency Data up to date to show your desires as to beneficiaries to receive certain death payments, and to show changes in your family or other personnel listed, for example, as a result of marriage, civil court action, death, or address change.

INSTRUCTIONS TO CIVILIANS

This extremely important form is to be used by you to show the names and addresses of your spouse, children, parents, and any other person(s) you would like notified if you become a casualty. Not every item on this form is applicable to you. This form is used by the Department of Defense (DoD) to expedite notification in the case of emergencies or death. It does not have a legal impact on other forms you may have completed with the DoD or your employer.

IMPORTANT: This form is divided into two sections: Section 1 - Emergency Contact Information and Section 2 - Benefits Related Information. READ THE INSTRUCTIONS ON PAGES 3 AND 4 BEFORE COMPLETING THIS FORM.

SECTION 1 - EMERGENCY CONTACT INFORMATION

1. NAME (Last, First, Middle Initial)	2. SSN
--	---------------

3a. SERVICE/CIVILIAN CATEGORY <input type="checkbox"/> ARMY <input type="checkbox"/> NAVY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> AIR FORCE <input type="checkbox"/> DoD <input type="checkbox"/> CIVILIAN <input type="checkbox"/> CONTRACTOR	b. REPORTING UNIT CODE/DUTY STATION
---	--

4a. SPOUSE NAME (if applicable) (Last, First, Middle Initial) <input type="checkbox"/> SINGLE <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED	b. ADDRESS (Include ZIP Code) AND TELEPHONE NUMBER
--	---

5. CHILDREN			
a. NAME	b. RELATIONSHIP	c. DATE OF BIRTH	d. ADDRESS
(Last, First, Middle Initial)		(YYYYMMDD)	(Include ZIP Code) AND TELEPHONE NUMBER

6a. FATHER NAME (Last, First, Middle Initial)	b. ADDRESS (Include ZIP Code) AND TELEPHONE NUMBER
--	---

7a. MOTHER NAME (Last, First, Middle Initial)	b. ADDRESS (Include ZIP Code) AND TELEPHONE NUMBER
--	---

8a. DO NOT NOTIFY DUE TO ILL HEALTH	b. NOTIFY INSTEAD
--	--------------------------

9a. DESIGNATED PERSON(S) (Military only)	b. ADDRESS (Include ZIP Code) AND TELEPHONE NUMBER
---	---

10. CONTRACTING AGENCY AND TELEPHONE NUMBER (Contractors only)

INSTRUCTIONS FOR PREPARING DD FORM 93

(See appropriate Service Directives for supplemental instructions for completion of this form at other than MEPS)

All entries explained below are for electronic or typewriter completion, except those specifically noted. If a computer or typewriter is not available, print in black or blue-black ink insuring a legible image on all copies. Include "Jr.," "Sr.," "III" or similar designation for each name, if applicable. When an address is entered, include the appropriate ZIP Code. If the member cannot provide a current address, indicate "unknown" in the appropriate item. Addresses shown as P.O. Box Numbers or RFD numbers should indicate in Item 14, "Continuations/Remarks", a street address or general guidance to reach the place of residence. In addition, the notation "See Item 14" should be included in the item pertaining to the particular next of kin or when the space for a particular item is insufficient. If the address for the person in the item has been shown in a preceding item, it is unnecessary to repeat the address, however, the name must be entered. Those items that are considered not applicable to civilians will be left blank.

ITEM 1. Enter full last name, first name, and middle initial.

ITEM 2. Enter social security number (SSN).

ITEM 3a. Service. **Military:** Mark X in appropriate block. **Civilian:** Mark two blocks as appropriate. Examples: an Army civilian would mark Army and either Civilian or Contractor; a DoD civilian, without affiliation to one of the Military Services, would mark DoD and then either Civilian or Contractor as appropriate.

ITEM 3b. Reporting Unit Code/Duty Station. See Service Directives.

ITEM 4a. Spouse Name. Enter last name (if different from Item 1), first name and middle initial on the line provided. If single, divorced, or widowed, mark appropriate block.

ITEM 4b. Address and Telephone Number. Enter the "actual" address and telephone number, not the mailing address. Include civilian title or military rank and service if applicable. If one of the blocks in 4a is marked, leave blank.

ITEM 5a-d. Children. Enter last name (only if different from Item 1) first name and middle initial, relationship, and date of birth of all children. If none, so state. Include illegitimate children if acknowledged by member or paternity/maternity has been judicially decreed. Relationship examples: son, daughter, stepson or daughter, adopted son or daughter or ward. Date of birth example: 19950704. For children not living with the member's current spouse, include address and name and relationship of person with whom residing in item 5d.

ITEM 6a. Father Name. Last name, first name and middle initial.

ITEM 6b. Address and Telephone Number of Father. If unknown or deceased, so state. Include civilian title or military rank and service if applicable. If other than natural father is listed, indicate relationship.

ITEM 7a. Mother Name. Last name, first name and middle initial.

ITEM 7b. Address and Telephone Number of Mother. If unknown or deceased, so state. Include civilian title or military rank and service if applicable. If other than natural mother is listed, indicate relationship.

ITEM 8. Persons Not to be Notified Due to Ill Health.
a. List relationship, e.g., "Mother," of person(s) listed in Items 4, 5, 6, or 7 who are not to be notified of a casualty due to ill health. If more than one child, specify, e.g., "daughter Susan." Otherwise, enter "None".
b. List relationship, e.g., "Father" or name and address of person(s) to be notified in lieu of person(s) listed in item 8a. If "None" is entered in Item 8a, leave blank.

ITEM 9a. This item will be used to record the name of the person or persons, if any, other than the member's primary next of kin or immediate family, to whom information on the whereabouts and status of the member shall be provided if the member is placed in a missing status. Reference 10 USC, Section 655. **NOT APPLICABLE to civilians.**

ITEM 9b. Address and telephone number of Designated Person(s). **NOT APPLICABLE to civilians.**

ITEM 10. Contracting Agency and Telephone Number (**Contractors only**). **NOT APPLICABLE to military personnel.** Civilian contractors will provide the name of their contracting agency and its telephone number. Example: XYZ Electric, (703) 555-5689. The telephone number should be to the company or corporation's personnel or human resources office.

ITEM 11a. Beneficiary(ies) for Death Gratuity (**Military only**). Enter first name(s), middle initial, and last name(s) of the person(s) to receive death gratuity pay. A member may designate one or more persons to receive all or a portion of the death gratuity pay. The designation of a person to receive a portion of the amount shall indicate the percentage of the amount, to be specified only in 10 percent increments, that the person may receive. If the member does not wish to designate a beneficiary for the payment of death gratuity, enter "None," or if the full amount is not designated, the payment or balance will be paid as follows:

- (1) To the surviving spouse of the person, if any;
- (2) To any surviving children of the person and the descendants of any deceased children by representation;
- (3) To the surviving parents or the survivor of them;
- (4) To the duly appointed executor or administrator of the estate of the person;
- (5) If there are none of the above, to other next of kin of the person entitled under the laws of domicile of the person at the time of the person's death.

The member should make specific designations, as it expedites payment.

INSTRUCTIONS FOR PREPARING DD FORM 93

(Continued)

ITEM 11a. (Continued) Seek legal advice if naming a minor child as a beneficiary. If a member has a spouse but designates a person other than the spouse to receive all or a portion of the death gratuity pay, the Service concerned is required to provide notice of the designation to the spouse. **NOT APPLICABLE to civilians.**

Item 11b Relationship. **NOT APPLICABLE to civilians.**

ITEM 11c. Enter beneficiary(ies) full mailing address and telephone number to include the ZIP Code. **NOT APPLICABLE to civilians.**

ITEM 11d. Show the percentage to be paid to each person. Enter 10%, 20%, 30%, up to 100% as appropriate. The sum shares must equal 100 percent. If no percent is indicated and more than one person is named, the money is paid in equal shares to the persons named. **NOT APPLICABLE to civilians.**

ITEM 12a Beneficiary(ies) for Unpaid Pay/Allowance (Military only) Enter first name(s), middle initial, last name(s) and relationship of person to receive unpaid pay and allowances at the time of death. The member may indicate anyone to receive this payment. If the member designated two or more beneficiaries, state the percentage to be paid each in item 10c. If the member does not wish to designate a beneficiary, enter "By Law." The member is urged to designate a beneficiary for unpaid pay and allowances as payment will be made to the person in order of precedence by law (10 USC 2771) in the absence of a designation. Seek legal advice if naming a minor child as beneficiary. **NOT APPLICABLE to civilians.**

ITEM 12b Enter beneficiary(ies) full mailing address and telephone number to include the ZIP Code. **NOT APPLICABLE to civilians.**

ITEM 12c. If the member designated two or more beneficiaries, state the percentage to be paid each in this section. The sum shares must equal 100 percent. **NOT APPLICABLE to civilians.**

ITEM 13a Enter the name and relationship of the Person Authorized to Direct Disposition (PADD) of your remains should you become a casualty. Only the following persons may be named as a PADD: surviving spouse, blood relative of legal age, or adoptive relatives of the decedent. If neither of these three can be found, a person standing in loco parentis may be named. **NOT APPLICABLE to civilians.**

ITEM 13b. Address and telephone number of PADD. **NOT APPLICABLE to civilians.**

ITEM 14. Continuations/Remarks. Use this item for remarks or continuation of other items, if necessary. Prefix entry with the number of the item being continued; for example, 5/John J./son/ 19851220/321 Pecan Drive, Schertz TX 78151. Also use this item to list name, address, and relationship of other persons the member desires to be notified. Other dependents may also be listed. This block offers the greatest amount of flexibility for the member to record other important information not otherwise requested but considered extremely useful in the casualty notification and assistance process. Besides continuing information from other blocks on this form, the member may desire to include additional information such as: NOK language barriers, location or existence of a Will, additional private insurance information, other family member contact numbers, etc. If additional space is required, attach a supplemental sheet of standard bond paper with the information.

ITEM 15. Signature of Service Member/Civilian. Check and verify all entries and sign all copies in ink as follows: First name, middle initial, last name. Include rank, rate, or grade if applicable. May be electronically signed (see DoD Instruction 1300.18 for guidelines).

ITEM 16. Signature of Witness. Have a witness (disinterested person) sign all copies in ink as follows: First name, middle initial, last name. Include rank, rate, or grade as appropriate. A witness signature is not required for electronic versions of the DD Form 93 (see DoD Instruction 1300.18).

ITEM 17. Date the member or civilian signs the form. This item is an ink entry and must be completed on all copies.



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Issue 9: During its first year of consideration (2010 legislative session), 21 states aligned state with Federal policies regarding the disposition of military members who die on active duty.

Comport State Laws with DoD Rules on Disposition

Issue: State laws on the disposition of human remains do not currently provide for the accommodation of the expressed, written wishes of service members through execution of the federally prescribed "Record of Emergency Data"

According to [Section 564 of Public Law 109-163](#), effective January 2006, service members [as defined in [Title 10, United States Code, Section 1481\(a\)\(1\) - \(8\)](#)] must designate a person authorized to direct disposition of human remains (PADD). The law, [Title 10, United States Code, Section 1482\(c\)](#), specifies a list of possible designees, but does not stipulate any specific order.

States may not recognize the PADD as the legal designee because the state does not recognize the [DD Form 93 \(Record of Emergency Data\)](#) completed by service members to designate a PADD. The DD Form 93 restricts a services member to designating his or her "surviving spouse, blood relative of legal age, or adoptive relatives of the decedent. If neither of these three can be found, a person in loco parentis may be named."

Without a recognized agent, state statutes normally have a prescribed order of who is recognized as the next-of-kin designated to direct disposition, starting with a spouse, followed by adult children and parents. Because some state laws do not currently recognize the federal form as an acceptable one for service members, there have been several instances of civil actions between family members over the ultimate disposition of a fallen service member's remains.

Desired Outcome: Eliminate potential conflict with federal law, which may reduce the potential for family conflict at a time of bereavement, by states amending their laws on disposition of human remains to recognize the DD Form 93 as the authoritative written instrument for service members.

Progress: Ten states currently recognizes the DD 93 as the authoritative document for use by service members; however, we estimate nine states have statutes with sufficient latitude to allow for its use. The remaining states either do not provide for the designation of an agent, require use of a state specific form, or require a certain type of witnessing that might preclude the recognition of the DD Form 93. In order to add clarity for both family members and funeral directors, we believe statutes in all 50 states should include a statement recognizing the authority of the DD Form 93. The map below provides our current estimation of state flexibility for considering designations made on the DD Form 93.

- [DD Form 93 \(Record of Emergency Data\)](#)
- [Public Law 109-163 Sec. 564](#)
- [Title 10 USC, Sec. 1481\(a\)\(1-8\)](#)
- [Title 10 USC, Sec. 1482\(c\)](#)

Best Practice Examples:

The following are bills that were enacted in 2010 that provide for recognition of the DD Form 93:

[Arizona HB 2400](#)
[Mississippi SB 2418](#)
[Maryland SB 408](#)

Lists of states that have adopted similar legislation.

IDAHO

WYOMING

UTAH

COLORADO

WISCONSIN

IOWA

MISSOURI

INDIANA

OHIO

VIRGINIA

TENNESSEE

N CAROLINA

S CAROLINA

GEORGIA

ALABAMA

FLORIDA

MISSISSIPPI

DELAWARE

MARYLAND

States with similar legislation pending.

PENNSYLVANIA

MICHIGAN

NEW YORK

This list was last updated in August 27, 2010

Information from:

<http://cs.mhf.dod.mil/content/dav/mhf/QOL-Library/Project%20Documents/USA4%20Military%20Families/PADD.pdf>



February 7, 2011

Representative Dan Saddler
Representative Bill Thomas
Co-Chairman
House Special Committee on Military and Veterans Affairs

REF: HR27/SB 33

One of the most frustrating and difficult problems we often face as the state's only statewide Veterans Foundation (501c3) representing about 80,000 veterans and their families, is when a veteran or service member dies or is killed in action and we can not find their family.

This happens more then you would think. It's really part of our culture now that many elderly veterans, as a result of divorce or estrangement, die without an ability to notify their next of kin. Just in December of last year we had a two tour decorated Marine, Vietnam Veteran die at home alone and our best efforts and those of the US Department of Veterans Affairs as well as the Department of Defense were unable to find his ex-wife nor his son so that they could be involved in his internment at our National Cemetery.

We strongly support this bill, introduced by you on behalf of our active duty, guard, and reserves that makes it clear that the State of Alaska is in line with most other states in a process that provides for the disposition of service members remains.

We hope this bill becomes law this session, so that this year we can have a process recognized by the State to address this tragedy.

Paul Sheehan
Executive Director



Chapter 904 - Anchorage, Alaska "An Agenda of Service"

February 7, 2011

Co-Chairman
Representative Bill Thomas
Representative Dan Saddler
House Special Committee on Military and Veterans Affairs

REF: HR27

Mr. Chairman,

Just wanted to send you a note to show our support of HB27, which you have shown leadership on.

We work with the Alaska Veterans Foundation, Inc. and our local hospitals to ensure that no veteran dies alone. It happens.

Although your bill will not directly address this challenge it does help clarify the process we in Alaska will follow when faced with the remains of a service member and/or in some cases veteran with no next of kin available.

Unfortunately this is a growing problem due to the number of our citizens who are estranged from their immediate family.

Again, thanks for being there in support of our military and veterans.

It is an honor,

Ric Davidge
President, VVA 904

FISCAL NOTE

STATE OF ALASKA
2011 LEGISLATIVE SESSION

Fiscal Note Number _____
 Bill Version HB 027
 () Publish Date _____

Identifier (file name): HB027-DMVA-VS-2-7-11
 Title Disposition of Service Members' Remains
 Sponsor Thomas, Herron, Feige, Saddler, Millett, Thompson
 Requester Military & Veterans Affairs Special Committee
 Dept. Affected Military & Veterans Affairs
 Appropriation Military & Veterans Affairs
 Allocation Veterans' Services
 OMB Component Number 9

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

	Appropriation Required	Information						
		FY 2012	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017
OPERATING EXPENDITURES								
Personal Services								
Travel								
Services								
Commodities								
Capital Outlay								
Grants								
Miscellaneous								
TOTAL OPERATING		0.0	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURES								
-----------------------------	--	--	--	--	--	--	--	--

CHANGE IN REVENUES								
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FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts								
1003 GF Match								
1004 GF								
1005 GF/Program Receipts								
1037 GF/Mental Health								
Other (please identify)								
TOTAL		0.0	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2011) cost 0.0

POSITIONS

Full-time								
Part-time								
Temporary								

Why this fiscal note differs from previous version (if initial version, please note as such)

Initial fiscal note.

Prepared by Verdie Bowen, Veterans Affairs Administrator
 Division Veterans' Services, Dept of Military and Veterans Affairs
 Approved by McHugh Pierre, Deputy Commissioner, Dept of Military and Veterans Affairs

Phone (907) 428-6881
 Date/Time 2/7/11 10:00 AM
 Date 2/7/2011

FISCAL NOTE

**STATE OF ALASKA
2011 LEGISLATIVE SESSION**

BILL NO. HB 027

Analysis

There is no fiscal impact.