## OPIOID SETTLEMENT FUND ANNUAL FINANCIAL REPORT

NOTE: PLEASE COMPLETE THIS FORM USING EITHER ADOBE ACROBAT PRO OR READER	
NAME OF ENTITY: Idaho County	~
NAME OF OFFICIAL FILLING OUT REPORT: Kathy M. Ackerman	
PHONE NUMBER: (208) 983-2751	
EMAIL ADDRESS: kackerman@idahocounty.org	
OPIOID SETTLEMENT FUNDS BALANCE AT BEGINING OF FY 23: \$0.00	
OPIOID SETTLEMENT FUNDS RECEIVED IN FY 23: \$79,895.79	
TOTAL OPIOID SETTLEMENT FUND EXEPNDITURES IN FY 23: \$0.00	
OPIOID SETTLEMENT FUND BALANCE AT END OF FY 23: \$79,895.79	
ITEMIZATION OF PAYMENTS RECEIVED:	

Payment Date	Payment Amount	Source of Payme	ent			
7-31-22	12,70531	National Op	oid	Settlement		
9-30-22	13,367-166	ol .	"	Lı		
10-31-22	51,286.65	ι(	"	и		
1-31-23	2,651.17	· (	11	U	TOTAL: \$0.00- \$79, 890	2.30

## **ITEMIZATION OF EXPENDITURES:**

\*List of approved uses with section and subsections available here

Approved Use	Approved Use	Description of Use	Amount
Section	Subsection		Expended
	▼		
	▼		
	▼		
	▼		
	▼		
	▼		
	▼		
	▼		
	▼		
	▼		

**TOTAL:** \$0.00

By signing below I warrant that all information provided in this form is true and correct; that all opioid settlement funds expended by the above entity have been expended on approved uses as provided in Exhibit A to the Idaho Opioid Settlement Intrastate Allocation Agreement linked to above and included on this form; and that I have the necessary authority to sign and submit this form on behalf of the above entity.

SIGNATURE:	Kethy M Adurna	<b>DATE:</b> 07/18/2023