

**OPIOID SETTLEMENT FUND ANNUAL FINANCIAL REPORT**

**NOTE: PLEASE COMPLETE THIS FORM USING EITHER ADOBE ACROBAT PRO OR READER**

**NAME OF ENTITY:** Meridian City  
**NAME OF OFFICIAL FILLING OUT REPORT:** Amie Rose  
**PHONE NUMBER:** (208) 489-0415  
**EMAIL ADDRESS:** amierose@meridiancity.org

**OPIOID SETTLEMENT FUNDS BALANCE AT BEGINING OF FY 23:** \$36,051.03

**OPIOID SETTLEMENT FUNDS RECEIVED IN FY 23:** \$190,651.48

**TOTAL OPIOID SETTLEMENT FUND EXEPNDITURES IN FY 23:** \$86,055.19

**OPIOID SETTLEMENT FUND BALANCE AT END OF FY 23:** \$140,647.32

**ITEMIZATION OF PAYMENTS RECEIVED:**

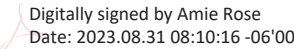
Payment Date	Payment Amount	Source of Payment
10/13/2022	\$37,887.87	Wilmington Trust CK# 16963 - National Opioids Settlement FD
10/27/2022	\$145,524.72	Wilmington Trust CK# 17375 - National Opioids Settlement FD
02/07/2023	\$7,238.89	Wilmington Trust CK# 20318 - NOAT II General Trust Account
<b>TOTAL:</b> <u>\$190,651.48</u>		

**ITEMIZATION OF EXPENDITURES:**

*\*List of approved uses with section and subsections available [here](#)*

Approved Use Section	Approved Use Subsection	Description of Use	Amount Expended
G	5	Fund community Anti-Drug Coalition Coordinator that engages in drug prevention efforts	\$86,055.19
<b>TOTAL:</b> <u>\$86,055.19</u>			

*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:** Amie Rose  **DATE:** 08/31/2023