OPIOID SETTLEMENT FUND 2024 FISCAL YEAR FINANCIAL REPORT

NOTE: PLEASE FIRST REVIEW THE ANNUAL REPORT'S <u>INSTRUCTION SHEET</u>, DOWNLOAD AND SAVE THE FORM, THEN COMPLETE THIS FORM USING EITHER <u>ADOBE ACROBAT PRO</u> OR <u>READER</u>

NAME OF ENTITY:	
NAME & TITLE OF PERSON FILLING OUT REPORT:	
EMAIL:	
PHONE NUMBER:	

Should all future opioid-related correspondence go to you? Yes O No O NAME & TITLE:

EMAIL:

INFORMATION ABOUT PAYMENTS THE SUBDIVISION RECEIVED (All information required)

Funds balance at end of FY 2023 (July 1, 2022-June 30, 2023):	\$
Settlement funds received in FY 2024 (July 1, 2023-June 30, 2024):	\$
Settlement funds expended in FY 2024 (July 1, 2023-June 30 2024):	\$
Settlement funds balance at end of FY 2024 (June 30, 2024):	\$

DETAILS ABOUT FUNDS RECEIVED DURING THE FISCAL YEAR (All information required)

Payment Date	Payment Amount	Source of Payment
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	Total American Dessived	. ć

Total Amount Received: \$

INFORMATION ABOUT FUNDS EXPENDED ON APPROVED USES (EXHIBIT A) (All information

required) (Please attach additional pages if needed)

Approved Use Section	Approved Use Subsection	Payment Amount
		\$
		\$
		\$
		\$
		\$
		\$
		\$
	Total Amount Expended:	\$

I uploaded copies of the subdivision's budget sections or resolution(s) that support the subdivision's disbursements. Yes O \sim No O

Add Attachments, one at a time:

ADD ATTACHMENT

If "No," explain why the required documents are not attached:

I uploaded copies of other supporting records that the subdivision wants the Attorney General's Office and public to review. Yes O No O

Add Attachments, one at a time:

ADD ATTACHMENT

PUBLIC RECORDS ACT NOTICE

This report and all uploaded documents are public records and will be published on the Attorney General's website at ag.idaho.gov. The Attorney General also will provide a copy of the report and all uploaded documents to the opioid settlement administrator and anyone who submits a public record request.

ACKNOWLEDGEMENTS

By typing my name below, I warrant that: (a) all information provided in this report is true and correct, (b) all opioid settlement funds expended by the subdivision were expended on approved uses as provided in Exhibit A, and (c) I have the necessary authority to sign and submit this report on behalf of the subdivision.

SIGNATURE - *type name here:*

DATE:



Project Name: 95	76612P - Opioid Settlement Posting														
Category	Posting Account	Summary Account Desc	July	August	September	October	November	December	January	February	March	April	May	June	Year-to-Date
0 Income	456800 - Other St Grts/Contr	State Grants & Contributions	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	677,240.66	0.00	0.00	677,240.
10 Income - Tota	t i i i i i i i i i i i i i i i i i i i		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	677,240.66	0.00	0.00	677,240.
50 Personnel	500 - BUDGET USE ONLY - GROSS SALARY AND WAGES	Gross Salary And Wages	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	<u>0.</u>
	500100 - Employees	Gross Salary and Wages	-334.54	-1,460.71	-3,568.77	-4,230.66	-2,723.28	-3,174.51	-3,649.01	-3,213.05	-3,598.87	-2,819.92	-2,695.82	-3,949.53	-35,418.0
	512 - BUDGET USE ONLY - EMPLOYEE BENEFITS	Employee Benefits	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.0
	512000 - Group Ins Life	Employee Benefits	-3.69	-7.62	-29.54	0.00	-39.79	-32.30	-35.11	-16.15	-15.79	-24.77	-11.75	-25.32	-241.4
	513000 - Group Ins Hlth & Accid	GRP INS HLTH & ACCID	-64.48	-362.13	-382.96	-1,061.89	-671.79	-1,327.39	-1,159.04	-862.88	-697.58	-763.10	-510.77	-1,115.32	-8,979.3
	514000 - Worker's Compensation	Employee Benefits	-0.89	-2.55	-5.73	-6.72	-4.56	-9.37	-5.70	-5.01	-5.61	-5.57	-4.43	-6.13	-62.3
	517000 - Empr Retire Contr	Employee Benefits	-39.94	-163.31	-398.98	-472.99	-304.48	-354.91	-407.95	-359.21	-402.35	-315.28	-301.39	-492.62	-4,013.4
	524000 - Personnel Commission	Employee Benefits	-3.34	6.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.9
	526000 - F. I. C. A.	Employee Benefits	-25.22	-106.92	-267.89	-312.39	-198.99	-226.11	-262.60	-234.22	-265.42	-205.19	-199.55	-322.60	-2,627.1
50 Personnel - To	tal		-472.10	-2,096.99	-4,653.87	-6,084.65	-3,942.89	-5,124.59	-5,519.41	-4,690.52	-4,985.62	-4,133.83	-3,723.71	-5,911.52	-51,339.7
55 Expenses	552600 - Data Line Charges	Communication Costs	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-202.44	0.00	0.00	0.00	-202.4
	558000 - Individual Organization Memberships	Employee Development	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-132.63	-132.6
	558400 - Training Services	Employee Development	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-1,364.40	0.00	0.00	0.00	-1,364.4
	559 - BUDGET USE ONLY - GENERAL SERVICES	General Services	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.0
	562014 - Other Services	General Services	0.00	0.00	0.00	0.00	-13,000.00	0.00	0.00	0.00	0.00	0.00	-10,000.00	0.00	-23,000.0
	576500 - Promotion/Publicity	Professional Services	0.00	0.00	-287.08	-7,500.00	-46.40	0.00	0.00	-6,222.45	-316.89	-1,770.62	-309.15	-6,600.00	-23,052.5
	595500 - Meeting & Training Meals And Refreshments	Misc. Travel and Moving Costs	-52.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-52.8
	598500 - Subsist In-State	Employee In State Travel Costs	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-302.50	-302.5
	599100 - Pers Vehicle - In-State	Employee In State Travel Costs	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-140.70	-140.7
	601500 - Lodging - In State	Employee In State Travel Costs	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-372.90	-473.00	-845.9
	603600 - Subsist Out-State	Employee Out Of State Travel Costs	0.00	0.00	0.00	0.00	0.00	-163.20	0.00	0.00	0.00	0.00	0.00	-210.45	-373.6
	605400 - Cmrcl Air Out-State	Employee Out Of State Travel Costs	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-41.14	0.00	-41.1
	606600 - Lodging - Out Of State	Employee Out Of State Travel Costs	0.00	0.00	0.00	0.00	-256.00	0.00	0.00	0.00	0.00	0.00	-339.44	0.00	-595.4
	606900 - Other Out Of State Employee Trvl Costs	Employee Out Of State Travel Costs	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-70.00	-70.0
	614000 - Non-Capital Office Equip	Administrative Supplies	0.00	0.00	-186.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-186.9
	616300 - Vehicle Operating Costs	Fuel & Lubricants	0.00	0.00	-8.54	0.00	-297.55	-30.22	-3.94	-28.91	-4.82	-10.51	-33.29	0.00	-417.7
	645000 - Educational Supplies	Specific Use Supplies	0.00	0.00	-129.99	-20.22	0.00	-867.00	0.00	0.00	0.00	0.00	-3,968.04	0.00	-4,985.2
	653000 - Photocopying-Specific Use	Specific Use Supplies	0.00	0.00	0.00	0.00	0.00	0.00	-31.47	0.00	0.00	0.00	0.00	-27.94	-59.4
	653500 - Other Specific Use Supp	Specific Use Supplies	0.00	0.00	0.00	-4,473.87	0.00	0.00	0.00	0.00	0.00	-500.00	0.00	-784.26	-5,758.1
	698000 - Indirect Burden Expense	Miscellaneous Expense	-118.16	-397.76	-1,378.68	-1,494.27	-961.86	-1,121.25	0.00	-2,423.70	-1,271.14	-996.01	-952.17	-1,391.26	-12,506.2
55] Expenses - Total		-171.01	-397.76	-1,991.25	-13,488.36	-14,561.81	-2,181.67	-35.41	-8,675.06	-3,159.69	-3,277.14	-16,016.13	-10,132.74	-74,088.0	
80 T&B	889100 - Non Prof Org-Nonfed Subgrt	Non Fed Payments To Subgrantees	0.00	0.00	0.00	0.00	-11,028.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-11,028.0
80 T&B - Total			0.00	0.00	0.00	0.00	-11,028.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-11,028.0
9576612P - Opioid Settlement Posting - Total		-643.11	-2,494.75	-6,645.12	-19,573.01	-29,532.70	-7,306.26	-5,554.82	-13,365.58	-8,145.31	669,829.69	-19,739.84	-16,044.26	540,784.9	
Total Costs	July August September Octobe	r November December January February	March	April	May	June	Year-to-Date								
Total Cost	s -643.11 -2,494.75 -6,645.12 -19,5	3.01 -29,532.70 -7,306.26 -5,554.82 -13,365.58	-8,145.31	-7,410.97	-19,739.84	-16,044.26	-136,455.73								
Overall - Total			-643.11	-2.494.75	-6.645.12	-19.573.01	-29.532.70	-7.306.26	-5.554.82	-13.365.58	-8.145.31	669,829,69	-19,739,84	-16.044.26	540,784,9

Sep 19, 2024

Profit/Loss by Project

957 - PUBLIC HEALTH DISTRICT NO. 7

9:16:08 AM