

**From:** [Doug Racine](#)  
**To:** [Opioid Settlement Mailbox](#)  
**Subject:** Opioid Fund Annual Financial Report  
**Date:** Wednesday, September 3, 2025 3:36:46 PM

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The following Opioid Settlement Fund Report was submitted:

|                                                                                                                   |
|-------------------------------------------------------------------------------------------------------------------|
| <b>Fiscal Year Ending</b>                                                                                         |
| 6/30/2025                                                                                                         |
| <b>Name of Subdivision</b>                                                                                        |
| City of Nampa                                                                                                     |
| <b>Respondent's Name</b>                                                                                          |
| Mr. Doug Racine                                                                                                   |
| <b>Title</b>                                                                                                      |
| CFO                                                                                                               |
| <b>Address</b>                                                                                                    |
| 411 3rd Street South<br>Nampa, Idaho 83651<br>United States<br><a href="#">Map It</a>                             |
| <b>Phone Number</b>                                                                                               |
| (208) 468-5737                                                                                                    |
| <b>Email</b>                                                                                                      |
| <a href="mailto:racined@cityofnampa.us">racined@cityofnampa.us</a>                                                |
| <b>What was the subdivision's opioid settlement fund balance at the end of the prior fiscal year?</b>             |
| \$456,985.37                                                                                                      |
| <b>How much in total opioid settlement funds did the subdivision receive during the fiscal year?</b>              |
| \$196,751.17                                                                                                      |
| <b>What was the subdivision's opioid settlement fund balance at the end of the fiscal year?</b>                   |
| \$539,117.33                                                                                                      |
| -                                                                                                                 |
| <b>How many disbursements of opioid settlement funds did the subdivision make during the current fiscal year?</b> |
| 4                                                                                                                 |
| -                                                                                                                 |
| <b>Disbursement (1)</b>                                                                                           |
| \$50,000.00                                                                                                       |

|                                        |
|----------------------------------------|
| Disbursement (1) - Exhibit A Section   |
| H                                      |
| Disbursement (1) - Exhibit A Paragraph |
| 1,3,11                                 |
| -                                      |
| Disbursement (2)                       |
| \$13,000.00                            |
| Disbursement (2) - Exhibit A Section   |
| C                                      |
| Disbursement (2) - Exhibit A Paragraph |
| 2,4,12                                 |
| -                                      |
| Disbursement (3)                       |
| \$10,920.00                            |
| Disbursement (3) - Exhibit A Section   |
| G                                      |
| Disbursement (3) - Exhibit A Paragraph |
| 11                                     |
| -                                      |
| Disbursement (4)                       |
| \$40,699.21                            |
| Disbursement (4) - Exhibit A Section   |
| A                                      |
| Disbursement (4) - Exhibit A Paragraph |
| 6                                      |
| -                                      |
| Signature                              |
| Doug Racine                            |
| Date                                   |
| 09/03/2025                             |