

OPIOID SETTLEMENT FUND ANNUAL FINANCIAL REPORT

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

NAME OF ENTITY: Ammon City
 NAME OF OFFICIAL FILLING OUT REPORT: Jennifer Belfield
 PHONE NUMBER: (208) 612-4000
 EMAIL ADDRESS: jbelfield@cityofammon.us

OPIOID SETTLEMENT FUNDS BALANCE AT BEGINING OF FY 22: \$0.00

OPIOID SETTLEMENT FUNDS RECEIVED IN FY 22: \$1,218.78

TOTAL OPIOID SETTLEMENT FUND EXEPNDITURES IN FY 22: \$0.00

OPIOID SETTLEMENT FUND BALANCE AT END OF FY 22: \$1,218.78

ITEMIZATION OF PAYMENTS RECEIVED:

Payment Date	Payment Amount	Source of Payment
06/16/2022	\$1,218.78	Wire Transfer Payment

TOTAL: \$1,218.78

ITEMIZATION OF EXPENDITURES:

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

Approved Use Section	Approved Use Subsection	Description of Use	Amount Expended
		Have not used funds yet.	

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:  DATE: 09/19/2022