NECESSARY MATERIALS CHECKLIST

For Opioid Settlements Expenditure Reporting

1. General Information				
☐ Name of your Participating Subdivision				
☐ Address of your Participating Subdivision				
$\hfill\square$ Name and contact information of the person preparing the form.				
2. Settlement Funds Information				
Please note that bankruptcy settlements will be reported on a separate reporting tool and online portal. That information is not needed for this form.				
☐ A list of all settlement agreements that your Participating Subdivision received. <u>A list of Participating Subdivision payments</u> from BrownGreer are located on the <u>DHCS OSF website</u> .				
3. California Abatement Account - Allocations				
\square The amount of funds allocated to the California Abatement Account from each				
settlement agreement.				
$\hfill \square$ Interest earned by the California Abatement Account by each settlement.				
\square Any transfers of funds to another Participating Subdivision to the California Abatement Account including:				
$\hfill \square$ Amount transferred to the other Participating Subdivision				
$\hfill \square$ Which Participating Subdivision the funds were transferred to				
$\hfill \square$ Which settlement agreement the funds were transferred from				
\square Any transfers of funds from another Participating Subdivision to the California Abatement Account including:				
☐ Amount received from the other Participating Subdivision				

\sqcup Which Participating Subdivision the funds were transferred from
\square Which settlement agreement the funds were transferred to
4. Plaintiff Subdivision
\Box Determine if your Participating Subdivision is a Plaintiff Subdivision – if so, proceed to section 5. If not, skip to number 6.
5. California Subdivision Account – Allocations
Note: This section only needs to be completed if your Participating Subdivision is also a Plaintiff Subdivision. Please see the <u>California Office of the Attorney General Opioid</u> webpage for information on state agreements. If you are unsure if your Participating Subdivision is a Plaintiff Subdivision, please contact your city or county counsel.
\square The amount of funds allocated to the California Subdivision Account from each
settlement agreement.
$\hfill\square$ Interest earned by the California Subdivision Account by each settlement.
\square Any transfers of funds to another Participating Subdivision to the California Subdivision Account including:
\square Amount transferred to the other Participating Subdivision
$\hfill\square$ Which Participating Subdivision the funds were transferred to
$\hfill \square$ Which settlement agreement the funds were transferred from
☐ Any transfers of funds from another Participating Subdivision to the California Subdivision Account including:
\square Amount received from the other Participating Subdivision
$\hfill\square$ Which Participating Subdivision the funds were transferred from
\square Which settlement agreement the funds were transferred to
6. California Abatement Account – Expenditures
\Box Total funds expended from each settlement from your Participating Subdivision's California Abatement Account

7. California Subdivision Account – Expenditures

Note: This section only needs to be completed if your Participating Subdivision is also a Plaintiff Subdivision.
☐ Total funds expended from each settlement from your Participating Subdivision's California Subdivision Account
8. Past Opioid Remediation
Note: This section only needs to be completed if your Participating Subdivision is also a Plaintiff Subdivision.
☐ Determine if your Plaintiff Subdivision has spent any California Subdivision funds on past opioid remediation, including legal costs. If you are unsure if your Participating Subdivision has spent funds on past opioid remediation, please contact your city or county counsel.
9. Non-Opioid Remediation Expenses
Note: This section only needs to be completed if your Participating Subdivision is also a Plaintiff Subdivision.
\Box Total funds expended from all settlements from your Participating Subdivision's California Subdivision Account that were used for non-opioid remediation purposes.
10. Administrative Expenses
$\hfill\square$ Total funds expended from each settlement spent on administrative expenses.
11. Allowable Expenses Reporting
$\hfill\Box$ Total number of activities of programs that your Participating Subdivision spent settlement funds on.
For each activity or program, you will need:
☐ Activity or program name

☐ Activity or program description (2-3 sentences is sufficient)
\square Funds that were spent on the activity or program from each settlement
☐ Activity start date
\Box The local agencies or organizations who were given funds to implement the activity or program, if applicable
\square Categorize the activity or program by Allowable Expenditure type based on Exhibit E
☐ <u>Determine</u> if the activity or program was a High Impact Abatement Activity.
\square Which priority populations the activity or program serves, if applicable
12. Additional Activities
Note: This section is the same as section 11. It gives Participating Subdivisions a chance to add additional activities they may have missed in Section 11.
13. Planned Activities Reporting for SFY 2023-2024
\Box Determine if your Participating Subdivision plans to maintain the same activities and programs for the next state fiscal year.
\Box Determine if your Participating Subdivision plans to change or add new activities and programs for the next state fiscal year.
\square Total number of activities of programs that your Participating Subdivision will spend settlement funds on.
14. Planned Activities Reporting
If your Participating Subdivision plans to change and/or add new activities or programs, you will need:
☐ Activity or program name
☐ Activity or program description
\Box Categorize the activity or program by Allowable Expenditure type based on Exhibit E
☐ <u>Determine</u> if the activity or program was a High Impact Abatement Activity.
☐ Which populations the activity or program serves

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\square Determine if your Participating Subdivision would like technical assistance on how to
spend opioid settlement funds. If yes, a list of resources will appear in the form.

16. Attestations

\square Certify and attest acknowled	gement of requirements	regarding High Impact
Abatement Activities.		

 $\hfill\square$ Certify and attest that the submitted information is true and correct.