

\*AC lines increment by 10 (i.e. line 1 = 10, line 2 = 20, etc.)

\*If AC has fewer than three lines please delete unnecessary rows; if more than 3 lines please insert rows

### Ordinance Attachment - AC Template (Expenditure Authorization)

Ord Number
2263-2018

Type: ACDI, ACPO,ACPR	Purchase Requisition (PR) #
ACDI	N/A

Line # of AC	Project ID	Procurement Category	Dept	Div.	Ob. Class	Main Acct	Fund	Subfund	Program	Sect 3	Sect 4	Sect 5	Optional Field	Planning Area	Amount	Project Name
10	P441759-100008	Building and Facility Construction & Maint. Services	59	5912	06	66220	7704	N/A	CW004	N/A	N/A	N/A	N/A	09	\$ 147,100.86	SR 315 at North Broadway – OhioHealth Parkway

\$ 147,100.86

\$ 147,100.86 Total Spend