

ORDINANCE ATTACHMENT

AC Template (for authorizing expenditures)

*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.

Please establish separate ACPR's for each line item below:

Type of AC Requested	Purchase Requisition (PR)#													
ACPR	n/a													
ACPR	Div	Obj Class	Main Acct	Fund	Subfund	Program	Procurement Category	Project ID	Sect 3	Sect 4	Sect 5	Optional Field	Planning Area	Amount
	3004	02	62070	1000	100010	DS006	Health and Medical Supplies	n/a	300406	n/a	n/a	n/a	n/a	\$ 35,000.00
	3004	02	62070	1000	100010	DS006	Health and Medical Supplies	n/a	300406	n/a	n/a	n/a	n/a	\$ 35,000.00
	3004	02	62070	1000	100010	DS006	Health and Medical Supplies	n/a	300406	n/a	n/a	n/a	n/a	\$ 30,000.00
	3004	02	62070	1000	100010	DS006	Health and Medical Supplies	n/a	300406	n/a	n/a	n/a	n/a	\$ 150,000.00

\$ 250,000.00