

**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.*

<b>Ord</b>
<b>Number</b>
1593-2025

<b>Type of AC Requested</b>	<b>Purchase Requisition (PR)#</b>
ACPO	

Line # of AC	Procurement Category	Dept	Div	Obj Class	Main Acct	Fund	Subfund	Program	Sect 3	Sect 4	Sect 5	Project ID	Optional Field	Planning Area	Amount
10	Healthcare Services	50	5001	03	63051	2251	-	HE007	500111	HE22	-	G502435	-	-	65,000.00