

**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	2220	000000	CW012	Health and Medical Supplies	G642001	300406	n/a	n/a	n/a	n/a	\$ 730,698.68
	3004	02	62070	2220	000000	CW012	Health and Medical Supplies	G642001	300406	n/a	n/a	n/a	n/a	\$ 155,516.56