

**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 Number</b>
3199-2017

<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	63050	2251	n/a	HE004	500111	HE22	n/a	G501827	n/a	n/a	\$300,000.00