

**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>
0673-2020

<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	Substance abuse hospital services	25	2501	03	63050	2226	222604	JD016							360,000.00
20	Substance abuse hospital services	25	2501	03	63050	2227	222703	JD003							55,000.00

415,000.00





