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.

Type of AC Requested	Purchase Requisition (PR)#
ACPR	n/a

Line # of AC	Div	Obj Class	Main Acct	Fund	Subfund	Program	Procurement Category	Project ID	Sect 3	Sect 4	Sect 5	Optional Field	Planning Area	Amount
10	3004	02	62070	1000	100010	DS006	Health and Medical Supplies	n/a	300406	FD27	n/a	n/a	n/a	$ 300,000