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)# |
|-------------------------|----------------------------------|
| ACPO | n/a |

| Line # of AC | Dept | Div | Obj Class | Main Acct | Fund | Subfund | Program | Procurement Category | Project ID | Sect 3 | Sect 4 | Sect 5 | Optional Field | Planning Area | Amount | Project Name |
|-----------------|------|------|-----------|-----------|------|---------|---------|---|---------------|--------|--------|--------|-------------------|------------------|----------------|-----------------------|
| 10 | 44 | 4402 | 06 | 66220 | 2220 | n/a | SV003 | Land and Buildings and Structures and Thoroughfares | G441800 | n/a | n/a | n/a | n/a | 10 | \$1,000,000.00 | Ohio Health Boulevard |
| 20 | 44 | 4402 | 06 | 66220 | 2220 | n/a | SV003 | Land and Buildings and Structures and Thoroughfares | G441801 | n/a | n/a | n/a | n/a | 10 | \$500,000.00 | Ohio Health Boulevard |

ORDINANCE ATTACHMENT

Template for Authorizing Appropriation

If fewer than three lines are needed please delete rows

If more than 3 lines are needed lease insert rows.



| Line # | Dept | Div | Obj Class | Main Acct | Fund | Subfund | Program | Project ID | Section 3 | Section 4 | Section 5 | Amount | Project Name |
|--------|------|------|-----------|--------------|------|---------|---------|---------------|-----------|-----------|-----------|----------------|-----------------------|
| 1 | 44 | 4402 | 06 | 66220 | 2220 | n/a | SV003 | G441800 | n/a | n/a | n/a | \$1,000,000.00 | Ohio Health Boulevard |
| 2 | 44 | 4402 | 06 | 66220 | 2220 | n/a | SV003 | G441801 | n/a | n/a | n/a | \$500,000.00 | Ohio Health Boulevard |
| | | | | | | | | | | | | \$1,500,000.00 | |