## 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.

Ord								
Number								
1019-2018								

Type of AC Requested	Purchase Requisition (PR)#
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	Gynecologic or obstetric services	50	5001	03	63051	2251	-	HE004	500110	HE20	-	G501726	-	-	12,500.00