

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
0319-2019

Type of AC Requested	Purchase Requisition (PR)#
ACPO	

Line # of AC	Procurement Category	Dept	Div	Obj Class	Main Acct	Fund
10	Medical office services	50	5001	03	63920	2250

Subfund	Program	Sect 3	Sect 4	Sect 5	Project ID	Optional Field	Planning Area	Amount
n/a	CW001	500115	HE40	n/a				4,299,110.00