Franklin County Public Health

Memorandum of Non-Encumbrance

It is hereby certified that both at the time or the making of this contract or order and at the date of the execution of this memorandum, the amount of \$______ required to pay this contract or order has been appropriated for the purpose of this contract or order and is in the treasury or in the process of collection to the credit of the ______ Fund free from any previous encumbrance.

Please explain why an encumbrance was not obtained prior to the execution of this contract or order.



Director of Finance and Business Operations

Date