FDP Form 14a - Supplemental Procurement Plan

SUPPLEMENTAL PROCUREMENT PLAN

FOR THE 4th Quarter, CY 2014

Province, City or Municipality :SAN JOSE, CAMARINES SUR

Plan Control No. _____

Department/ Office:

Planned Amount

Regular | Contingency | Total

Page ____(1)____of___(3)_____ pages

Date Submitted:

Item No.	Description	Unit Cost	Quantity		Total Cost	DISTRIBUTION							
						1st Quarter		2nd Quarter		3rd Quarter		4th Quarter	
						Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount

NO SUPPLEMENTAL PROCUREMENT FOR THIS QUARTER

TOTAL													

This is to certify that the above procurement plan is in accordance with the objective of this Office

Prepared by:

ANGELITA D. VASQUEZ

SUPPLY OFFICER-DESIGNATE