FDP Form 14a - Supplemental Procurement Plan

SUPPLEMENTAL PROCUREMENT PLAN
For the 2nd Quarter, CY 2019

Province, City or Municipality : BALAYAN

Plan Control No. _____

Department/ Office: Bids and Awards Committee

Planned Amount

Regular | Contingency | Total

Page ___(1)___of___(1)_____ page

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.	Amoun
----------	----- NO TRANSACTION -------	----------	----	----	NO TRANSACTION	----------	----------	----------	----------	----------	----------	----------	----------
TOTAL													

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

Prepared by:

MA. CARLOTA S. BARAL, MPA
(Head of Department/Office)
BAC Secretary

FDP Form 14a - Supplemental Procurement Plan, by Office or Department

SUPPLEMENTAL PROCUREMENT PLAN

3rd Quarter, CY 2019

Province, City or Municipality: BALAYAN BATANGAS

Plan Control No. _____					**Planned Amount**				**Page ___ of ___ pages**			
Department/ Office:					**Regular**	**Contingency**		**Total**	**Date Submitted:**			
Item No.	**Description**	**Unit Cost**	**Quantity**		**Total Cost**	**DISTRIBUTION**						
						1st Quarter		**2nd Quarter**		**3rd Quarter**		**4th Quarter**	
			No.	**Description**		**Qty.**	**Amount**	**Qty.**	**Amount**	**Qty.**	**Amount**	**Qty.**	**Amount**
				NO TRANSACTION									
TOTAL													

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

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Head of Department/Office

BAC Secretary