FDP Form 14a - Supplemental Procurement Plan
(DILG)

SUPPLEMENTAL PROCUREMENT PLAN
FOR THE SECOND Quarter, CY 2016

Province, City or Municipality : SAN REMIGIO, CEBU

Plan Control No. _____	**Planned Amount**			Page ____(1)____of___(3)_____ 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	
						Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
N - O - N - E													
TOTAL													

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

Prepared by:

ROSEMARIE PESTAÑO
Procurement Officer
(Head of Department/Office)

FDPP Form 14b - Supplemental Procurement Plan

Summary by Office

DEPARTMENT	Head Of Department/Office	Total Cost
N - O - N - E (SECOND QUARTER 2016		

We hereby certify that we have reviewed the contents and hereby attest to the

ROMARICO R. CABELLON
BAC Chairperson

MARIANO R. MARTINEZ
Local Chief Executive