

FDP Form 14a - Supplemental Procurement Plan

SUPPLEMENTAL PROCUREMENT PLAN  
FOR THE THIRD Quarter, CY 2016

Province, City or Municipality : MANAOAG

Plan Control No. \_\_\_\_\_

Planned Amount

Page 1 of 1 pages

Department/ Office: Mayor's Office

Regular

Contingency

Total

Date Submitted:

Item No.	Project Description	Unit Cost	Quantity	Total Cost	DISTRIBUTION									
					1st Quarter		2nd Quarter		3rd Quarter		4th Quarter			
					Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount		
1	NONE	NONE		NONE			NONE			NONE			NONE	
2														
3														
4														
5														
6														
7														
8														
9														
10														
11														
12														
13														
14														

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

Prepared by:

(S)



KIM MIKAEL G. AMADOR  
Municipal Mayor



