

SUPPLEMENTAL PROCUREMENT PLAN
FOR THE 2nd Quarter, CY 2014

Province : Rizal

Plan Control No. _____

Department/ Office: _____

Planned Amount

Page (1) of (3) pages

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						
TOTAL																			

No Supplemental Procurement Plan for
the 2nd Quarter 2014

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

Prepared by: _____
(Head of Department/Office)