

FDP Form 14a - Supplemental Procurement Plan

SUPPLEMENTAL PROCUREMENT PLAN
FOR THE 2nd_Quarter, CY 2017

Province, City or Municipality: CAMALANIUGAN

Plan Control No.: _____

Department/Office: MUNICIPAL MAYOR'S OFFICE

Planned Amount

Regular

Contingency

Total

Page ___ (1) ___ of (3) ___ pages

Date Submitted:

DISTRIBUTION

Item No.	Description	Unit Cost	Quantity	Total Cost	1st quarter		2nd Quarter		3rd Quarter		4th Quarter	
					Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount
1	Motor Vehicle	1,840,000.00	1	1,840,000.00					1	1,840,000.00		
	Total			1,840,000.00						1,840,000.00		

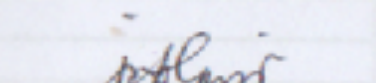
This is to certify that the above procurement plan is in accordance with the objective of this office.

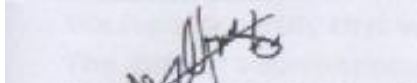
Prepared by:


Recommended by:

Reviewed by:

Approved by:


JOENA C. ALARIO
Administrative Officer I


JULIUS I. URMATAM, GE
GSOI


SUSAN M. ORATA, CPA
Municipa Budget Officer


HON. ISIDRO T. CABADDU
Local Chief Executive

FDP Form 14a - Supplemental Procurement Plan

**SUPPLEMENTAL PROCUREMENT PLAN
FOR THE 2nd Quarter, CY 2017**

Province, City or Municipality: CAMALANIUGAN
 Plan Control No.: _____
 Department/Office: MUNICIPAL TREASURER'S OFFICE

Planned Amount			Page ___ (1) ___ of (3) ___ pages
Regular	Contingency	Total	Date Submitted:

DISTRIBUTION												
Item No.	Description	Unit Cost	Quantity	Total Cost	1st quarter		2nd Quarter		3rd Quarter		4th Quarter	
					Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount
1	Water Dispenser	10,000.00	1	10,000.00					1	10,000.00		
2	Motorcycle	55,000.00	1	55,000.00					1	55,000.00		
	Total			65,000.00						65,000.00		

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

Prepared by:

Recommended by:

Reviewed by:

Approved by:

L. Cepeda
LOURDES U. CEPEDA
 Municipal Treasurer-ICO

J. Urmata
JULIUS I. URMATAM, GE
 GSO

S. Orata
SUSAN M. ORATA, CPA
 Municipa Budget Officer

I. Cabaddu
HON. ISIDRO T. CABADDU
 Local Chief Executive

FDP Form 14a - Supplemental Procurement Plan

SUPPLEMENTAL PROCUREMENT PLAN
FOR THE 2nd_ Quarter, CY 2017

Province, City or Municipality: CAMALANIUGAN

Plan Control No.: _____

Department/Office: SANGGUNIANG BAYAN OFFICE

Planned Amount

Regular

Contingency

Total

Page ___ (1) ___ of (3) ___ pages

Date Submitted:

DISTRIBUTION

Item No.	Description	Unit Cost	Quantity	Total Cost	1st quarter		2nd Quarter		3rd Quarter		4th Quarter	
					Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount
1	1 HP AIRCONDITION	30,000.00	1	30,000.00					1	30,000.00		
2	2 HP AIRCONDITION	25,000.00	3	75,000.00					3	75,000.00		
3	FLOOR MOUNTD AIRCONDITION	75,000.00	2	150,000.00					2	150,000.00		
4	FILING CABINET	42,000.00	5	210,000.00					5	210,000.00		
5	VENITIAN BLINDS	3,200.00	28	89,600.00					28	89,600.00		
6	PARTITION	10,400.00	1	10,400.00					1	10,400.00		
	Total			565,000.00						565,000.00		

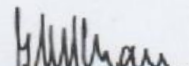
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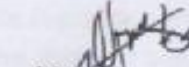
Prepared by:


Recommended by:

Reviewed by:

Approved by:


GINA VICTORIA O. CHAN
Municipal Vice-Mayor


JULIUS I. URMATAM, GE
GSO


SUSAN M. ORATA, CPA
Municipa Budget Officer


HON. ISIDRO T. CABADDU
Local Chief Executive