FDP Form 14a - Supplemental Procurement Plan

**SUPPLEMENTAL PROCUREMENT PLAN**
**FOR THE 2nd Quarter, CY 2016**

**Municipality : La Trinidad, Benguet**

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|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Plan Control No. _____** | | | | | **Planned Amount** | | | | | | | | | |
| **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** | |
| | **NONE** | | | | | | | | | | | | | |
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| **TOTAL** | | | | | | | | | | | | | | |

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

**Prepared by:**

**IMELDA E. GRUPO**
Municipal Budget Officer