FDP Form 14a - Supplemental Procurement Plan

SUPPLEMENTAL PROCUREMENT PLAN
FOR THE 1st Quarter, CY 2016

Province, City or Municipality : Baler

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
		NO SUPPLEMENTAL PROCUREMENT PLAN FOR THE FIRST QUARTER 2016											
TOTAL													

Prepared by:

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