FDP Form 14a - Supplemental Procurement Plan

**SUPPLEMENTAL PROCUREMENT PLAN**
**FOR THE _1ST____Quarter, CY ___2015_____**

Province, City or Municipality : __TARLAC CITY_____

Plan Control No. _____
Department/ Office:

Planned Amount
Regular | Contingency | Total

Page ____(1)____of___(3)_____ pages
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 |
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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: _____

*(Head of Department/Office)*

FDPP Form 14b - Annual Procurement Plan or Procurement List

## Summary by Office

| DEPARTMENT | Head Of Department/Office | Total Cost |
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