FDP Form 4a - Annual Procurement Plan or Procurement List

S U P P L E M E N T A L P R O C U R E M E N T P L A N

FOR THE PERIOD: 3RD Quarter, CY 2017

MUNICIPALITY OF SAN NICOLAS, ILOCOS NORTE

Plan Control No. _____				Planned Amount				Page 1 of 1 pages					
Department/ Office: OFFICE OF THE MAYOR				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	
	N O N E												
TOTAL				-		-		-		-		-	

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

Prepared by:

ALFREDO P. VALDEZ, JR., MD
Municipal Mayor

Approved by:

ALFREDO P. VALDEZ, JR., MD
Municipal Mayor

Approved on: _____