

**SUPPLEMENTAL PROCUREMENT PLAN
FOR THE YEAR 2020**

Province, City or Municipality


MUNICIPALITY OF CALASIAO
Calasiao, Pangasinan

Plan Control No. _____	Planned Amount:	Page 1 of 3 pages
Department Office: MUN. DISASTER RISK REDUCTION MNGT. OFFICE	Regular	Date Submitted
	Contingency	
	Total	

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	
1													
2													
3	NO SUPPLEMENTAL PROCUREMENT FOR 1st QUARTER 2020												
4													
5													
6													
7													
8													
9													
10													
11													

TOTAL				0.00									

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

Prepared by:

DANTE U. DE VERA
 Administrative Assistant I

**SUPPLEMENTAL PROCUREMENT PLAN
FOR THE YEAR 2020**

Province, City or Municipality

MUNICIPALITY OF CALASIAO
Calasiao, Pangasinan

Plan Control No. _____

Department Office: **ECONOMIC ENTERPRISE 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
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													

TOTAL					0.00								

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Prepared by:
Dante U. De Vera
DANTE U. DE VERA
Administrative Assistant I

SUPPLEMENTAL PROCUREMENT PLAN
FOR THE YEAR 2020

Province, City or Municipality

MUNICIPALITY OF CALASIAO
Calasiao, Pangasinan

Plan Control No. _____

Department Office: **ECONOMIC ENTERPRISE 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
1												
2												
3												
4												
5												
6												

TOTAL				0.00								

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Administrative Assistant I

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FOR THE YEAR 2020**


Province, City or Municipality

MUNICIPALITY OF CALASIAO
Calasiao, Pangasinan

Plan Control No. _____	Planned Amount:	Page 1 of 3 pages
Department Office: MUNICIPAL TREASURER OFFICE	Regular	Date Submitted
	Contingency	
	Total	

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
1													
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3													
4													
5													
6													
7													
8													
9													
10													
11													
12													
TOTAL					0.00								

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DANTE U. DE VERA
Administrative Assistant I

FOR THE YEAR 2020


Province, City or Municipality

MUNICIPALITY OF CALASIAO
Calasiao, Pangasinan

Plan Control No. _____					Planned Amount:				Page 1 of 3 pages				
Department Office: MUNICIPAL ADMINISTRATOR 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
1													
2													
3													
4													

TOTAL					0.00								

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DANTE U. DE VERA
Administrative Assistant I

FOR THE YEAR 2020

Province, City or Municipality

MUNICIPALITY OF CALASIAO
Calasiao, Pangasinan

Plan Control No. _____

Department Office: **MUNICIPAL CIVIL REGISTRAR OFFICE**

Planned Amount:

Regular

Contingency

Total

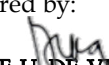
Page 1 of 3 pages

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	
1														
2														
3														
4														
5														
6														

TOTAL					0.00									

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 Administrative Assistant I

FOR THE YEAR 2020


Province, City or Municipality

MUNICIPALITY OF CALASIAO
Calasiao, Pangasinan

Plan Control No. _____					Planned Amount:			Page 1 of 3 pages						
Department Office: MUNICIPAL AGRICULTURE 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	
1														
2	NO SUPPLEMENTAL PROCUREMENT FOR 1st QUARTER 2020													
3														
4														
5														
6														
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