SUPPLEMENTAL PROCUREMENT PLAN

FOR THE 2ND Quarter, CY 2016

| Plan Control No Department/ Office: | | | | | | Planned Amount | | | | | of(3)p | ages | |
|--|-------------|-----------|----------|---|------------|-------------------|--------|-------------|--------|-------------|-----------------|-------------|-------|
| | | | | | Regular | Contingency Total | | | | | Date Submitted: | | |
| | | | | | | DISTRIBUTION | | | | | | | |
| Item No. | Description | Unit Cost | Quantity | | Total Cost | 1st Quarter | | 2nd Quarter | | 3rd Quarter | | 4th Quarter | |
| | | | | | | Qty. | Amount | Qty. | Amount | Qty. | Amount | Qty. | Amoun |
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(Head of Department/Office)