

SUPPLEMENTAL PROCUREMENT PLAN  
FOR THE **2nd** QUARTER, CY **2018**

Claveria, Cagayan

Plan Control No. \_\_\_\_\_

Planned Amount

Pages **01** of **01** pages

Department Office: **OFFICE OF THE MUNICIPAL HEALTH OFFICER**

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	Baby Powder 623g	250.00	5	pcs	1,250.00	none	none	5	1,250.00				
2	KY Jelly	250.00	4	pcs	1,000.00	none	none	4	1,000.00				
3	Micropore, ½", 24"	1,000.00	3	pcs	3,000.00	none	none	3	3,000.00				
4	Oxytocin ampule	20.00	60	unit	1,200.00	none	none	60	1,200.00				
5	Sterile Gauze, roll	1,500.00	3	roll	4,500.00	none	none	3	4,500.00				
6	Anti-rabies vaccine (rabipur)	2,000.00	50	unit	100,000.00	none	none	50	100,000.00				
	<b>TOTAL</b>	<b>5,020.00</b>			<b>110,950.00</b>				<b>110,950.00</b>				
	x x x x x	x x	x	x	x x	x	x	x	x				

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

Prepared by:

  
**JOANNE HAZEL A. NEYRA**  
Municipal Budget Officer