

**SUPPLEMENTAL PROCUREMENT PLAN
FOR THE CALENDAR YEAR 2020**

Claveria, Cagayan

Plan Control No. _____

Planned Amount: **Php 307,940.00**

Pages **01** of **02** pages

Department Office: **LGU - CLAVERIA**

Regular: **Php 277,146.00**

Contingency **Php 30,794.00**

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	Face Mask	100.00	145	boxes	14,500.00	0	-	44	4,400.00	44	4,400.00	45	4,500.00
2	Face Mask with logo	50.00	288	pcs	14,400.00	0	-	288	14,400.00	0	-	0	-
3	Alcohol	75.00	205	bottles	15,375.00	0	-	68	5,100.00	68	5,100.00	69	5,175.00
4	Interfolder Paper Towel	60.00	195	packs	11,700.00	0	-	65	3,900.00	65	3,900.00	65	3,900.00
5	Lysol Spray	365.00	9	bottles	3,285.00	0	-	6	2,190.00	3	1,095.00	0	-
6	Hand Sanitizer	85.00	28	bottles	2,380.00	0	-	9	765.00	9	765.00	10	850.00
7	CD Rewritable (individual casing)	30.00	20	pcs	600.00	0	-	10	300.00	0	-	10	300.00
8	Tissue 2 ply 12pcs/pack	75.00	6	packs	450.00	0	-	3	225.00	0	-	3	225.00
9	Technical Pen, 0.1mm	800.00	2	pcs	1,600.00	0	-	0	-	2	1,600.00	0	-
10	Technical Pen, 0.3mm	800.00	2	pcs	1,600.00	0	-	0	-	2	1,600.00	0	-
11	Technical Pen, 0.5mm	800.00	2	pcs	1,600.00	0	-	0	-	2	1,600.00	0	-
12	Rubber eraser, 33mm*16mm*13mm	50.00	5	pcs	250.00	0	-	0	-	5	250.00	0	-
13	Technical Pen Drawing Ink, 23ml	200.00	5	bottles	1,000.00	0	-	0	-	5	1,000.00	0	-
	Sub Total				68,740.00		-		31,280.00		21,310.00		14,950.00
1	Losartan 50mg	500.00	40	bxs	20,000.00	40	20,000.00	0	-	0	-	0	-
2	Metformin 500mg	300.00	100	bxs	30,000.00	100	30,000.00	0	-	0	-	0	-
3	Metoprolol 50mg	300.00	100	bxs	30,000.00	100	30,000.00	0	-	0	-	0	-
4	Magnesium Sulfate 25% (250mg/ml)	300.00	5	ml	1,500.00	5	1,500.00	0	-	0	-	0	-
5	TB Staining Kit	4,000.00	1	bxs	4,000.00	0	-	1	4,000.00	0	-	0	-
6	Micropore 1/2 inch, 24 pcs	1,000.00	3	bxs	3,000.00	0	-	3	3,000.00	0	-	0	-
7	Calcium carbonate 500mg	500.00	10	bxs	5,000.00	0	-	0	-	10	5,000.00	0	-
8	Cetirizine syrup	3,800.00	1	box	3,800.00	0	-	0	-	1	3,800.00	0	-
9	Hydrochlorothiazide 2.5mg tablet	400.00	12	bxs	4,800.00	0	-	0	-	12	4,800.00	0	-
10	Lozartan 50mg	500.00	100	bxs	50,000.00	0	-	0	-	100	50,000.00	0	-
11	Methyldopa 250mg	500.00	1	box	500.00	0	-	0	-	1	500.00	0	-
12	Metoprolol 50mg	300.00	150	bxs	45,000.00	0	-	0	-	150	45,000.00	0	-

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
13	Multivitamins capsule	275.00	20	bxs	5,500.00	0	-	0	-	20	5,500.00	0	-
14	Paracetamol 250mg	3,200.00	3	bxs	9,600.00	0	-	0	-	3	9,600.00	0	-
15	Risperidone 2mg	4,500.00	5	bxs	22,500.00	0	-	0	-	5	22,500.00	0	-
16	Vitamin B. Complex	200.00	20	bxs	4,000.00	0	-	0	-	20	4,000.00	0	-
	Sub Total				239,200.00		81,500.00		7,000.00		150,700.00		-
	Total				307,940.00		81,500.00		38,280.00		172,010.00		14,950.00
x	x x x x x x x	x x	x	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