

**SUPPLEMENTAL PROCUREMENT PLAN  
FOR THE 4th QUARTER, CY 2019**

Province, City or Municipality : Cavite

Plan Control No. \_\_\_\_\_ Planned Amount Page \_\_\_\_ (1) \_\_\_\_ of \_\_\_\_ (1) \_\_\_\_ pages  
 Department/ Office: PROVINCIAL GOVERNMENT OF CAVITE 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
<b>TOTAL</b>													

**No Supplemental Procurement Plan**

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

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Noted by: **FELICITAS D. HERNANDEZ**  
Head, BAC-B Secretariat

Approved by: **JESUS I. BARRERA**  
BAC-B Chairman