

**SUPPLEMENTAL PROCUREMENT PLAN**  
**For the 1st Quarter , CY 2019**

Province, City or Municipality: SALAY, MISAMIS ORIENTAL

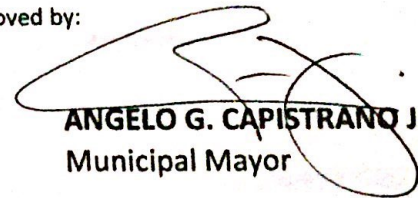
Plan Control No. _____				Planned Amount			Page _____ (1) _____ (3)pages	
Department Office _____				Regular	Contingency	Total	Date Submitted _____	
Item No.	Description	Unit Cost	Quantity	Total Cost	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
NO BID SUPPLEMENTAL FOR THE 1st QUARTER								
<b>TOTAL</b>								

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

Recommended by:

**EMMA C. BALUYOS**  
 Municipal Budget Officer

Approved by:

  
**ANGELO G. CAPISTRANO JR.**  
 Municipal Mayor