# FDP Form 14b -Summary of 3rd Quarter 2022 Supplemental Procurement Plan

Item	Department/Office	Head Of Department	Total Cost
		05045 5 44401075450	10 500 00
1	CITY ASSESSOR'S OFFICE	CESAR R. MAGISTRADO	18,500.00
2	CITY AGRICULTURE OFFICE	FRANCISCO M/ MENDOZA	50,000.00
3	CITY MAYOR'S OFFICE	HON. NELSON LEGACION	34,730.00
4	CITY VETERINARY OFFICE	JUNIOS J. ELAD JR.	75,000.00
5	CEPPIO	ALLEN L. REONDANGA	1,935.00
6	CEPPIO	ALLEN L. REONDANGA	84,000.00
7	NAGA CITY ABATTOIR	ROBERTO G. ACABADO	124,000.00
8	CITY MAYOR'S OFFICE	HON. NELSON LEGACION	139,270.00
9	NAGA CITY HOSPITAL	DR. JOSEPH S. SANCHEZ	3,000,000.00
10	NAGA CITY HOSPITAL/EMS	DR. JOSEPH S. SANCHEZ	29,800.00
11	SEED	ELSIE MARIA M. ROMANO	47,650.00
12	BUREAU OF FIRE	SINSP. PETERPAUL V. MENDOZA	50,000.00
13	CEPPIO	ALLEN L. REONDANGA	36,000.00
14	ESSO	DELFIN V. AGUILAR	1,450,000.00
15	SOLID WASTE MANAGEMENT OFFICE	ENGR. JOEL MARTIN	285,000.00
16	CITY ENGINEERING OFFICE	ALEXANDER N. CANING	51,445.00
17	SOLID WASTE MANAGEMENT OFFICE	ENGR. JOEL MARTIN	332,400.00
18	SEED	ELSIE MARIA M. ROMANO	48,000.00
19	PERSON'S WITH DISABILITY AFFAIRS OFFICE	ATTY. PAUL JOHN F. BARROSA	49,000.00
20	CITY MAYOR'S OFFICE	HON. NELSON LEGACION	216,010.00
21	SOLID WASTE MANAGEMENT OFFICE	ENGR. JOEL MARTIN	198,900.00
22	CITY POPULATION & NUTRITION OFFICE	RAY-AN CYDRICK G. RENTOY	16,075.00
23	NAGA CITY HOSPITAL	DR. JOSEPH S. SANCHEZ	1,000,000.00
24	NAGA CITY HOSPITAL	DR. JOSEPH S. SANCHEZ	76,000.00
25	CSWDO	ANNABEL SJ. VARGAS	850,000.00
26	ACTO	ALEC FRANCIS A. SANTOS	3,900.00
27	RAUL S ROCO LIBRARY	FEDERICO J. VINLUAN	18,000.00
28	SOLID WASTE MANAGEMENT OFFICE	ENGR. JOEL MARTIN	18,170.00
29	NCCW	ANNABEL SJ. VARGAS	6,190.00
30	CEPPIO	ALLEN L. REONDANGA	18,000.00
31	NAGA CITY DANGEROUS DRUGS BOARD	JOSE B. IMPORTANTE	19,500.00
32	OCA-MAIN	ELMER S. BALDEMORO	3,201.96
33	CITY ENGINEERING OFFICE	ALEXANDER N. CANING	333,657.00
34	PUBLIC SAFETY OFFICE	RENNE F. GUMBA	10,000.00
35	CITY POPULATION & NUTRITION OFFICE	RAY-AN CYDRICK G. RENTOY	10,000.00

36	BICOL CENTRAL STATION	RODERICK REFORSADO	55,000.00
37	JMRGGC	RAY-AN CYDRICK G. RENTOY	10,000.00
38	CITY HEALTH OFFICE	DR. VITO C. BORJA	200,000.00
39	PERSON'S WITH DISABILITY AFFAIRS OFFICE	ATTY. PAUL JOHN F. BARROSA	36,700.00
40	CITY POPULATION & NUTRITION OFFICE	RAY-AN CYDRICK G. RENTOY	23,000.00
41	HOUSING & DEVELOPMENT OFFICE	ROLANDO CAMPILLOS	50,000.00
42	CEPPIO	ALLEN L. REONDANGA	73,000.00
43	PERSON'S WITH DISABILITY AFFAIRS OFFICE	ATTY. PAUL JOHN F. BARROSA	123,891.15
44	ENRO	ALEXANDER N. CANING	268,948.00
45	MARKET ENTERPRISE & PROMOTIONS OFFICE	RAMON J. FLORENDO	12,100.00
46	ESSO	DELFIN V. AGUILAR	500,000.00
47	MARKET ENTERPRISE & PROMOTIONS OFFICE	RAMON J. FLORENDO	14,000.00
48	NAGA CITY HOSPITAL	DR. JOSEPH S. SANCHEZ	55,000.00
49	CITY MAYOR'S OFFICE	HON. NELSON LEGACION	185,975.00
50	NAGA CITY HOSPITAL	DR. JOSEPH S. SANCHEZ	7,000.00
51	NAGA CITY DANGEROUS DRUGS BOARD	JOSE B. IMPORTANTE	164,177.00
52	PUBLIC SAFETY OFFICE	RENNE F. GUMBA	44,000.00
53	CITY PLANNING & DEVELOPMENT OFFICE	WILFREDO B. PRILLES, JR	250,000.00
54	CITY AGRICULTURE OFFICE	FRANCISCO M/ MENDOZA	15,550.00
55	CITY ENGINEERING OFFICE	ALEXANDER N. CANING	94,655.00
56	OFFICE FOR SENIOR CITIZENS AFFAIRS	JAIME R. REBLANDO	20,000.00
57	SEED	ELSIE MARIA M. ROMANO	63,000.00
58	HOUSING & DEVELOPMENT OFFICE	ROLANDO CAMPILLOS	16,000.00
59	OFFICE FOR SENIOR CITIZENS AFFAIRS	JAIME R. REBLANDO	10,000.00
60	NAGA CITY ABATTOIR	ROBERTO G. ACABADO	50,000.00
61	SEED	ELSIE MARIA M. ROMANO	229,145.00
		TOTAL	11,275,475.11

Approved By:

Anselmo B. Maño CPO-Head

For the 3rd Quarter, C/Y 2022

rovince,	City or Municipality: Naga City			,		Planned Amo	unt				Tp===:			
Plan Contr	ol No:					Regular		incone		<del></del>	Page:			
Departme	nt/Office: City Assessor's Office					Neguiai	Con	tingency		Total	Date Su	bmitted		
	-						1st	Quarter	2nd C	Quarter	3rd	quarter	4th	quart
	Description	code	unit cost	Qty	Unit	Total cost	Qty	Amount	Qty	Amount	aty.	Amount		Am
rom:	Repair & maintenance-Office	5-02-13-050-02	10,000		<del>                                     </del>	_	<u> </u>	<del>                                     </del>		<del></del>				
	Printing & publication expense	5-02-99-020	8,500		<del>                                     </del>	_	<u> </u>	<del>-</del>		+-	<del></del>			1
										<del> </del> -			<del>                                     </del>	+-
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	- 15									+	<del>                                     </del>	<del> </del>	<del>                                     </del>	
o:	Travel Expenses	5-02-01-010	18,500	1	<b> </b>	18,500.00						<u> </u>	<del>                                     </del>	1
	·				<del></del>			╁						
					<del></del>	_	<u> </u>			<del>-</del>	<b>-</b>		<u> </u>	
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	<del></del>	·			<u> </u>							<del>                                     </del>	† — —	+-
eason: F	or Travel expenses to be incurred in Att	onding Comings at II OII O	City DDA 4D 1 - 1		<u> </u>									

This is to certify that the above procurement program is in accordance with the objectives of the LGU

Approved:

NELSON S. LEGACION City Mayor CITY PROCUREMENT OFFICE

REAL PROCUREMENT OFFI

CESAR R. MAGISTRADO City Assessor

For the \_\_\_\_ Quarter CY 2022

Plan Control No.:							Planned Ar	nount				Page	1 of 1
Department/ Office:	<del></del>	CITY AGRIC	CULTU	RE OFFIC	<u>E</u>		Regular	Contir	ngency	Total		Date	9/6/22
Description	Code	Unit Cost	Qty	Unit	Total	15	t Quarter	2nd	d Quarter	3rd	d Quarter	4tl	h Quarter
	!				cost	Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amoun
FROM:													
Rep&Maint Machinery and													
Equipment (Machinery)	5-02-13-050-01				50,000.00			<u> </u>		<u> </u>		<u> </u>	<u> </u>
		<del></del>			<u> </u>		-	<del>├┈</del> ┤		<del> </del>		<del>  </del>	<del></del> -
	1								<del></del>	<del> </del>		$\vdash$	
-													
TO:					-			[ <u>-</u>					
Rep&Maint Buildings &	<del> </del>				<del></del>					1	<del></del>	$\vdash$	
other structures (other													
structures)	5-02-13-040-99				50,000.00		,						
	<del> </del>				<del></del>	/,			<del></del>	<u> </u>			
						1,		1			-	$\vdash$	
							•	<b></b>		$\vdash$		† †	

This is to certify that the above procurment program is in accordance with objectives of the LGU.

FRANCISCO M. MENDOZA
Acting City Agriculturist

Approved by:

**NELSON S. LEGACION** 

**CALENDAR YEAR 2022** 

#### AMMENDMENT FORM

Office/Department: City Mayor's Office

Component Program: Naga City Lupong Tagapamayapa (PNaLO Program)

General Fund: 1011-7994-4

Description	Account Code Unit Cost Qty. Unit DISTRIBUTION						BUTION					
,					1st	Quarter	21	nd Quarter	3rd	l Quarter	4th	Quarter
					Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
GROM:		_										
Confidential Expenses	5-02-10-010							34,730.00				
						<del></del>					<del>                                     </del>	
TOTAL: P 34,730.00										<u> </u>		
					-							
103								<del></del>		<del></del>	<del>                                     </del>	
Other Maint. & Operating Expenses (OMOE)	5-02-99-990			_								
Meals - Galing Pook Validators								15,980.00				
Meals- Meeting with Private Groups								18,750.00				
			_	_			-			<del></del> -	<del> </del>	
								-				· · · · · · · · · · · · · · · · · · ·
TOTAL: P 34,730.00	<del></del>			-			-			<u> </u>	-	
Purpose: For PPMP inclusion									-		<del>  -</del>	

Prepared by:

JERROLD R. RITO

Administrative Assistant IV

Approved:

NELSON S. LEGACION

City Mayor

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September 23, 2022

For the 3rd Qtr. of 2022

Province, City or Municipality:	NAGA CITY				Planned A	mount: Ph	P		_	Page			٠, -
Plan Control No.:					Regular	Cont	ingency	1	otal	Date Sub	nitted: Sept	ember 23,2	2022
Code: CVO- 8721		-	•	+4		,			. ;	<u> </u>			
Item No.	Code	Unit Cost	Qty.	Unit	<b>Total Cost</b>		•		DISTR	BUTION	•		
¥ - 1				,		1st (	Quarter	2nd	Quarter	3rd (	Quarter	4th	Quarter
	-		]	T		Qty.	Amount :	Qty.	Amount	Qty.	Amount	Qty.	Amount
From: Prizes	5-02-06-020		·+-	•	75,000.00				· -	1			1
			;	'		3			1	- <u> </u>	-	·	-
Total Amount										٠		1	<del></del>
To: Animal and Zoological	5-02-03-040	, ,		1			Ī	,	٠,	T -		<del>                                     </del>	1
rabisin	1	500.00	vials	200	33,000.00					200	33,000.00	1,	1
,			1	L		·	,		,				1 -
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Total Amount					33,000.00								<del>                                     </del>
				. ]	I	1	ľ		T .	1	T		<del> </del>

This is to certify that the above procurement program is in accordance with objectives of the LGU.

Submitted by:

UNIOS J. FLAD JR. City Veterinarian Anntoyed hir

NELSON S. LEGACION

City Mayor

-Dalrah

For the 3RD Quarter, CY 2022

Province, City or Municipality: Naga Cit	ty												
Plan Control No.: #					Planned A						Page:	1 of 1	
Department/Office: CEPPIO					Regular		Continge	ncy	Total		Date Subm	ritted:	09/19/2022
									DIST	RIBUTI	ON		
Description	code	Unit Cost	Qty.	Unit	Total Cost	1st (	Quarter	2nc	Quarter	3rc	Quarter	4ti	n Quarter
						Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
From:													
Other main. And operating expenses	5-02-99-990				1,935,00								
									j				
									l				
												nitted:	_
		i											
TO:											_		
Other main. And operating expenses	5-02-99-990										1,935.00		
							_						
		•											
_													
Reason: INCLUSION TO PPMP.													

This is to certify that the above procurement plan is in accordance with objectives of this office.

ALLEN L. REONDANGA

Department Head

Approved by:

NELSON S. LEGACION

For the 3RD Quarter, CY 2022

Province, City or Municipality: Naga City

Plan Control No.: #					Planned A	mour	it				Page:	1 of 1	
Department/Office: CEPPIO	-				Regular		Continge	ncy	Total		Date Subm	itted:	09/06/2022
									DISTE	RIBUTI	ON		
Description	code	Unit Cost	Qty.	Unit	<b>Total Cost</b>	1st	Quarter	2nc	Quarter	3rc	I Quarter	4ti	Quarter
	_			<u> </u>		Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
From:													
1.6 Audio & Video Equipments and	5-02-99-990								_		_		 
Accessories								-			_		
Item # 5-10		57,240.00							_				
III. Functions and Meals									_		_		
f. Swimsuit and Gown Competition													
1. Dinner		12,000.00											
i. Day after pageant night													
1. Breakfast		12,000.00											
g. Pre-Judging													
2. Lunch		2,760.00											
TO:													,
Photoshoot of the Ms. Bicolandia 2022									1				
official Candidates (Sept. 1)											84,000.00		
	5-02-99-990		_										
					<u> </u>								

Reason: INCLUSION TO PPIMP.

This is to certify that the above procurement plan is in accordance with objectives of this office .

ALLEN LA FONDANGA

Department Head

Approved by:

NELSON S. LEGACION

City Mayor

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For the 3rd Quarter Calendar Year 2022

**AMMENDMENT FORM** 

Department/Office:

NAGA CITY DISTRICT ABATTOIR

DATE: 15-Aug-22

							DIST	TRIBUTIO	N		
Description	Unit Cost	Qty.	Unit	1st (	Quarter	2nd	Quarter	3rd	Quarter	4th	Quarter
				Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
ROM: Rep. & Maint-Buildings and Other Structure(Other Structure)											
Structure ) AC # 5-02-13-040-05	124,000.00								124,000.00		
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			····	<b>_</b>							
TOTAL AMOUNT	404 000 00			<del> </del>				<u> </u>			<u> </u>
TO AL AIRCONT	124,000.00			<del>                                     </del>			-	<u> </u>	124,000.00		<del> </del>
O: OTHER SUPPLIES & MATERIAL EXPENSES	124,000.00	<del></del>			<del></del> -				124,000.00		<del></del> -
(AC# 5-02-03-990)									12 //2000		
			· <del>-</del>								
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	<del></del>	<del></del>		<del> </del>	<del></del>			<u> </u>	<del></del>		├──
				<del> </del>	<del></del>				<del></del>		<del> </del>
TOTAL AMOUNT	<del> </del>										
TOTAL AMOUNT REASON: PPMP Revision for Rep. & Maint Buildings and Other Structure	<u> </u>		-		<u>                                      </u>		-		124,000.00		

This is to certify that the above procurement program is in accordance with objectives of the LGU.

ROBERTO G ACABADO T

City Gov't. Department Head I

Approved by:

NELSON S. LEGACION

City Mayor

[0/2/m

**CALENDAR YEAR 2022** 

## **ENDMENT FORM**

Department: City Mayor's Office

nent Program: Naga City Lupong Tagapamayapa (PNaLO Program)

1 Fund: 1011-7994-4

Description	Account Code	Unit Cost	Qty.	Unit				DISTRI	BUTION			
			<u> </u>		1st	Quarter	2r	nd Quarter	3rd	Quarter	4th	Quarter
	,				Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amoun
ential Expenses	5-02-10-010							139,270.00				
<del></del>			<del> </del>			<del></del>	<del>  </del>	<del></del>	-			
.: P 139,270.00												
Supplies & Materials Expenses	5-02-03-990							57,010.00				
Maint. & Operating Expenses (OMOE)	5-02-99-990											
als- Naga City Hall Press Corps Meeting			ĺ					18,000.00				
als- Regiuonal Directors Meeting								40,000.00				
Meeting			] -					8,760.00				
nCom Meeting								10,500.00				
ick - Bicycle Counts on Mobility								5,000.00				
L: P 139,270.00					-							
ie: For PPMP inclusion.			l								<u> </u>	

epared by:

JERROLD'R. RITO
Administrative Assistant IV

PROCUREMENT OFFICE CITY OF NAGA

av. D

NATE TIME SEP 13 2022

Approved:

NELSON S. LEGACION

September 13, 2022

# SUPPLEMENTAL PROCUREMENT RECORD 3rd Quarter, 2022

City, Province or Municipality: Naga City, Province of Camarines Sur

Plan Control No:					Planned An	oun	t:		F	Page:			
Department / Office: Naga City	Hospital				Regular	- 1	Contingency	Total		_	mitted: Septe	mbe	er 12, 2022
						DIST	RIBUTIO	N			<del></del>		
DESCRIPTION	CODE	UNIT	QTY	UNIT	TOTAL COST	1 <sup>ST</sup> (	QUARTER	2 <sup>ND</sup>	QUARTER	s	RD QUARTER		4 <sup>™</sup> QUARTER
DESCRIPTION		COST				Qty	Amount	Qty	Amoun	t Qty	Amount	Q t v	Amount
From													
MEDICINES	5-02-03-070				3,000.000.00						3,000.000.00		
		· · ·				ļ	<u> </u>			_			
	<b></b>		ļ <u>.</u>			<u> </u>					_		
						<u> </u>							
To													
MEDICAL SUPPLIES	5-02-03-080		_		3,000.000.00	ļ					3,000.000.00		
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		<u> </u>	<u> </u>				ļ						
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Purpose:	<del> </del>		_			<del> </del> -	<del> </del>						·
FOR HOSPITAL OPERATION	<del> </del>	<del> </del>		-	-	<del>                                     </del>							
						<del>                                     </del>	-		-			<del> </del>	<del></del> .

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

Approved:

OSEPH S. SANGHEZ, MD, MHSA Chief of Hospital II NELSON S. LEGACION

8 9/19/2

AMENDMENT FORM

Department/Office: Naga city Hospital/EMS

DATE: May 4, 2022

							DISTRIBL	MOITU			
Description	Unit Cost	Qty	Unit	1 <sup>st</sup>	Quarter	2 <sup>nd</sup>	Quarter	1 :	3 <sup>rd</sup> Quarter	4th (	Quarter
				Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
FROM:					*						
Drug & Medecines Expenses											<del></del>
(5-02-03-070))											
-				<u> </u>	29,800						
											<u> </u>
TO:											
									,		
Repair & Maintenance Transporatation					29,800						İ
equipment	<u> </u>				25,000						
(5-02-13-060-01)											
				ļ	}						

This is to certify that the above procurement program is in accordance with objectives of the LGU.pr

Prepared by:

HILDA B.ALCORIZA Admin Aide I HEAD:

FJOSEPH S. SANCHEZ CHIEF OF HOSPITAL Approved by:

NELSON S. LEGACION

91W1nl

For the 3rd Quarter, CY 2022

Province. City or Municipality:

Plan Control No.:					Planned Amoun	<u>t</u>		_	_		Page:		
Department/Office: CSWDO					Regular		Contingency		Total		Date Subm	itted:	
							1.		DISTRIBL	JTION			
Description	Code	Unit Cost	Qty.	Unit	Total Cost	1:	st Quarter	2n	d Quarter	3	rd Quarter	4ti	h Q
				l	L	Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	T
From:							-						I
Food Supplies Expenses	5-02-03-050	47,650.00				-	ı		-	4	47,650.00	<del> </del>	+
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						<del> </del>				+-	1		+
						<b>1</b>							丰
TO:					<u> </u>	<u> </u>		ļ			ļ	ļ	$\perp$
Inclusion to PPMP					<del> </del>	-		-	_				+
Rep. & Maint. Furniture & Fixtures	5-02-13-070-01	47,650.00								4	47,650.00		$\pm$
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							1						

Reason: To be used by EDUCARE/SEED Montessorl.

This is to certify that the above procurement program is in accordance with objectives of the LGU.

Prepared by:

Requested by:

ELSIE MARIA M. ROMANO

ECCDDO, Division Head

Form No. 14-A

# SUPPLEMENTARY PROCUREMENT CALENDAR YEAR 2022

#### **AMENDMENT FORM**

Department/Office: Naga City Fire Station

	6-1-	11-244	Otro	linit		_		DISTRIBL	JTION			
Description	Code	Unit cost	Qty.	Unit	1st Quar	ter	2nd	Quarter	3rd	Quarter	4rt Qı	uarter
Fire Prevention Activities												
* Oplan Ligtas Pamayanan	6-02-99-990			_				50,000.00				
	<del>  </del>								-			
	<del>  </del>											
Aircon			2			•				50,000.00		
											-	
	+										<del></del>	
						Į.						

Noted by

SINSP RELIGIOUS V MENDOZA BFP Acting City Fire Director Approved By:

HON. NELSON S. LEGASCION

**CITY MAYOR** 

Nx/m

For the 3RD Quarter, CY 2022

Plan Control No.: #					Planned A	moun	t				Page:	1 of 1	
Department/Office: CEPPIO			Qty. Uni		Regular		Continge	ncy	Total		Date Subm	nitted:	09/05/2022
							-		DIST	RIBUT	ON		
Description	code	Unit Cost	Qty.	Unit	Total Cost	1st	Quarter	2nc	Quarter	3rc	Quarter	4tl	n Quarter
						Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
From: \$ . A . St. A .													
III. Functions and Meals	5-02-99-990				36,000.00								
f. Swimsuit and Gown Competition													
Dinner													
TO: - 1.55													
Coronation Dinner Event (Sept 7)											12,000.00		
Hotel Accomodation for Artist	5-02-99-990	-			-						24,000.00		
Reason: INCLUSION TO PPMP.	<u> </u>	]		L	<u> </u>		<u>l</u> .		<u> </u>	<u>i .</u>			

This is to certify that the above procurement plan is in accordance with objectives of this office.

ALLEN E. REONDANGA

Department Head

Approved by:

**NELSON S. LEGACION** 

FDP Form 14a - Supplemental Procurement Plan

## SUPPLEMENTAL PROCUREMENT PLAN FOR THE 3RD QUARTER, CY 2022

City of Naga Page\_of\_\_pages Planned Amount Plan Control No. \_\_\_\_\_ Department/ Office: EDUCATION, SCHOLARSHIP AND SPORTS Total Date Submitted: Contingency Regular OFFICE DISTRIBUTION **Total Cost** 3rd Quarter 4th Quarter Description CODE Quantity 1st Quarter 2nd Quarter Qtv. Qtv. Qtv. Amount Amount Amount **Amount** From: 1,450,000.00 1,450,000.00 Donations 5-02-99-080 To: Other Maint & Oper. 1,450,000.00 1,450,000.00 5-02-99-990 Expenses 1,450,000.00 TOTAL

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

Submitted by:

DELFÍN V. AGUILAR
ACTING ESSO OFFICER

Approved by:

NELSON S. LEGACION CITY MAYOR

9/4/12

CALENDAR YEAR 2022

#### AMMENDMENT FORM

				-		•		DIST	RIBUTIO	N		
Description	code	Unit Cost	Qty.	Unit	1st (	Quarter	2nd	Quarter	3rd	Quarter	4th	Quarter
	j				Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
Reversion:							- <u>-</u>				,	
From:												
Other Supplies and Materials Expenses	5-02-03-990									285,000.00		
	<del></del>									<del> </del>	<del></del>	
To:								<del> </del>		<del>  </del>		
Rep. & MaintMachinery and Equipment		<del>  </del>								1		
(Const. & Heavy Equip.)	5-02-13-050-08				-					52,160.00		
Rep. & MaintTransportation Equip.							_			1		
(Garbage Trucks)	-02-13-060-99-0	1								232,840.00		
										P285,000.00		
<del></del>	<del></del>	<del> </del>				<del> </del>		<del> </del>	<del></del>	<del> , </del>		<del></del>
Peason: For reversion	<del></del>	<del>  </del>			-	-		<del> </del>		<del>  - /  </del>		

This is to certify that the above procurement program is in accordance with objectives of the LGU.

SWMO & N.C. Molorgool, Special Concerns Office

Approved by:

DATE:

09/22/2022

SUPPLE	TAL PROCUREMENT RECORD
For the	Quarter CV 2021

Plan Control No.					Planned Amount					Page :		
Department/Office : CEO					Regular		Contingency	Total		Date Subm		
	code	Unit Cost	Qty.	Unit	Total Cost	151	Quarter		Quarter		Quarter	4th Quarter
Description					l	Qty	Amount	Qty	Amount	Qty	Amount	Qty
FROM:	5-02-03-050		1		51,445.00			<del> </del>		<del></del>		307
FOOD SUPPLIES EXPENSES								<del>                                      </del>				<del>,</del>
								<del> </del>		<del>                                     </del>	<del>                                     </del>	
								<del> </del>		<del> </del>	<del> </del>	
			1				<del>                                     </del>	<u> </u>	<del>  -                                   </del>	<del>                                     </del>	<del></del>	
	<u> </u>		<del>                                     </del>				<del> </del> -	<del>                                     </del>	<u> </u>	<del> </del>	<del> </del>	
			<del>                                     </del>				<del> </del>	<del> </del>		<del></del>		
			+				<del></del>	<del> </del>			<del> </del>	
		-	+		<del></del>		<del> </del>		<del> </del>	<del> </del>	<del>                                     </del>	
			<del>                                     </del>		_		<del></del>	<del> </del>	<del></del>	-	<del> </del>	
то;	5-02-99-990	-	+		198,884.00		-	<del> </del>	<del> </del>	-	<b>+</b>	<del> </del>
MATERIALS FOR REPAIR OF NAGA SEED	3 02 33 330		<del>                                     </del>		190,004.00		<del>                                     </del>	<del></del>		<del>                                     </del>	<del> </del>	
MONTESSORI SCHOOL AT CITY HALL COMP.	_		<del> </del>				<del> </del>	<del></del>		<del>                                     </del>	-	
NAGA CITY			<del> </del>				<del></del>			<del></del>	<del>                                     </del>	
	-		<del>                                     </del>				<del> </del>	<del> </del>	<del>                                     </del>	<del>                                     </del>	-	·
	<u> </u>		<del>                                     </del>				<del>  -</del>	<del></del>		<del>                                       </del>		
	<del>                                     </del>		+		-		+	<del> </del>				
			+		<del></del>							,
<del></del>	-		<del> </del>		<del></del>			<del>                                     </del>	<del></del>		-	
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<del></del>	-							1 -				
			<del>                                     </del>			_		1		<del> </del>		
	-		-				<del> </del>					
	·		<del> </del>					<del></del>	<b> </b>	2		
Reason:	<del>                                     </del>		1							<u> </u>	/	
	1-1-1-1-1	11 5.11	<u></u>				ļ		l		DX	_
This is to certify that the above procurement plan	- is in accordance with o	objectives of this	office.					Approved i		SON S. REGA		
Head									VNEUS	ON S. LEGA	<b>CION</b>	

CALENDAR YEAR 2022

#### AMMENDMENT FORM

Department/Office: Solid Waste Management Office-Naga City

DISTRIBUTION Description **Unit Cost** Qtv. Unit 1st Quarter 2nd Quarter 3rd Quarter 4th Quarter code Qty. Amount Qty. Amount Qty. Amount Qtv. Amount Replacement of items: From: 5-02-03-990 316,000,00 Trash Bin (3 pcs. per set) 15,800.00 20 20 16,400.00 Rolling Trash Bin 5-02-03-990 8,200,00 2 2 332,400.00 To: 1. Supplies and materials for repainting of 5-02-03-990 269.243.00 gutter and plantboxes at Plaza Rizal, Quince Martirez, Basilica Sidewalk gutter, Panganiban, Magsaysay and Brgy. Peñafrancia main streets. 5-02-03-990 62,974.00 2. Repainting of stage at Plaza Quezon P332,217.00

This is to certify that the above procurement program is in accordance with objectives of the LGU.

Reason: For supplemental of Items in replacement to PPMP.

Special Concerns Office

Approved by:

NELSON S. LEGACION

CITY PROCURE. LA 40,708

DATE: 8/31/2022

For the 3rd Quarter, CY 2022

Province, City or Municipality:

an Control No.:					Planned Amoun	<u>it</u>					Page:		7
epartment/Office: CSWDO	· · · · · · · · · · · · · · · · · · ·				Regular	<del></del>	Contingency		Total		Date Sub	mitted	:
									DISTRIBI				
Description	Code	Unit Cost	Qty.	Unit	Total Cost		st Quarter	<del></del>	nd Quarter		3rd Quarter		4th
						Qty.	Amount	Qty.	Amount	Qt	y. Amount	Qt	<u>ty.</u>
rom:			<del></del>			<del> </del> -	<del> </del>			<del></del>		<del> </del>	
			<u> </u>			<del></del>	<del>                                      </del>	_		4.			
ood Supplies Expenses	5-02-03-050	48,000.00			<del> </del>	+	<del> </del>			16	48,000.0	<u>•</u>	
	:				<del></del>	+	<del> </del>	<del> </del>		<del>- -</del>	<del></del>	$+\!\!-$	
					<del>                                     </del>	+	<del> </del>	<del></del>	<del> </del>	+	<del></del>	$+\!-$	
· · · · · · · · · · · · · · · · · · ·			-	<del></del>		+	<del> </del>	<del></del>	+	+	+		—
O;			_		<del> </del>	+		+	<del> </del>	+	<del>- </del>	+	_
clusion to PPMP			-		1	<del>   </del>	<del> </del>		<b>†</b>	+	<del>                                     </del>	$\vdash$	
		-	_			<del>- </del>							
ffice Supplies Expenses	5-02-03-010	48,000.00								16	48,000.0	0	
						I							
							<u> </u>			$\bot$			
					<u> </u>		<u> </u>		<u> </u>				
	1						[						

Reason: To be used by EDUCARE/SEED Montessori.

This is to certify that the above procurement program is in accordance with objectives of the LGU.

Prepared by:

EILLAINE V. DEMATERA Day Care Worker II Requested by:

ELSIE MARIA M. ROMANO
ECCDDO, Division Head

NELSON S. LEGACION

CALENDAR YEAR 2022

AMMENDMENT FORM

August 30, 2022 Department/Office: Persons with Disability Affairs Office (PDAO)

Department/Office. Persons with Disability Affairs		<u> </u>										
Description	CODE	Unit Cost	Qty	Unit	1 <sup>s</sup>	<sup>t</sup> Quarter		2 <sup>nd</sup> Quarter	3r	Quarter		4 <sup>th</sup> Quarter
·					Qty.		Qty.	Amount	Qty.	Amount	Qty.	Amount
From:										_		
Donations	5-09-99-080	49,000.00				<u> </u>						-
			_				-			,		
For Inclusion ÷											<u> </u>	l
Printing & Publication Expense – Paymet for PWD Medicine Booklet / PWD Basic Commodity Booklet.	5-02-99-020									49,000.00		
TOTAL		49,000.00								49,000.00		
REASON: For PPMP adjustment		İ				İ			<del></del>			

This is to certify that the above procurement program is in accordance with objectives of the LGU.

PAUL JOHN F. BARROSA, MBA PJAO, Department Head

HON. NELSON S. LEGACION

# SUPPLEMENTAL PROCUREMENT RECORD CALENDAR YEAR 2022 CONTROL OF THE SECOND CONTROL OF THE

REGIMEN

TIME

August 23, 202:

Office/Department: City Mayor's Office

AMMENDMENT FORM

Component Program: Naga City Lupong Tagapamayapa (PNaLO Program) General Fund: 1011-7994-4

Description	Account Code	Unit Cost	Qty.	Unit				DISTRII	BUTION		•	
					1st	Quarter	21	nd Quarter	3rc	l Quarter	41	th Q
			<u> </u>		Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	T
FROMilapon												
Other Maint. & Operating Expenses (OMOE)	5-02-04-010					. ,		216,010.00				‡
TOTAL: P 232,010.00		-										E
IIO:(GMO)										···	<b></b> -	
Other Maint. & Operating Expenses (OMOE)	5-02-99-990											
TCI Meeting							]	8,760.00				
Mancom Meeting - 7/29/2022		 						10,500.00			-	
ComCen Volunteers Seminar on Emergency												Γ_
& Disaster Preparedness								3,750.00				i
Meals/ Snack - Bicycle Counts on Mobility								5,000.00				Г
Training on Customer Service 101					]			136,500.00				
Stickers for Bicycle Registration								34,000.00.	,			$\Box$
Book Binding w/ Digital Laminated Covers of Infra Projects Proposals								17,500.00				
Seminar on Local Road Asset Management & One Time Cleansing of PPE								16,000.00				
Purpose: For PPMP inclusion		_									<u> </u>	

Prepared by:

Administrative Assistant IV

REMENT OFFICE

DATE/TIME

Approved:

NELSON S. LEGACION

CALENDAR YEAR 2022

#### AMMENDMENT FORM

Department/Office: Solid Waste Management Office-Naga City

DATE: 8/22/2022

			-					DIST	RIBUTI	ON		
Description	code	Unit Cost	Qty.	Unit	1st	Quarter	2nd	Quarter	3rc	Quarter	4th	Quarter
				_	Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
Reversion:	_											
From:												
Rep. & MaintMachinery and Equipment (Machinery)	5-02-13-050-01				_					198,900.00		
			•									
	<u> </u>	<u> </u>										
		<del> </del>			-							
<b>*</b>						-						-
To: Rep. & Maint,-infrastructure Assets (Other Infrastructu	5-02-13-030-99	<del>  </del>								198,900.00		
(Payment for the material use in proposed concrete	3 02 13 030 33		<del>.</del>					<del> </del>		,		
pathwalk (3 projects at various in Naga City).								<del>-</del>			_	-
			-									
Reason: For reversion.												

This is to certify that the above procurement program is in accordance with objectives of the LGU.

Fingr. VOEL PANIARTIN SWMO & N.C. Motorpool, Special Concerns Office Approved by:

NELSON S. LEGACION

City Mayor

July &

د ا

# SUPPLEMENTAL PROCUREMENT FORM CALENDAR YEAR 2022

#### **AMENDMENT FORM**

Department/Office: CITY POPULATION & NUTRITION OFFICE

		ļ.		}				DISTRIBUT	ON			
Description	CODE	Unit Cost	Qty.	Unit	1st (	Quarter	2nd (	Quarter	3rd Q	uarter	4th C	Quarter
					Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
From: Other Maint. & Oper. Exp.	5-02-99-990				_	16,075.00						
Conduct of You-for-You (U4U)												
Teen Trail and ParenTEENS												
·			-						-			
						_						
											_	
_												
To: Other Maint. & Oper. Exp.	5-02-99-990					16,075.00			-			
Maternity Kits				_		-						
					-							
	_		-					- 	_			
			•									
total						16,075.00						
Reason: For PPMP adjustment												
			-						-			

This is to certify that the above progurement program is in accordance with objectives of the LGU

NELSON S/NGACION

City Mayor

RAY-AN CYDRICK BY RENTOY

ACTING DEPARTMENT HEAD

of shap

# SUPPLEMENTAL PROCUREMENT RECORD 2nd Quarter, 2022

City, Province or Municipality: Naga City, Province of Camarines Sur

Plan Control No:					Planned Am	oun	t:		Page	:			-
Department / Office: Naga Ci	ity Hospital				Regular	(	ontingency	Total	<del></del>		itted: A	ugust	23, 2022
						DIST	RIBUTIO	N			-		<del></del> -
DESCRIPTION	CODE	UNIT	QTY	UNIT	TOTAL COST	1 <sup>ST</sup> (	QUARTER	2'	D QUARTER	3 <sup>RD</sup> (	QUARTER		4 <sup>TH</sup> QUARTER
		COST				Qty	Amount	Qty	Amount	Qty	Amoun	Qty	Amount
From										T			<del></del> _
MEDICINES	5-02-03-070				500,000.00				500,000.00				<u></u>
TRANSPORTATION EQUIPMENT	1-07-06-010	_			500,000.00				500,000.00				are -
MOTOR VEHICLE										-			
To													
OFFICE SUPPLIES	5-02-03-070				500,000.00				500,000.00				· <u>-</u> .
OFFICE EQUIPMENT	1-09-05-020				500,000.00	_			500,000.00				
													·
Purpose:									<u>-</u>	1			
FOR HOSPITAL OPERATION					_					1			<del> </del>
										1,			

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

Approved:

NELSON S. LEGACION City Mayor

Chief of Hospital II

# SUPPLEMENTAL PROCUREMENT RECORD 3rd Quarter, 2022

City, Province or Municipality: Naga City, Province of Camarines Sur

Plan Control No:					Planne	d Am	ount:			Page	 e:		
Department / Office: Naga C	ity Hospital				Regular		Contingency	Tot	tal	Date	Submit	ted: A	ugust 22, 202
		UNIT			TOTAL	DIST	RIBUTION	1		<u> </u>		-	
DESCRIPTION	CODE	COST	QTY	UNIT	COST	1 <sup>ST</sup> C	UARTER	2 <sup>ND</sup> (	QUARTER	3 <sup>RD</sup> (	QUARTER		4 <sup>th</sup> QUARTER
		<del> </del>	<del> </del>	<u> </u>	<del> </del>	Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount
From					<u> </u>								
<del></del> -		<u> </u>	<u> </u>		<del> </del> -	ļ				_			
					<u> </u>	<u> </u>							
	· · · · · · · · · · · · · · · · · · ·	<b>—</b>									<u> </u>		
		,											
		<b></b>											
To Office Equipment	1-07-05-020	<u> </u>		· .									<u> </u>
2 units of Aircon 1.5 HP		38,000.									76,000		
Split type		<u> </u>											
		<u> </u>											
									-1				
	_												
				-		ļ .							
Purpose:							<del>- '  </del>						
		1			_		•						
		<u> </u>					<del></del>	-					<del></del>

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

ØSEPH S. SANCHEZ, MD, MHSA

Chief of Hospital II

/

NELSON S. LEGACION

City Mayor

Soloh

# SUPPLEMENTAL PROCUREMENT RECORD FOR THE THIRD QUARTER 2022

Province, City or Municipality: Naga City							<u> </u>				•		
Plan Control No.:		•			Planned Amount:					•	Page:		Date
Department/Office: CSWDO					Regular	•	Contingency		Total		Submitted:		August 23, 2022
	ł	1 . 1		ļ					DI	STRIBUTI	ION		
Description	Code	Unit Cost	Qty.	Unit	Total Cost		st Quarter	21	nd Quarter	3	3rd Quarter		4h Quarter
						Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
From:	·	<u> </u>		Ļ						l			]
Philhealth ·		ļ. <u> </u>			850,000.00				_ ·		850,000.00		
		<u> </u>								}			
								<u> </u>					
	<u></u>	*		l							<u> </u>	· · · · · · · · · · · · · · · · · · ·	
	<u> </u>	<u> </u>		<u></u>								,	<u> </u>
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												,	
,				<u> </u>					]				
	-	·											
То:				<u> </u>				<u> </u>					
Donation(Main)		<u> </u>			850,000.00						850,000.00	-	
							]						,
				l									
				l				1					
												-	
				[, ` _	·				<u>-</u>				
				<u> </u>							_		
						•							
		<u> </u>	_				·	]					
					1						,		
TOTAL	<u> </u>				850,000.00					[1	850,000.00	_	
Reason: PPMP Inclusion/Reversion	·												

This is to certify that the above procurement program is in accordance with objectives of the LGU.

Prepared by:

Requested by

GLORAS. ROSANA

Social Welfare Assistant

ANNABEL S. VARGAS, RSW Department Head I CSWDO

/DO

v City Mayor

NELSON S. LEGACION

# SUPPLEMENTAL PROCUREMENT RECORD CALENDAR YEAR 2022

Date: 8/15/2022

AMMENDMENT FORM

Department/Office:OCA/ACTO

		1				Distribu					
DESCRIPTION	-	1		1 <sup>st</sup>	<sup>t</sup> Quarter	2 <sup>nc</sup>	<sup>d</sup> Quarter	310	Quarter		_
	Unit Cost	Qty.	Unit	Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	J
Reversion:		1									
From: OTHER MOEE(5-02-99-990)		i					1 		P3,900.00		
To: Office Supplies Exp. (5-02-03-010)							1		3,900.00		
			1	<u> </u>		11			<u> </u>		
											-
											_
									1		-
		+	<b> </b>	-					-	-	-
		+	<del> </del>	<del>  </del>	1	+		<del> </del>	+	+	_
		+		+		<del>  </del>		+	+	-	_
	,										
											_
						<u>                                     </u>					_
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		-		<del> </del>		-		<del> </del>	+	<del> </del>	_
		11	4	1	,	1		1	1	]	

This is to certify that the above procurement program is in accordance with objectives of the LGU.

Submitted By:

ALEC FRANCIS AS SANTOS ACTO-CHUEF- OF- OFFICE Approved:

ELMER S. BALDEMORO
City Administrator

88/20/r

DATE: 08/22/22

## SUPPLEMENTAL PROCUREMENT RECORD

Calendar Year 2022

#### **AMENDMENT FORM**

Department/Office: RAUL S. ROCO - Naga City Public Library

							DIS	TRIBUTION	ł		
Description	Unit Cost	Qty.	Unit		1 <sup>st</sup> Quarter		2 <sup>nd</sup> Quarter	1	3 <sup>rd</sup> Quarter	4	<sup>th</sup> Quarter
·				Qty.	Amount	Qtγ.	Amount	Qty.	Amount	Qty.	Amount
FROM:				<u> </u>		-					
TELEPHONE EXPENSES MOBILE	5-02-05-020-1		18 000.00								
		<u> </u>			_						
	-	_	-			_					
To: Other Maintenance Expenses	5-02-99-020	-					-		18,000		
					_						
					-						
		-	<u> </u>	<u> </u>				_		<u> </u>	
		<del>                                     </del>									
									TOTAL		18,000.

Reason: to supplement the letter obligation.

This is to certify that the above procurement program is in accordance with objectives of the LGU.

FEDERICO J. VINLUAN

City Librarian

HON. NELSON S. LEGACION

City Mayor

-88/N3/2

CALENDAR YEAR 2022

AMMENDMENT FORM

Department/Office: Solid Waste Management Office-Naga City

DATE:

8/1/2022

		!!!		] {				DISTR	BUTION			
Description	code	Unit Cost	Qty.	Unit	1st (	Quarter	2nd	Quarter	3rd (	Quarter	4th	Quarter
					Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
Replacement of items:									· · · · · · · · · · · · · · · · · · ·			
From:								İ				
Hard hat with logo	5-02-03-990	230.00	79			-		-	-	18,170.00		
						<del> </del>		<del>   </del>		-		-
			<del></del>	 	<del></del>							
To:								<del>  </del>		<del>  </del>		
Head band Umbrella	5-02-03-990	120,00	150		-		•	-		18,000.00		
								<del></del>				
				-				-				
					-						_	
<u> </u>												
							<u>.</u>					<del></del>
Reason: For supplemental of Items in replaceme	ent to PPMP.		-					<del>                                     </del>		<del> </del>		

This is to certify that the above procurement program is in accordance with objectives of the LGU.

Engr JOEL P WHITN WMO & N.E. Motorpool, Special Concerns Office

Approved by:

ELSON S LEGACION

shalm &

# SUPPLEMENTAL PROCUREMENT RECORD For the 3<sup>rd</sup> quarter

Province, City or Municipality: Naga City

Plan Control No.					Planned	Amount	t					Page: I	MARCH 3, 2022
Department/Office: NCCW					Regular		Cor	ntingenc	y 1	otal		7	
•									1	DISTRIBUT	ION		
Description	Code	Unit Cost	Qty.	Unit	Total Cost	1 <sup>st</sup> 0	luarter	2 <sup>nd</sup> (	Quarter	3 <sup>rd</sup> Qu	arter ·	4 <sup>th</sup> Qua	arter
						Qty	Amount	Qty	Amount	Qty.	Amount	Qty.	Amount
From:							<del> </del>	+		<del></del>	<del> </del>	<del>-                                    </del>	<del>                                     </del>
usuno Main -	5-02-12- 050-02								,				
AICH -													
			<u> </u>		·	_			<u></u>				
To:					_			1	-				<del> </del>
Other Supplies & Materials Expenses	5-02-03- 990										P 6,190.00		
Posser, To be used at the Maga City	L_,			<u> </u>	<u> </u>							<u> </u>	

Reason: To be used at the Naga City Children's Home.

This is certify that the above procurement program is in accordance with objectives of the LGU.

ANNABEL STVARGAS, RSW

Department Head

Approved by:

HON. NELSON S. LEGACION

For the 3RD Quarter, CY 2022

Province, City or Municipality: Naga City

Plan Control No.: #					Planned Amo	ount					Page:	1 of 1	
Department/Office: CEPPIO		•			Regular		Contingend	y	Total		Date Submit	ted:	08/15/2022
· · · · · · · · · · · · · · · · · · ·			Ī						DISTR	RIBUTIO	N		
Description	code	<b>Unit Cost</b>	Qty.	Unit	Total Cost	1st	Quarter	2n	d Quarter	3r	d Quarter	4ti	Quarter
<u> </u>					_	Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
From:			Τ							1 1		Ī -	
Other Maint. And Operating Expenses	5-02-99-990				18,000.00								
TO:				_									
Meals	5-02-99-990										18,000.00		
													_
Reason: INCLUSION TO PPMP.									<u> </u>				

This is to certify that the above procurement plan is in accordance with objectives of this office .

ALLEN L'REONDANGA

Department Head

Approved by:

NELSON S. LEGACION

#### SUPPLEMENTAL PROCUREMENT PLAN FOR THE 3<sup>rd</sup> Quarter, CY 2022

City: Naga City

	ntrol No: nent/Offic	e: Naga City Da	ngerous Dr	ugs Board (NCDDB)				Planned Amou	int				Page:			
								Regular	Conti	ngency To	otal			omitted: July 8, 2	021	
ltem	De	escription		Code	Unit Cost	Qty	Unit	Total Cost	<b>1</b> <sup>st</sup> (	Quarter	2 <sup>nd</sup>	DIST Quarter	RIBUTIO	ON B <sup>rd</sup> Quarter	4 <sup>th</sup>	Quarter
	ļ	<del></del>		-					Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount
1	From	Training H	Expenses	-5-02-02-010				19,500.00			_					
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· ·	То	Training F	Expenses	- 5-02-02-010	) 	<u> </u>			<del> </del>				<b> </b>	19,500.00	<u> </u>	
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TOTAL				· · · · · · · · · · · · · · · · · · ·	•						_					

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

Prepared by: JOSE B

Executive Director

Approved by:

HON. NELSØN \$. LEGACION

Chty/Mayor

FDP Form 14a - Supplemental Procurement Plan

#### SUPPLEMENTAL PROCUREMENT PLAN FOR THE 3rd\_Quarter, CY 2022

Province, <u>City</u> or Municipality : <u>Naga City</u>

	ontrol No.:					Planned Amou	nt				Page:			
Departr	ment/ Office: OCA-MAIN					Regular	Contir	gency	Total		Date S	ubmitted:		
item	Description								_	DIST				
No.	Description	Code	Unit Cost	Qty	Unit	Total Cost		Quarter		Quarter		Quarter	4th	Quarter
			_	ļ			Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
	FROM:		<u> </u>	ļ				<u> </u>		<u></u>				
	Office supplies	5-02-03-010			<del> </del>	3,061.76		<del> </del>	<del> </del>		<u> </u>	3,061.76		
	Paper, multi purpose (COPY), A4, 70 gsm Correction tape					140.20				<u> </u>		140.20		
	Consection tape	<del></del>										3,201.96		
-										<del> </del> -	<del></del>			<del></del>
	то:	<del></del>											-	
	Other supplies & materials exp.	5-02-03-990		_		3,201.96		<del></del>	1	<del> </del>		3,201.96		 
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	<del></del>	<del></del>												
								<del> </del>						
OTAL														
UIAL	<del></del>	<del></del>												

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

Approved By:

Eimer S. Baldemoro City Administrator islson S. Legacion

Sylme of

SUPPLEMENTAL	PROCUREMENT	RECORD
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\_Quarter,CY 2022

Plan Control No.					Planned Account					Page:			
Department/Office: CEO					Regular		Contingency	Total		Date Submi	tted:		
	Code	Unit Cost	Qty.	Unit	Total Cost		Quarter	2nd	d Quarter	, 3rd	Quarter	4th	Quarter
Description					[	Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount
FROM:	5-02-99-990		,						1				
PIN-BUG & other structure	50				145,070.N								
RM - Inda Acroti (Road Nelingto	<u> </u>			1	26.01.0			1		1			
149 - Inpra Scretz (Open Infra)					Jo. 00. H								
FROM: PM - BUG & Other Amother RM - Ingra Amotic Road Helmorte RM - Ingra Ametic Ober Infra) RM - Bulle & Other Shurfwer BUG	(5-102 TOG)	-01			46, m. A			1			-		
DM- bulling & topignat (office) Travelling typense break	(a)				4C m.N.					7			_
Travelling thense boal	0				70.00.N							<u> </u>	
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										1	1		
TO: OTHER MOE	5-02-99-990												
FABRICATION OF BACKDRAFT AND STAGE AT P	LAZA QUEZON				333,657.00			1		1			
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Reason;								1				<u> </u>	

This is to certify that the above procurement plan is in accordance with objectives of this office.

Approved by:

LGU Form No. 14-A Naga City

# SUPPLEMENTAL PROCUREMENT RECORD

**AMENDMENT FORM** 

Department/Office: Public Safety Office

DATE: August 1, 2022

Description FROM:	Unit Cost	Qty	Unit	DISTRIBUTION							
				1st Quarter		2 <sup>nd</sup> Quarter		3 <sup>rd</sup> Quarter		4 <sup>th</sup> Quarter	
				Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
REP. & MAIN-INFRASTRUCTURE ASSETS (Communication)				<del> </del>		-					
5-02-13-030-05	<del> </del>			<del> </del>							
<ul> <li>repair and maintenance of IT machinery and equip</li> </ul>	<del>                                     </del>			<del> </del>	<del></del>				10,000		
	<del> </del>		<u> </u>	<del> </del>					10,000	}	
	<del> </del> -			<del>-</del>	<del></del>	<u> </u>					
				<del> </del>	<del></del>	<del> </del>		<del> </del> -	<del> </del>		
				<del>                                     </del>	<del></del>	<del> </del>		<del> </del>	<del> </del>	<u> </u>	<del> </del>
O:	<del></del>							<del> </del>	<del>-</del>	<u>-</u> -	<del> </del>
MILITARY, POLICE & TRAFFIC SUPPLIES	<del> </del>										<del>                                     </del>
XPENSES (5-02-03-120)	<del> </del>	<del></del>		<del></del>	<del></del>		_  ,	<u> </u>	10,000		
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eason: to supplement the letter obl	igation				<del></del>	<u> </u>		<u> </u>			

This is to certify that the above procurement program is in accordance with objectives of the LGU.pr

Submitted by:

RÉNNE F. GUMBA

CGDH-1, Public Safety Office

Approved by:

NELSON S. TEGACION

# SUPPLEMENTAL PROCUREMENT FORM CALENDAR YEAR 2022

#### AMENDMENT FORM

Department/Office: CITY POPULATION & NUTRITION OFFICE

		ŀ						DISTRIBUT	ION ·			
Description	CODE	Unit Cost	Qty.	Unit	1st	Quarter	2nd	Quarter	3rd Q	uarter	4th (	Quarter
					Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
From: Other Maint. & Oper. Exp.	5-02-99-990					10,000.00						
Conduct of You-for-You (U4U)												
Teen Trail and ParenTEENS												
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To: Office Supplies Expenses	5-02-03-010					10,000.00						
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										İ		
total						10,000.00						
Reason: For PPMP adjustment							-			j		3

This is to certify that the above procurement program is in accordance with objectives of the LGU

WELSON S. LEGACION

City Mayor

RAY-AN CYDRICK G. RENTOY

ACTING DEPARTMENT HEAD

gh/h of

For the 3rd Quarter, CY 2022

epartment: Bicol Central Station													
					Regular		Contingency		Total		Date Submitt	ed:	
									DISTRI	BUTION			
•					1 [	1ST C	QUARTER	2ND	QUARTER	3RD	QUARTER	411	H QUARTER
DESCRIPTION	CODE	UNIT COST	QTY.	UNIT	TOTAL COST	QTY.	AMOUNT	QTY.	AMOUNT	QTY.	AMOUNT	QTY.	AMOUN
ROM:	T .							•		· · ·			$\vdash$
lilitary, Police & Traffic Supplies					1 1		1	•					$\vdash$
xpenses	5-02-03-120			<u> </u>	55,000.00		ļ. ·L	•			55,000.00		
·			*		<u></u>								
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rinting and Publication Expenses	5-02-99-020			1							1		
			_	1	55,000.00			_		<del>,                                    </del>	1 1		1
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TOTAL Reason: Inclusion to PPMP/Additional Allotm	<del></del>			L.,	<del></del>				L		55,000.00		

Submitted by

RODERICK D REFORSADO

BCS Terminal Manager

Approved by:

NELSON S. LEGACION

dyw of

FDP F	orm 14a - Supplemental Procurement Plan	SUPPL				CUREM						(1963) ( )	struma	Su <sub>1,</sub> 31	11.10	विंगी.
Provi	nce, <u>City</u> or Municipality : <u>Naga City</u>							=				भने । तु <sup>क्</sup> री	ar iolan	ly on 18°C	ា ,នៈក	sivo <b>i</b> q
Plan (	Control No.:				,	Plann	ed A	nount	·		Page:			Lofe I	4 13	
Depa	rtment/ Office <u>CMO/JMRGGC</u>		1			Regular	Cor	tingend	Total		Date :	Submitted:	<u> </u>	esiteO i	nom.	<b>D</b> epar
_					,					DIST	RIBU	TION			***	[
Item No.	Description	Code	Unit Cost	Qty	Unit	Total Cost	1st	Quarter	2n	d Quarter	3rc	I Quarter <sub>⊘i?G</sub>	io.4th.0	Quarter		item Zo.
140.							Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount		
	FROM:									~					7.75	
	I. OTHER MAINTENANCE AND OPERATING EXPENSES	5-02-99-990										⊃ CMA 10,000.00	Es Mu	111/11/25 2 %	HOTE ARE	]
	Networking and Partnership Building with Gov't											<del></del>		7 00000	יייייין אין (Nטוני, פי	!
	Agencies and some other institutions					├	├				<del> </del> -	or of the	7 9/30/5	KJ-1. J. C	On Part	
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	Wall to wall carpet shampooing of	5-02-99-990					L			·		8,300.00	auto 1 .	rosta W		,
	JMR Auditorium			<b> </b>		_						nc.1uili	াই সাই			
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TO	AL	<u> </u>							一			8,300.00			<u></u>	TO E
This i	s to certify that the above procurement plan  Prepared by:  RAY-AN CYDRICK G. F  JMRGGC Executive D	RENTOY	nce wit			tive of the		ffice.	Hor	n. Nelson S.		SPANCE NO	Э	i Indi yil. The ed by:		n sterr

FDP Form 14a -	- Supplemental	<b>Procurement</b>	Plar

#### SUPPLEMENTAL PROCUREMENT PLAN FOR THE 3rd\_Quarter, CY 2022

Province, <u>City</u> or Municipality : <u>Naga City</u>

Plan Co	ntrol No.:					Planned Am	ount				Page:			
Departn	nent/ Office: <u>CHO</u>					Regular	Continge	ncy	Total		Date Sub	mitted:		
ltem					1				<u> </u>		IBUTIO	N	_	
No.	Description	Code	Unit Cost	Qty	Unit	Total Cost		Quarter		Quarter	3rd	Quarter	4th	Quarter
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	FROM:	<del> </del> -	-			ļ	<del> </del> -		<u> </u>		<u> </u>	<b></b>		
	Medical, Dental & Laboratory Supplies Expenses	5-02-03-080	<del></del>									200,000.00		
											<u> </u>			
						<u> </u>					<u> </u>			
	TO:													
	Office Supplies Expenses	5-02-03-010										200,000.00		
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This is to certify that the above procurement plan is in accordance with the objective of this Office.

Rrepared by://

Dr. Vito C. Borja

Approved By:

Nelson S. Legacion

CALENDAR YEAR 2022

AMMENDMENT FORM

Department/Office: Persons with Disability Affairs Office (PDAO)

JULY 12, 20222

Description	CODE	Unit Cost	Qty	Unit	1	<sup>t</sup> Quarter		2 <sup>nd</sup> Quarter	T :	rd Quarter		4 <sup>th</sup> Quarter
					Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
From:												
Donations	5-09-99-080	36,700.00							<u> </u>			<u> </u>
					-			<del> </del>	+ -	<del>                                     </del>		+
For Inclusion									<u> </u>			
Other Maint.&Oper. Expenses (OMOE) Reinbursement for SEMINAR ON REPUBLIC ACT NO. 11228	5-02-99-990							33,750.00				
Purchase of Clutch Cable TMX 150 Premo and Set Cover Tricycle Upholstery	5-02-13-060-01							1,100.00				
PF Sensor Board, Service Charge, Check Up/Service Fee Monitor	5-02-13-050-02							1,850.00				
TOTAL		36,700.00						36,700.00				
REASON: For PPMP adjustment									<u> </u>	<del> </del>	<del> </del>	<del> </del>

This is to certify that the above procurement program is in accordance with objectives of the LGU.

PAUL JOHN F. BARROSA, MBA PDAY, Department Head HON. NELSON S. LEGACION

City Mayor

7/26/N

# SUPPLEMENTAL PROCUREMENT FORM CALENDAR YEAR 2022

#### AMENDMENT FORM

Department/Office: CITY POPULATION & NUTRITION OFFICE

								DISTRIBUT	ON			
Description	CODE	Unit Cost	Qty.	Unit	1st (	Quarter	2nd	Quarter	3rd C	uarter	4th (	Quarter
					Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
From: Other Maint. & Oper. Exp.	5-02-99-990					23,000.00						
Conduct of You-for-You (U4U)												
Teen Trail and ParenTEENS							_					
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	_											
To: Other Maint. & Oper. Exp.	5-02-99-990					23,000.00	_		_			
Various Supplies									_			
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	·											
									_			
			1									
total				<u> </u>		23,000.00						
Reason: For PPMP adjustment										<u> </u>		
					<u> </u>						_	

This is to certify that the above procurement program is in accordance with objectives of the LGU

**NELSON S. LEGACION** 

City Mayor

RAY-AN CYDRICK G. RENTOY

ACTING DEPARTMENT HEAD

Nobe



For the Third Quarter, CY 2022

Province, City or Municipality:

Province, Oity or widthcipality.													
Plan Control No.:					Planned Amo		·				<b>⊣</b> ~	1 of 1	
Department/Office: HSDO					Regular		Contingency		Total		Date Submitted:	7	7.14.2022
		·			II				DISTRIBL	UTION			
Description	code	Unit Cost	Qty.	Unit	Total Cost		st Quarter		2nd Quarter		3rd Quarter		h Quarter
	1	\ <u></u>			<u> </u>	Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
om:					\\								
DONATIONS	5.02.99,080										50,000.00		
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TO:		·		<u></u> i	<u> </u>		<u></u>		-		<u></u> ,		
OFFICE SUPPLIES EXP.	5.02.03.010	\											
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TONER FOR KYOCERA TASKALFA	1	<b>!</b>	1	1	i j	1	Į.					1	
4800	5.02.99.990	·	ļ	<b>—</b>	L	L	Ļ	<u></u>	<del></del>	<b></b>	50,000	1	
<u> </u>		·	<b> </b>		<u> </u>					<u></u>	<del></del>		
		\			<u> </u>		<u></u>	<u></u> ,					
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This is to certify that the above procurement plan is in accordance with objectives of this office .

ROLANDO SI. CAMPILLOS

(HSDO Dept. Head)

Approved by:

NELSON S. LEGACION

City Mayor

Salah

For the 3RD Quarter, CY 2022

Province, City or Municipality: Naga City

Plan Control No.: #	-				Planned Amo	unt				<u></u>	Page:	1 of 1	
Department/Office: CEPPIO					Regular		Contingency		Total	•	Date Subn	nitted:	7/18/2022
								·	DISTRIE	UTIO	V		
Description	code	Unit Cost	Qty.	Unit	Total Cost	1s	t Quarter	2nd	Quarter	3rc	d Quarter	4th	Quarter
-						Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
From:													<u>.</u>
OTHER SUPPLIES AND								<u> </u>	_	<u> </u>			
MATERIALS EXPENSES 5-02-03-990					73,000.00					ļ			
TO:				<u> </u>						<u> </u>			
OFFICE SUPPLIES											<u> </u>		
EXPENSES	5-02-03-010			ļ							73,000.00		
		<del>                                     </del>				<u> </u>		-		<del> </del>	ļ		
Passon: INCLUSION TO PPMP.					l					J	<u>l</u>		

Reason: INCLUSION TO PPMP.

This is to certify that the above procurement plan is in accordance with objectives of this office .

ALLEN L. BEONDANGA

DEPARTMENT HEAD

Approved by:

NELSON'S. LEGACION

City Mayor

-lapa

CALENDAR YEAR 2022

AMMENDMENT FORM

Department/Office: Persons with Disability Affairs Office (PDAO)

HIIV 20 2022

Description	CODE	Unit Cost	Qty	Uni	15	<sup>t</sup> Quarter		2 <sup>nd</sup> Quarter	3	<sup>d</sup> Quarter		4 <sup>th</sup> Quarter
				t	Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
From:												
Donations	5-09-99-080	224,551.15	ļ				-					
For Inclusion								-			<del> </del>	
Other Maint.&Oper. Expenses (OMOE) Salary for SEFE	5-02-99-990			_				123,981.15	<u> </u>			
PWD Month Culminating Activity Tarpulin	5-02-99-990							1,460.00				
PWD Month Kick Off Activity (Meals)	5-02-99-990							49,360.00				
PWD Month Culminating Activity (Meals)	5-02-99-990							49,750.00				
TOTAL		224,551.15						224,551.15				
REASON: For PPMP adjustment												

This is to certify that the above procurement program is in accordance with objectives of the LGU.

PAUL JOHN BARROSA, MBA

PDAO, Separtment Head

HON. NELSON S. LEGACION

# SUPPLEMENTAL PROCUREMENT RECORD FOR THE FIRST QUARTER

Province, City or Municipality: Nag City										•			
Plan Control Number:					Planned Amou	int:		<del></del>			Page:		Date
Department/Office: ENRO					Regular		Contingency		Total			ted: July	y 15, 2022
			T				<u></u>		DISTRIBU	TION	<del> </del>		
Description	Code	Unit Cost	Qty.	Unit	Total Cost	1st Quar	ter	2nd Qua	rter	3rd Q	uarter	4th Qu	arter
			l	l		Qty.	Amount	Qty.	Amount	Qty	Amoun	Qty	Amount
Sem:											1		
Carler Maintenance and Operation Expense			ļ		204,000.00		204,000.00						204,000.00
Rep. & Maint-Machinery & Equipment (Agricultural)	<u> </u>				64,948.00		64,948.00						64,948.00
(Main)													
To:		<u> </u>	<u> </u>										
Rep. & Maint-Building and Other					268,948.00		268,948.00						268,948.00
structures (Other Structures) 5-02-17-040	- ou		-										<del></del>
											-		<del> </del>
TOTAL		1			268,948.00		268,948.00					_ <del></del>	268,948.00

This is to certify that the procurement is in accordance with the objective of the LGU.

Prepared by:

Sherwin Estanislao ENRO Personnel Requested by:

ALEXANDER N. CANING

City ENRO

Approved by:

NELSON LEGACION

City MAYOR

FDF	Form14-	1

For the \_\_\_Quarter, CY 2022

Province, City or Municipality

		PLANNED AM	DUNT					Page:		_		
PRISE AND PROM	OTIONS OFFIC	Œ				Continger	ıcy	Total		Date Subr	ni <u>tted:</u>	
T MISE AND THOM		<u> </u>			1			DISTRI	SUTION	1		
CODE	Unit Cost	Otv.	Unit	Total Cost	1 <sup>st</sup> (	Quarter	2nd	Quarter	3 <sup>rd</sup>	Quarter	4 <sup>th</sup> (	Quarter
CODE					Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
					<u> </u>		ļ					
					<u> </u>					ļ. —		-
1-07-05-020	12,100.00		<u> </u>	12,100.00	_	-						
<del> </del>		-			<del>                                     </del>		<del> </del>		<del> </del>			-
		<u> </u>	<b> </b>		<del>                                       </del>	<del>-</del>	<del> </del>		<del> </del>		<del>                                     </del>	
		<del> </del>	<u> </u>		<del>                                     </del>	<del> </del>		<del> </del>	├		<del>                                     </del>	
1-07-05-070	12,100.00			12,100.00					ļ	-		
	1-07-05-020	1-07-05-020 12,100.00	1-07-05-020 12,100.00	CODE Unit Cost Qty. Unit  1-07-05-020 12,100.00	CODE Unit Cost Qty. Unit Total Cost  1-07-05-020 12,100.00 12,100.00	CODE Unit Cost Qty. Unit Total Cost 1st Qty.  1-07-05-020 12,100.00 12,100.00	CODE	CODE Unit Cost Qty. Unit Total Cost 1st Quarter Qty. Amount Qty.  1-07-05-020 12,100.00 12,100.00 12,100.00 Contingency	RPRISE AND PROMOTIONS OFFICE  CODE  Unit Cost  Qty.  Unit  Total Cost  1st Quarter Qty.  Amount Qty.  Amount  1-07-05-020  12,100.00  12,100.00  12,100.00  12,100.00  12,100.00  12,100.00  12,100.00  12,100.00  13,100.00  14,100.00  15,100.00  15,100.00  16,100.00  17,100.00  17,100.00  18,100.00  19,100.00  10,100.00	REPRISE AND PROMOTIONS OFFICE  CODE  Unit Cost  Qty.  Unit  Total Cost  1st Quarter Qty.  Amount Qty.  Amount Qty.  Amount Qty.  1-07-05-020  12,100.00  12,100.00  Contingency  Total  DISTRIBUTION Qty.  Amount Qty.  Amount Qty.  Amount Qty.	Regular Contingency Total Date Subrace Contingency Total Date Subrace Code Unit Cost Oty. Unit Total Cost Oty. Unit Total Cost Oty. Amount Oty. Amount Oty. Amount Oty. Amount Oty. Amount Oty. Amount Oty. Amount Oty. Amount Oty. Amount Oty. Amount Oty. Amount Oty. Oty. Oty. Oty. Oty. Oty. Oty. Oty	Regular Contingency Total Date Submitted:  CODE Unit Cost Qty. Unit Total Cost 1st Quarter Qty. Amount Qty. Amount Qty. Amount Qty. Amount Qty. Amount Qty.  1-07-05-020 12,100.00 12,100.00 12,100.00 12,100.00 Date Submitted:  Contingency Total Date Submitted:  Distribution  Amount Qty. Amount Qty. Amount Qty. Amount Qty. Amount Qty. Amount Qty.

Reason: For PPMP adjustment for the office needs and function

This is to certify that the above procurement program is in accordance with objective of the LGU

Submitted by

RAMON J FLORENDO

CGDH – 1/Market Superintendent

Approved by:

NELSON S. LEGACION Local Chief Executive

of of the &

### SUPPLEMENTAL PROCUREMENT RECORD For the 2<sup>nd</sup> Quarter, CY 2022 City of Naga

Plan Control No.:					Planned Amount						Page:		
Department/Office: ESSO					Regular		Contingency		Total		Date Submitted	l:	
			2	11-7-	T-4-104				DISTRIBUTION		<u>l</u>		
Description	Code	Unit Cost	Qty	Unit	Total Cost		1 <sup>st</sup> Quarter		2 <sup>ND</sup> Quarter		3 <sup>rd</sup> Quarter		4 <sup>th</sup> Quarter
						Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount
From:				İ							-		<del></del>
Rep. & Maint. Buildings and other structure	5-02 99-990	50.	13-0	10-91					500,000				
То													
1 Sport Equipment	5-02 / 999990								500,000				
2 Other expenses for Inter Brgy. Sport fest 2022	/												
Reason: PPMP Reversion													

This is to certify that the above procurement plan is in accordance with objectives of this office.

DELFIN V. AGUILAR

Acting Dept. Head ESSO

Approved by:

Nelson S. Legacion

For the \_\_Quarter, CY 2022

Province, City or Municipality

				PLANNED AT	MOUNT	r				Page:		
PRISE AND PROM	OTIONS O	FFICE		Regular	-	Continger	ıcy	Total		Date Subr	nitted:	
		T						DISTRII	BUTION	V		
CODE	1	Qty.	Unit	Total Cost	1 <sup>st</sup>	Quarter	2nd	Quarter	3 <sup>rd</sup>	Quarter	4 <sup>th</sup>	Quarter
	Cost			·	Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
					-			•				
										ļ		
5-02-99-990				14,000.00								
				. <u>-</u>			_					
									<u> </u>			
5-02-99-990	14.00	1000	piece	14,000.00								
	<b>CODE</b> 5-02-99-990	CODE Unit Cost 5-02-99-990	5-02-99-990	CODE Unit Cost Qty. Unit	CODE Unit Cost Unit Total Cost  5-02-99-990 14,000.00	CODE	CODE Unit Cost Qty. Unit Total Cost 1st Quarter Qty. Amount  5-02-99-990 14,000.00	CODE Unit Cost Unit Total Cost 1st Quarter Qty. Unit Total Cost Qty. Amount Qty.  5-02-99-990 14,000.00	PRISE AND PROMOTIONS OFFICE  CODE  Unit Cost  Qty.  Unit Total Cost  Total Cost  1st Quarter Qty.  Amount  Qty.  Amount  5-02-99-990  14,000.00  Total	PRISE AND PROMOTIONS OFFICE  CODE  Unit Cost  Qty. Unit Total Cost  Total Cost  1st Quarter Qty. Amount Qty. Amount Qty.  5-02-99-990  14,000.00  Contingency  Total  DISTRIBUTION Qty. Amount Qty. Amount Qty.	PRISE AND PROMOTIONS OFFICE  Unit Cost  Qty.  Unit Total Cost  Total Cost  1st Quarter  Qty.  Amount  Qty.  Amount  Qty.  Amount  Total Cost  1st Quarter  Qty.  Amount  Qty.  Amount  Qty.  Amount  Qty.  Amount  Qty.  Amount  Qty.  Amount  Qty.  Amount  Qty.  Amount  Qty.  Amount  Qty.  Amount  Qty.  Amount  Qty.  Amount	PRISE AND PROMOTIONS OFFICE  CODE  Unit Cost  Qty.  Unit Total Cost  Total Cost  1st Quarter Qty.  Amount Qty.  Amount Qty.  Amount Qty.  DISTRIBUTION  Qty.  Amount Qty.  Amount Qty.  Amount Qty.  Amount Qty.  Amount Qty.  S-02-99-990

Reason: For PPMP adjustment for the office needs and function

This is to certify that the above procurement program is in accordance with objective of the LGU

Submitted by: 4

RAMON I./FLORENDO

CGDH – 1 Market Superintendent

Approved by:

NELSON S. LEGACION

# SUPPLEMENTAL PROCUREMENT RECORDP 3RD Quarter, CY 2022

City, Province or Municipality: Naga City, Province of Camarines Sur

Plan Control No:					Planned Am	ount:			_	Page		<del></del>	
Department / Office: NAGA CITY H	OSPITAL	<del>,</del>			Regular	Co	ntingency		Total	1	e. e Submitte	d: 7/1	L <b>2/2</b> 2
DESCRIPTION	CODE	UNIT							DISTRI	BUTIO	N		
DESCRIPTION	CODE	COST	QTY	UNIT	TOTAL COST		QUARTER	2 <sup>ND</sup>	QUARTER	3 <sup>RD</sup>	QUARTER	<b>4</b> <sup>TH</sup>	QUAR
	<del>-  </del>	<del></del>	<del>                                      </del>	<u> </u>		Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amo
To: Office Equipment	1-07-05-020							1 1					
(For Inclussion)		<u> </u>	†			<del>  -                                   </del>	<del> </del>	<del> -</del>		<del> </del>	<del> -</del>	_	
ADF high speed scanner			1	unit	55,000.00	<del> </del>	· · -	<del> </del>		1	55,000.00		_
					•	<del>                                     </del>	<del></del>			<del>-</del>	33,000.00		
								<del>                                     </del>	<del></del>	<del> </del>	<u> </u>	<u> </u>	
								<del>                                     </del>					
		. <u>.</u>	<u> </u>						· ·-				_
											<del></del>	_	_
	<del></del>			-			<del></del>					_	
	<del>-</del> :		<del> </del>				<del></del>	<u>                                      </u>					
	_					<del> </del>	<u> </u>		<u></u>				
	<del></del>	<del></del> -				<del></del>		<del>                                     </del>					
							<del></del>	<del>   </del>			<del></del>		
		<u> </u>	<del> </del>				<del></del> .	<del>                                     </del>				-	
Purpose: For Hospital Operation				_			<del></del>	<del> </del>					
i di poseti di Tiospital Operativit													

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

JOSÉPH S. SANCHEZ

**Chief of Hospital II** 

Approved

NELSON S. LEGACION

City Mayør

Mah



CALENDAR YEAR 2022

 ${\mathcal O}_{\mathcal H}$ 

#### AMMENDMENT FORM

Office/Department: City Mayor's Office

Component Program: General Fund: 1011

July 12, 2022

Description	Account Code	Unit Cost	Qty.	Unit				DISTRI	BUTION			
					1st	Quarter	21	ıd Quarter	3rd	Quarter	4th	Quarter
ing#					Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
FROM												
Travelling Expenses - Local	5-02-04-010						1.00	185,975.00		<del></del>	† †	
TOTAL: P 185,975.00	7											
110		-									+	
	5 00 00 000	-									<del>                                     </del>	
Other Maint. & Operating Expenses (OMOE)	5-02-99-990	<del></del>					+	20.000.00			+	
Meals - State of the City Report	<del> </del> -						<del>                                     </del>	20,000.00			<del> </del>	
Rental of Lights with Drumset							<b>  </b> -	48,000.00			<del>                                     </del>	
Meals - SK Federation Meeting	<u> </u>		ļ				ļ <u></u>	25,000.00			<del>↓</del>	
Repair of Barrier - CMO Frontline		<u> </u>	ļ					4,500.00			$\bot$	
Wreath								48,000.00	↓		<del>                                     </del>	
Meals/ Snack - Special Projects Meeting								6,750.00			<u> </u>	
Meals/ Snack - SGLG Regional Assessment								4,500.00				
Meals/ Snack - Special Projects Meeting								4,500.00				-
Meals/ Snack - ManCom Meeting								1,500.00				
Meals/ Snack - Special Projects Meeting		_						4,000.00				
Meals/ Snack - Special Projects Meeting						_		3,600.00				
Meals/ Snack - Special Projects Meeting							İ	4,500.00			† – – †	
Meals - Bicycle Counts on Mobility Awards								5,000.00				
Meals - Proposed Underground Cabling Meeting	-							6,125.00				
TOTAL: P 185,975.00						<del></del>		i ·		<del></del>		
Purpose: For PPMP inclusion.											†	

Prepared by:

JERROLLER, ATO
Administrative Assistant IV

Recommending Approval

PAUL JOHN F. BARROSA
Acting Secretary to the Mayor

Approved:

NELSON S. LEGACION

ity/Mayor

# SUPPLEMENTAL PROCUREMENT RECORD 2nd Quarter, 2021

City, Province or Municipality: Naga City, Province of Camarines Sur

Plan Control No:					Planned Am	ount:				Page:			
Department / Office: Naga City H	lospital				Regular		Contingency	Tota			Submitted	: July 1	l, 2022
	CODE				TOTAL	DIST	RIBUTIO	N				_	
DESCRIPTION	UNIT COST	QTY	UNIT	COST	1 <sup>ST</sup> (	QUARTER	2	ND QUARTER	3 <sup>RD</sup> C	UARTER	4 <sup>TH</sup>	QUARTER	
<u> </u>						Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount
From													
			, <u></u> .				ļ						
					_								
										1			
То						-							
Aircon Case (A)		4,500.00	1	рс	4,500.00								
Glass dismantle & cutting & installation		500.00	1	рс	500.00								
Installation of Samson handle		500.00	1		500.00								
Installation of Samson handle		500.00	3	_	1,500.00								
					7000	_							
			-	<u> </u>		-							
Purpose:			-	1						<del>-  </del>			
										<del>-  </del>	<u> </u>		
	- · · ·		<del></del>		-		<del></del>			<del>-</del>	<del>                                     </del>		<del> </del>

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

JÓSÉPH S. SANCHEZ, MD, MHSA

Chief of Hospital II

Approved:

NELSON S. LEGACION

For the 2nd Quarter, CY 2022

Province, City or Municipality: Naga City

	ontrol i	Vo.: #					Planned Amou	nt			i i		Page:	1 of 1	
Depart	ment/	Office: NAGA CITY DANGEROUS DRUGS BO	DARD				Regular		Contingency		Total		Date Submit	ted:	6/22/2022
<b>(</b>				11-14							DISTRI	NOITUE	i		
Item No.		Description	Code	Unit :	Qty.	Unit	Total Cost	1:	st Quarter	<b>2</b> r	nd Quarter	3	rd Quarter	4	th Quarter
					<u> </u>		<u> </u>	Qty.	Amount	Qty.	Amount '	Qty.	Amount	Qty.	Amount
1	From	Travelling Expenses	5-02-01-010			<u> </u>	10,000.00			<u> </u>	, 		_	<u> </u>	
		Drugs & Medicine Expenses	5-02-03-070	[]			60,000.00								
		Medical, Dental & Lab Expenses	5-02-03-080				5,000.00								
		Other Dupplies & Material Expenses	5-02-03-990				20,000.00								
		Printing & Publication Exepenses	5-02-99-020				10,000.00								
		Donations	5-02-99-080				60,000.00			-					<u> </u>
	То	Training Expanses	5-02-02-010								164,177.00				
		BKD Planning Workshop									52,677.00				
		BKD General Assembly	<u>                                     </u>							<u> </u>	49,000.00				
		Yakap Bayan Program						<del></del>			62,500.00				
~-										-	<u> </u>			+	<del></del>
•									···						
			ļ	<b> </b>					<del></del>	ļ	······································			<del> </del>	
	<del></del>		<u> </u>			<b>-</b>					<u> </u>			+	
			<u> </u>				165,000.00			<del>                                     </del>	164,177.00	$\overline{}$		1	

This is to certify that the above procurement plan is in accordance with objectives of this office.

OSE B. IMPORTANTE

**Executive Director** 

Approved by:

ELSON S. LEGACION

City Mayor

8-July

#### **AMENDMENT FORM**

Department/Office: Public Safety Office

CGOH-1, Public Safety Office

DATE: July 8, 2022

							DISTRIBL	ITION			
Description	Unit Cost	Qty	Unit	1 <sup>st</sup>	Quarter	2 <sup>n</sup>	Quarter	T :	3 <sup>rd</sup> Quarter	4 <sup>th</sup> (	Quarter
				Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
FROM:											
RM-Machinery and Equipment (Communication Network)									_		
5-02-13-050-07											
<ul> <li>repair and maintenance of IT machinery and equip</li> </ul>									44,000		
					-	-		<del> </del>		<u> </u>	
				<del>  - · · · · · · · · · · · · · · · · · · </del>			-				<del>                                     </del>
TO:				<b> </b>		-			_		
OFFICE SUPPLIES EXPENSES				1				-	44,000		
(5-02-03-010)						<u> </u>					
<del></del>				1		<del> </del>	<del></del>	<del>  -                                   </del>			+

This is to certify that the above procurement program is in accordance with objectives of the LGU.pr

Submitted by:

Approved by:

NELSON S. LEGACION

For the 3rd Quarter, CY 2022

Province, City or Municipality: Naga City				<u>-</u>	<u> </u>								
Plan Control No.: #					Planned Amo	unt					Page:	1 of 1	
Department/Office: City Planning and Developmer	nt Office				Regular		Contingency		Total		Date Submitted	. 7	6 2022
									DIS	TRIBU	rion		
Description	code	<b>Unit Cost</b>	Qty.	Unit	Total Cost	1	st Quarter	2r	d Quarter		3rd Quarter		4th Quarter
·						Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
From:													
Other Professional Services	5-02-11-990				250,000.00				<u> </u>	<u> </u>	250,000.00		
												<u> </u>	
							ļ						
										ļ		<sup> </sup>	
			<u> </u>				<u> </u>			<u> </u>		<u> </u>	
TO能够凝缩了多少。 / 自身性 21. / 在一个										ļ			
Other Maintenance & Operating Expenses	5-02-99-990				250,000.00						250,000.00		
		-											
	1												
	† †							<u> </u>					
		-											
									-				_
Peason: Reversion of Funds				-	<u> </u>								

This is to certify that the above procurement plan is in accordance with objectives of this office .

WILFREDO BY PRILLES, JR.

CGDH II-City Planning and Development Coordinator

Approved by:

NELSON S. LEGACION

City Mayor

CITY PROCUREMENT OFFICE

RECEIVED:

7/8/22

For the \_\_\_\_ Quarter CY 2017

Plan Control No.:							Planned A	mount				Page	1 of 1
Department/ Office:		CITY AGRIC	ULTU	RE OFFIC	E		Regular	Contir	ngency	Total		Date	7/8/22
Description	Code	Unit Cost	Qty	Unit	Total		Quarter	+	d Quarter	_	l Quarter	<del></del>	Quarter
			<u> </u>		cost	Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount
FROM:								<u>                                     </u>		<u></u>		1	
poly bags (small)	5-02-03-990	5.00	1,910	pcs	9,550.00								
Packing material (plastic)	5-02-03-990	300.00	20	pack	6,000.00								
					15,550.00								
									-	1	-		
TO:		<del>                                     </del>											
1 unit refrigerator	5-02-03-990				15,000.00				-				
	-							-		├			
	<del> </del>	<b></b>						<del>   </del>		<del>                                     </del>	<del></del>		
_				l '						1		ł	

This is to certify that the above procurment program is in accordance with objectives of the LGU.

FRANCISCO M. MENDOZA Acting City Agriculturist

Approved by:

Can sh		A	~	2022
For th	ı	 Quarter	,61	2022

Plan Control No.					Planned Account					Page:			
Department/Office: CEO					Regular		Contingency	Total	_	Date Subm	tted:		
	Code	Unit Cost	Qty.	Unit	Total Cost		Quarter	2nd	Quarter		Quarter	2nd	Quarter
Description				}		Qty	Amount	Qty	Amount	Qty	Amount	Qty	Amount
FROM:	5-02-13-040-01												
Rep. & MaintBuilding and Other Structures	(Building)				94,655.00								
	<u> </u>												
							-					ļ	
	-	<b></b> -						+		<del> </del>	ļ		
_	_	-			-			+			<del> </del>		
	<del> </del>							<del></del>				<del></del>	
	<del> </del>				1			+				<del> </del>	
то:	5-02-13-040-01							<del>                                     </del>				<u> </u>	
INSTALLATION OF SLIDING DOOR, FIXED WIN	NDOW				94,655.00			1				<del></del>	
AND ALUMINUM WINDOW AT ITO													
												,	-
	<del></del>							<u> </u>					<u> </u>
	<del> </del>				<del>                                     </del>					ļ. <u></u> -			<u> </u>
	<del>                                     </del>	-			<del> </del>	-		+		<del> </del>	ļ.~		<del></del>
Posson:	<del>                                     </del>				<del>[</del>					<del> </del> -	<del> </del> -		
Reason:	<u> </u>	1						J	Į	<u></u>	<u></u>		

This is to certify that the above procurement plan is in accordance with objectives of this office.

Approved by:

For the 3RD Quarter, CY 2022

Province, City or Municipality: Naga City

an Control No.: #					Planned Amou	ınt			<b>y-</b>		Page:	1 of 1	
partment/Office: Office For Senior/Citizens	Affairs (OSCA)				Regular		Contingency		Total		Date Submitted:		
									DIST	RIBUTIO	ON		
Description	code	Unit(Cost	Qty.	Unit	Total Cost		1st Quarter		2nd Quarter		3rd Quarter	4	th Quarter
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DONATIONS	5÷02-99-080					1	20,000.00						
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OFFICE SUPPLIES EXPENSES	5+02-03-010	<del>                                     </del>	-		-			<u> </u>			· · · · · · · · · · · · · · · · · · ·		
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RIBBON (CMYKO) with PVC ID CARD		ļ -						<del>                                     </del>		1	20,000.00		
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This is to certify that the above procurement plan is in accordance with objectives of this office .

Approved by:

Program Director - OSCA



For the 2nd Quarter, CY 2022

Province, City or Municipalit
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Plan Control No.:					Planned Amoun	t	4 1				Page:	
Department/Office: CSWDO	<del></del>	,			Regular		Contingency		Total		Date Sub	
						T	<del></del>		DISTRIBUT	<b>FION</b>		
Description	Code	Unit Cost	Qty.	Unit	Total Cost	19	st Quarter	2nd	d Quarter	31	d Quarter	
						Qty.	Amount	Qty.	Amount	Qty.	Amount	
From:												
Food Supplies Expenses	5-02-03-050	63,000.00		<del></del>				5	63,000.00			
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Rep & maint-Furniture & Fixture	5-02-13-070-01	63,000.00						5	63,000.00			
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Reason: To be used by EDUCARE/SEED Montessori.

This is to certify that the above procurement program is in accordance with objectives of the LGU.

Prepared by:

Day Care Worker II

Requested by:

ELSIE MARIA M. ROMANO ECCDDO, Division Head NELSON S. LEGACION

For the SECOND Quarter, CY 2022

Provinc	ce, City	or or	Muni	icipality	<i>!</i> :

Plan Control No.:					Planned Amo	ount					Page:	1 of 1	
Department/Office: HSDO					Regular		Contingency		Total		Date Submitted:	6	3.23,2022
	1							-	DISTRIE	IBUTION			
Description	code	Unit Cost	Qty.	Unit	Total Cost	19	st Quarter		2nd Quarter		3rd Quarter	4t'	h Quarter
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							10,800.00	<u> </u>	<del>/</del>	<del></del>			

This is to certify that the above procurement plan is in accordance with objectives of this office .

ROLANDO S. CAMPILLOS

HSDO Dept. Head

Approved by:

NELSON S. LEGACION

City\Mayor

For the 2ND Quarter, CY 2022

Province, City or Municipality: Naga City

an Control No.: #					Planned Amou	nt					Page:	1 of 1	
epartment/Office: Office For Senior Citizens Af	ffairs (OSCA)				Regular		Contingency		Total		Date Submitt	te	
<del></del>						DISTRIBUTION							
Description	code	Unit Cost	Qty.	Unit	Total Cost		1st Quarter	I	2nd Quarter	3r	d Quarter	. 4	th Quarter
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MACHINERY & EQUIPMENT - I.T. EQUIPMENT	1-07-05-030	10,000.00	1	UNIT	10,000.00			1	10,000.00				
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MACHINERY & EQUIPMENT - OFFICE EQUIPMENT	1-05-07-020	<del> </del> -					ļ <del> </del>	<del> </del>	<u>-</u>			<del>                                     </del>	
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(INCLUSION TO PPMP)													
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This is to certify that the above procurement plan is in accordance with objectives of this office .

JAIME R. REBLANDO

Program Director - OSCA

-Approved by

NELSON S. LEGACION

CITY MAYOR

For the 3rd Quarter Calendar Year 2022

**AMMENDMENT FORM** 

DATE: 1-Jul-22

							DIST	RIBUTIO	N		
Description	Unit Cost	Qty.	Unit	1st	Quarter	2nd Quarter		3rd	Quarter	4th	Quarter
				Qty.	Amount	Qty.	Amount	Qty.	Amount	Qty.	Amount
ROM: Rep. & Maint-Infrastracture Assets (Sewer System)											
AC # 5-02-13-030-028	50,000.00								50,000.00		
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TOTAL AMOUNT	50,000.00						-		50,000.00		
O: OTHER SUPPLIES & MATERIALS EXPENSES	50,000.00			†					50,000.00		
(AC# 5-02-03-990)											
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TOTAL AMOUNT									50,000.00		

This is to certify that the above procurement program is in accordance with objectives of the LGU.

ROBERTO G. ACABADO Y

City Gov't. pepartment Head I

Approved by:

**NELSON S. LEGACION** 

For the 2nd Quarter, CY 2022

Province, City or Municipality:

Plan Control No.:					Planned Amount	t					Page:				
Department/Office: CSWDO					Regular		Contingency		Total		Date Subm				
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Description	Code	Unit Cost	Qty.	Unit	Total Cost	1st Quarter		2n	nd Quarter	31	rd Quarter	4th	h Q		
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Food Supplies Expenses	5-02-03-050	229,145.00	<u> </u>		<del>                                     </del>	-	-	17	229,145.00	+	<del></del>	<del> </del>	-		
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Rep & maint-Furniture & Fixture Expenses	5-02-13-070-01	229,145.00						17	229,145.00				$\frac{1}{2}$		
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Reason: To be used by EDUCARE/SEED Montessori.

This is to certify that the above procurement program is in accordance with objectives of the LGU.

Prepared by:

Day Care Worker II

Requested by:

ELSIE MARIA M. ROMANO ECCDDO, Division Head LELSON S. LEGACION