

GUIDE ON HOW TO FILL OUT THE ANNUAL PROCUREMENT PLAN – COMMON-USE SUPPLIES AND EQUIPMENT (APP-CSE)

Agency Information

- Indicate full name of the Department/Bureau/Office. Please do not abbreviate.
- Indicate the Region where the Department/Bureau/Office is located.
- Indicate the complete address of the Department/Bureau/Office.
- Agency Account Code is provided by PS-DBM. This is needed prior to an agency's registration in the Virtual Store.
- Organization Type refers to different agency classifications, e.g. National Government Agency (NGA), Local Government Agency (LGU), Government Owned and/or Controlled Corporation (GOCC), Bureau, etc.
- Indicate the contact details of the Contact Person or authorized representative of the agency. Please ensure that the email address and contact numbers provided are up to date.

PART I: Available at PS-DBM (Main Warehouse and Depots)

- Indicate the monthly requirement per item.
- The unit price is indicated under the Price Catalogue column.

PART II: Other items not available at PS-DBM but are regularly purchased from other sources

- Indicate the Item and its specifications. Provide the UNSPSC if available.
- Indicate the unit of measure for the item
- Indicate the unit price of the item under the Price Catalogue column. Please provide the updated price based on agency's latest purchase
- Additional rows for other items may be inserted if necessary.

A. Total

- This shows the total amount for Part I and Part II.

B. Additional Provision for Inflation

- This is the ten percent (10%) of the total amount for Part I and Part II.

C. Additional Provision for Transport and Freight Cost

- Indicate the additional transport and freight cost if applicable.

D. Grand Total

- This shows the sum of A, B, and C.

E. Approved Budget by the Agency Head

- This should be indicated in figures and in words.

Others

- Ensure that the APP-CSE form has been reviewed and accomplished properly.
- The complete name and signature of the Property/Supply Officer, Accountant/Budget Officer, and Head of Agency/Office should be indicated on the space provided.
- Indicate the date when the APP-CSE form was finalized for signature and approval of the concerned personnel.