

Company Name  
Address

THE CHIEF OF PHILIPPINE NATIONAL POLICE  
CAMP CRAME, QUEZON CITY  
THRU: Chief, Firearms and Explosives Division

Sir:  
Submitted is the report of explosives/explosive ingredients/controlled chemicals transactions for the month of \_\_\_\_\_

Acquisitions	Name of Persons/Company	Address	Authority PPE/PI No.	Explosives/Explosive Ingredients/Controlled Chemicals					
				Chem Name	Chem Name	Chem Name	Chem Name	Chem Name	Chem Name
				Qty Approved Lic	Qty Approved Lic	Qty Approved Lic	Qty Approved Lic	Qty Approved Lic	Qty Approved Lic
On Hand									
Purchased/Import									
<b>Total</b>									
Dispositions	Name of Persons/Company	Address	Authority PPE/PI No.						
Sold/Used									
<b>Total</b>									
<b>Balance</b>									

**Note: Acquisitions, procurements, purchases, sales, importations/exportations, unloading, transfer/movement and/or disposition must be supported by appropriate documents, such as delivery receipts, purchase orders and issued permits.**

kind of license:

License No.:

TO WHOM IT MAY CONCERN:

I CERTIFY that the quantities of explosives/explosive ingredients and/or controlled chemicals reflected on this report have been validated to be accurate.

Purchasing Officer

Logistics Officer

Regulatory Officer

## SUMMARY CONSUMPTION OF EXPLOSIVES INGREDIENTS FOR TWELVE (12) MONTHS

\_\_\_\_\_

Company Name

\_\_\_\_\_

Address

Month / Year	EXPLOSIVES KIND												
January													
February													
March													
April													
May													
June													
July													
August													
September													
October													
November													
December													
Total													

License No. \_\_\_\_\_

\_\_\_\_\_

Name and Position

Warehouseman \_\_\_\_\_

Noted by: \_\_\_\_\_

Explosives PNCO \_\_\_\_\_

\_\_\_\_\_

Provincial Director