Std. Form Title:Purchase Order

## **PURCHASE ORDER**

AUG 13 2025

Supplier: FORTUNE LIFE INSURANCE COMPANY, INC.

## Province of Davao de Oro Agency/Procuring Entity

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25060948

PO Number:

Address: Legaspe Village, Makati City E-mail Address:		Date: 08/04/25 Mode of Procurement	SVP
Tel. No.: TIN:		I recure ment	-3511
Gentlemen:			
Please furnish this office the following artic	les subject to the terms and conditions contained herein:		
Place of Delivery:	Delivery Term:		
Date of Delivery: 10 DAYS	Payment Term:		
No. Stock No. Unit of Issue Quantity	Description	Unit Cost	Amount
1 40177N lot/s 120.00	Group Accident Insurance	1,000.00	120,000.00
	Illustration Benefits: A. Accident Death and Dismemberment100,000.00 B. Burial Assistance Benefit 8,800.00 C. Hospital Income Plan Accident only 1000 per day D. Life/ Natural Death88,000.00 E. Accidental Medical Reimbursement 10,000.00 F. Insurance Coverage for group 120 personel to be insured. G. Accident Insurance coverage include both work and not work related activities of the insured personnel.  TERMS AND CONDITION: Issuance of Insurance Policy upon approve Notice of Award.  FOR USE OF PLGU RESPONDER  THE AWARD IS BASED ON ABSTRACT NO. 2506118 UNDER REQUEST FOR QUOTATION NO.05-25-0739 OPENED ON June 24, 2025  Delivery Place: Provincial Disaster Risk Reduction Management Office Davao de Oro	DATE 8	T DAVAG DE ORG
Total Amount in Words: One Hundred Twenty Thousand Pesos On	ly		120,000.00
In case of failure to make the full de every day of delay shall be imposed  Conform  Signature over printer  Date  GENERAL  OBR No.: 0749-08-20-100  Responsibility Center:  Amount: 120,000.00	Very truly	RAUL G. MABANG Governor Authorized Official	ne (1) percent for
Aprroved per Sanggunian Resolutio			