

Consent
HS 8/15
OB 8/22



Request for Change Order

Procurement Services Division

Attach copies of all prior Change Orders

Date: Jul 27, 2023

MinuteTraq (IQM2) ID #: 23-2581

Purchase Order #: 5758-0001 SERV	Original Purchase Order Date: Apr 13, 2022	Change Order #: 10	Department: DuPage Care Center
Vendor Name: Novastaff Healthcare Services		Vendor #: 37419	Dept Contact: Christine Kliebhan
Background and/or Reason for Change Order Request:	Decrease line 5, 1200-2050-53090 (FY23) in the amount of \$17,556.50 Decrease line 6, 1100-1215-53090-Covid-19 (FY23) in the amount of \$42,577.50 - contract expired		
IN ACCORDANCE WITH 720 ILCS 5/33E-9			

- (A) Were not reasonably foreseeable at the time the contract was signed.
- (B) The change is germane to the original contract as signed.
- (C) Is in the best interest for the County of DuPage and authorized by law.

INCREASE/DECREASE		
A	Starting contract value	\$914,000.00
B	Net \$ change for previous Change Orders	\$50,000.00
C	Current contract amount (A + B)	\$964,000.00
D	Amount of this Change Order <input type="checkbox"/> Increase <input checked="" type="checkbox"/> Decrease	(\$60,134.00)
E	New contract amount (C + D)	\$903,866.00
F	Percent of current contract value this Change Order represents (D / C)	-6.24%
G	Cumulative percent of all Change Orders (B+D/A); (60% maximum on construction contracts)	-1.11%

DECISION MEMO NOT REQUIRED

- Cancel entire order
- Close Contract
- Contract Extension (29 days)
- Consent Only
- Change budget code from: _____ to: _____
- Increase/Decrease quantity from: _____ to: _____
- Price shows: _____ should be: _____
- Decrease remaining encumbrance and close contract
- Increase encumbrance and close contract
- Decrease encumbrance
- Increase encumbrance

DECISION MEMO REQUIRED

- Increase (greater than 29 days) contract expiration from: _____ to: _____
- Increase ≥ \$2,500.00, or ≥ 10%, of current contract amount Funding Source _____
- OTHER - explain below:

CDK _____	4208	Jul 27, 2023	Jul 27, 2023
Prepared By (Initials)	Phone Ext	Date	Recommended for Approval (Initials) Phone Ext Date
REVIEWED BY (Initials Only)			
Buyer _____	Date _____	<i>MCA</i> Procurement Officer	8/2/23 Date
Chief Financial Officer (Decision Memos Over \$25,000)	Date _____	Chairman's Office (Decision Memos Over \$25,000)	Date _____