

HS 6/4
FI + OB 6/11



Request for Change Order

Procurement Services Division

Attach copies of all prior Change Orders

Date: May 14, 2024

MinuteTraq (IQM2) ID #: HS-P-0088A-23

Purchase Order #: 6782-0001 SERV	Original Purchase Order Date: Nov 1, 2023	Change Order #: 1	Department: Community Services
Vendor Name: WellSky Corporation		Vendor #: 30141	Dept Contact: Julie Burdick
Background and/or Reason for Change Order Request:	Purchase of additional software and training not included in the contract. Add new line, \$2500, 5000-1765, 211IDPH24, 53806 Add new line, \$795.00, 5000-1470, ESG24HMIS23, 53610 Add new line, \$4,035, 5000-1480, IL0306L5T142215, 53610		
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	\$43,720.48
B	Net \$ change for previous Change Orders	\$0.00
C	Current contract amount (A + B)	\$43,720.48
D	Amount of this Change Order <input checked="" type="checkbox"/> Increase <input type="checkbox"/> Decrease	\$7,330.00
E	New contract amount (C + D)	\$51,050.48
F	Percent of current contract value this Change Order represents (D / C)	16.77%
G	Cumulative percent of all Change Orders (B+D/A); (60% maximum on construction contracts)	16.77%

DECISION MEMO NOT REQUIRED			
<input type="checkbox"/> Cancel entire order	<input type="checkbox"/> Close Contract	<input type="checkbox"/> Contract Extension (29 days)	<input type="checkbox"/> Consent Only
<input type="checkbox"/> Change budget code from: _____ to: _____		<input type="checkbox"/> Increase/Decrease quantity from: _____ to: _____	
<input type="checkbox"/> Price shows: _____ should be: _____			
<input type="checkbox"/> Decrease remaining encumbrance and close contract	<input type="checkbox"/> Increase encumbrance and close contract	<input type="checkbox"/> Decrease encumbrance	<input checked="" type="checkbox"/> Increase encumbrance

DECISION MEMO REQUIRED	
<input type="checkbox"/> Increase (greater than 29 days) contract expiration from: _____ to: _____	<input checked="" type="checkbox"/> Increase ≥ \$2,500.00, or ≥ 10%, of current contract amount <input type="checkbox"/> Funding Source <u>5000-1765, 5000-1470, 5000-1480</u>
<input type="checkbox"/> OTHER - explain below: <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>	

JB	6462	May 14, 2024	GSA	6444	May 14, 2024
Prepared By (Initials)	Phone Ext	Date	Recommended for Approval (Initials)	Phone Ext	Date
REVIEWED BY (Initials Only)					
Buyer		Date	Procurement Officer		Date
Chief Financial Officer (Decision Memos Over \$25,000)		Date	Chairman's Office (Decision Memos Over \$25,000)		Date