



Request for Change Order

Procurement Services Division

Attach copies of all prior Change Orders

Date: Mar 15, 2023

MinuteTraq (IQM2) ID #: 23-1257

Consent
HS 4/4
CB 4/11

Purchase Order #: 5093-0001 SERV	Original Purchase Order Date: Jan 25, 2021	Change Order #: 3	Department: DuPage Care Center
Vendor Name: Accounting Principals, Inc. dba Ajilon		Vendor #: 37171	Dept Contact: Anita Rajagopal
Background and/or Reason for Change Order Request:	This contract is to provide a Medicare/Medicaid/Insurance Biller for the DuPage Care Center, Financial Services, for the period January 25, 2021 through November 30, 2022, per quote 20-131-CARE. Decrease and close contract in the amount of \$139,999.00 - CONTRACT HAS EXPIRED NOTE: we were able to hire and retain staff, not needing to use agency services		
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	\$14,999.00
B	Net \$ change for previous Change Orders	\$125,000.00
C	Current contract amount (A + B)	\$139,999.00
D	Amount of this Change Order <input type="checkbox"/> Increase <input checked="" type="checkbox"/> Decrease	(\$139,999.00)
E	New contract amount (C + D)	\$0.00
F	Percent of current contract value this Change Order represents (D / C)	-100.00%
G	Cumulative percent of all Change Orders (B+D/A); (60% maximum on construction contracts)	-100.00%

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 \geq \$2,500.00, or \geq 10%, of current contract amount ☐ Funding Source _____
- ☐ OTHER - explain below:

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cdk	4208	Mar 15, 2023		Mar 15, 2023
Prepared By (Initials)	Phone Ext	Date	Recommended for Approval (Initials)	Phone Ext Date
REVIEWED BY (Initials Only)				
Buyer	Date	Procurement Officer	3/21/23 Date	
Chief Financial Officer (Decision Memos Over \$25,000)	Date	Chairman's Office (Decision Memos Over \$25,000)	Date	