consent
HS 6/16
CB 6/23

REQUEST FOR CHANGE ORDER FORM

Procurement Services Division

Revised 10-01-2025

Date: Jun 8, 2026

File ID #: 26-1739

Purchase Order #: 7938-0001 SERV	**Original Purchase Order Date:** Oct 8, 2025	**Change Order #:** 4	**Department:** DuPage Care Center
Vendor Name: United Staffing Network, Inc.		**Vendor #:** 37483	**Dept. Contact:** Jonathan Klimek
Action Requested and Reason for Change Order Request:	Extend contract through November 30, 2026, to allow for intermittent pharmacy staffing shortages that could arise. No change to contract total amount.		

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 Order	$25,000.00
C	Current Contract Amount (A + B)	$39,999.00
D	Amount of this Change Order ☐ Increase ☐ Decrease	
E	New Contract Amount (C + D)	$39,999.00
F	Cumulative Change Order Amount (B + D)	$25,000.00
G	Cumulative Percent of all Change Orders (B+D/A); *(60% maximum on construction contracts)*	166.68%

DECISION MEMO NOT REQUIRED - *Check Applicable Box(es)*

☐ Cancel Entire Order ☐ Close Contract ☐ Contract Extension (≤59 Days) ☐ Update Budget Code

☐ Change Budget Code From: _____ to: _____

☐ Increase/Decrease Quantity From: _____ to: _____

☐ Price Shows: _____ should be: _____ ☐ Move Funds Between Lines

☐ Decrease Remaining Encumbrance and Close Contract ☐ Increase Encumbrance and Close Contract ☐ Decrease Encumbrance ☐ Increase Encumbrance

DECISION MEMO REQUIRED - *Check Applicable Box(es) and Fill In All Answers Below*

☒ Contract Extension Greater Than 59 Days From Jul 29, 2026 to: Nov 30, 2026 ☐ Cancel Contract

☐ Cumulative Increase Greater Than $10,000 (Row 'F' Above) ☐ Other - Explain In Summary Explanation Box Below

Summary Explanation - Provide a summary of the action. Explain why it is necessary and what is to be accomplished.
extend contract through November 30, 2026.

Original Source Selection/Vetting Information - Describe method used to select source; for instance, bid, RFP, sole source, etc.
quote

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Recommendations/Alternatives - Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request.
1) Extend contract through 11/30/26 to allow for intermittent pharmacy staff shortages through the extension.
2) Do not extend contract through 11/30/26 to allow for intermittent pharmacy staff shortages through the extension, however without a part time pharmacist, the current staff would be unable to fill prescriptions, prepare I. V.'s and would be unable to meet the needs for in patient and out patient pharmacy needs in a timely manner.

Fiscal Impact/Cost Summary - Include projected cost for each fiscal year, approved budget amount and account number

monies are still available on contract line

APPROVALS - *Initials Only*

CDK	4208	Jun 8, 2026	CDK	4208	Jun 8, 2026
Prepared By	Phone Ext.	Date	Recommended for Approval	Phone Ext.	Date
	6/10/2026				
Reviewed by Procurement Officer	Date		Completed by Buyer		Date

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