



# Request for Change Order

## Procurement Services Division

Attach copies of all prior Change Orders

Consent  
HS 1/20  
CB 1/27

Date: Dec 23, 2025

MinuteTraq (IQM2) ID #: 26-0217

<b>Purchase Order #:</b> 5045-0001 SERV	<b>Original Purchase Order Date:</b> Nov 25, 2020	<b>Change Order #:</b> 10	<b>Department:</b> DuPage Care Center
<b>Vendor Name:</b> PointClickCare Technologies, Inc.		<b>Vendor #:</b> 36259	<b>Dept Contact:</b> SHAUNA BERMAN
<b>Background and/or Reason for Change Order Request:</b>	ELECTRONIC HEALTH RECORD (EHR) SOFTWARE SYSTEM INTEGRATION FOR THE DUPAGE CARE CENTER, FOR THE PERIOD OF 11/25/20 THROUGH 11/30/25. #1 Decrease and close line 1, 1200-2000-53090 in the amount of \$29,029.39 #2 Decrease and close line 2, 1200-2000-53610 in the amount of \$4,186.50 #3 Decrease and close line 3, 1200-2000-53020 in the amount of \$3,569.35 #4 Decrease and close line 4, 1200-2000-53807 in the amount of \$2,000.00 #5 Decrease and close line 5, 1200-2085-53807 in the amount of \$3,140.00 #6 Decrease and close line 6, 1200-2085-53807 in the amount of \$4,063.20 #7 Decrease and close line 7, 1200-2085-53807 in the amount of \$4,456.41 - CONTRACT HAS EXPIRED		
<b>IN ACCORDANCE WITH 720 ILCS 5/33E-9</b>			

☒ (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	\$1,285,752.30
B	Net \$ change for previous Change Orders	\$82,506.05
C	Current contract amount (A + B)	\$1,368,258.35
D	Amount of this Change Order <input type="checkbox"/> Increase <input checked="" type="checkbox"/> Decrease	(\$50,444.85)
E	New contract amount (C + D)	\$1,317,813.50
F	Percent of current contract value this Change Order represents (D / C)	-3.69%
G	Cumulative percent of all Change Orders (B+D/A); (60% maximum on construction contracts)	2.49%

### 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:

cdk	4208	Dec 23, 2025	CDK	4208	Dec 23, 2025
Prepared By (Initials)	Phone Ext	Date	Recommended for Approval (Initials)	Phone Ext	Date
<b>REVIEWED BY (Initials Only)</b>					
Buyer		Date	Procurement Officer		Date