



REQUEST FOR CHANGE ORDER FORM

Procurement Services Division

Revised 05-30-2025

Consent
FI+CB 4/14

Date: Apr 3, 2026

File ID #: _____

Purchase Order #: 7193	Original Purchase Order Date: Aug 14, 2024	Change Order #: 2	Department: Finance
Vendor Name: Printing Supplies USA LLC		Vendor #: 38035	Dept. Contact: Jim Morrissy
Action Requested and Reason for Change: Decrease all lines & Close PO Order Request:			

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	\$18,000.00
B	Net \$ Change for Previous Change Order	\$1,500.00
C	Current Contract Amount (A + B)	\$19,500.00
D	Amount of this Change Order <input type="checkbox"/> Increase <input checked="" type="checkbox"/> Decrease	(\$17,852.00)
E	New Contract Amount (C + D)	\$1,648.00
F	Cumulative Change Order Amount (B + D)	(\$16,352.00)
G	Cumulative Percent of all Change Orders (B+D/A); (60% maximum on construction contracts)	-90.84%

DECISION MEMO NOT REQUIRED - Check Applicable Box(es)

- Cancel Entire Order
- Close Contract
- Contract Extension (59 Days)
- Consent Only
- 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

- Increase Contract Expiration Greater Than 59 Days From _____ to: _____
- 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.

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

Recommendations/Alternatives - Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request.

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

APPROVALS - Initials Only

JM	6116	Apr 3, 2026	KH	6193	Apr 3, 2026
Prepared By	Phone Ext.	Date	Recommended for Approval	Phone Ext.	Date
		4/3/2026			
Reviewed by Procurement Officer	Date		Completed by Buyer	Date	