

Consent
HS 8/15
CB 8/22



Request for Change Order

Procurement Services Division

Attach copies of all prior Change Orders

Date: Jul 26, 2023

MinuteTraq (IQM2) ID #: 23-2578

Purchase Order #: 5271-0001 ERV	Original Purchase Order Date: May 14, 2021	Change Order #: 4	Department: DuPage Care Center
Vendor Name: Medsearch Staffing Services dba United Pharmacy Staffing	Vendor #: 37582		Dept Contact: Anita Rajagopal
Background and/or Reason for Change Order Request:	Contract to provide supplemental Staffing for the Pharmacy Department at the DuPage Care Center, for the period May 14, 2021 through February 28, 2023. Decrease and close line 1, 1200-2085-53090, in the amount of \$26,385.50 - contract expired		
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 \$50,000.00
B	Net \$ change for previous Change Orders \$75,000.00
C	Current contract amount (A + B) \$125,000.00
D	Amount of this Change Order <input type="checkbox"/> Increase <input checked="" type="checkbox"/> Decrease (\$26,385.50)
E	New contract amount (C + D) \$98,614.50
F	Percent of current contract value this Change Order represents (D / C) -21.11%
G	Cumulative percent of all Change Orders (B+D/A); (60% maximum on construction contracts) 97.23%
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	
<input type="checkbox"/> Increase (greater than 29 days) contract expiration from: _____ to: _____	
<input type="checkbox"/> Increase ≥ \$2,500.00, or ≥ 10%, of current contract amount <input type="checkbox"/> Funding Source _____	
<input type="checkbox"/> OTHER - explain below:	

cdk	4208	Jul 26, 2023	Jul 26, 2023
Prepared By (Initials)	Phone Ext	Date	Recommended for Approval (Initials) Phone Ext Date
REVIEWED BY (Initials Only)			
Buyer	Date	Procurement Officer	Date <u>8/2/23</u>
Chief Financial Officer (Decision Memos Over \$25,000)	Date	Chairman's Office (Decision Memos Over \$25,000)	Date