



Request for Change Order

Procurement Services Division

Attach copies of all prior Change Orders

Date: Nov 1, 2024

MinuteTraq (IQM2) ID #: _____

Purchase Order #: 920110/4330-1	Original Purchase Order Date: Dec 1, 2019	Change Order #: 4	Department: ETSB
Vendor Name: Priority Dispatch		Vendor #: 10486	Dept Contact: Eve Kraus
Background and/or Reason for Change Order Request:	Request for Change Order #4 to Priority Dispatch to incorporate revised contract pages into PO 920110/4330-1. The changes will reconcile the quantity of individual training courses for FY25-26, edistribute funds allocated to the Quality Performance Review (QPR) program and place them under a One Voucher Plan and add optional goods/services. This is a non-monetary change order to the contract.		
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	\$2,456,480.00
B	Net \$ change for previous Change Orders	\$0.00
C	Current contract amount (A + B)	\$2,456,480.00
D	Amount of this Change Order <input type="checkbox"/> Increase <input type="checkbox"/> Decrease	\$0.00
E	New contract amount (C + D)	\$2,456,480.00
F	Percent of current contract value this Change Order represents (D / C)	0.00%
G	Cumulative percent of all Change Orders (B+D/A); (60% maximum on construction contracts)	0.00%

DECISION MEMO NOT REQUIRED			
<input type="checkbox"/> Cancel entire order	<input type="checkbox"/> Close Contract	<input type="checkbox"/> Contract Extension (29 days)	<input type="checkbox"/> Consent Only
Change budget code from: _____		to: _____	
Increase/Decrease quantity from: _____		to: _____	
Price shows: _____		should be: _____	
<input type="checkbox"/> Decrease remaining encumbrance and close contract	<input type="checkbox"/> Increase encumbrance and close contract	<input type="checkbox"/> Decrease encumbrance	<input type="checkbox"/> Increase encumbrance

DECISION MEMO REQUIRED	
<input type="checkbox"/> Increase (greater than 29 days) contract expiration from: _____	to: _____
<input type="checkbox"/> Increase \geq \$2,500.00, or \geq 10%, of current contract amount	<input type="checkbox"/> Funding Source _____
<input checked="" type="checkbox"/> OTHER - explain below:	
incorporate revised contract pages.	

ek	630-550-7743	Nov 1, 2024	LMZ	630-878-2509	Nov 1, 2024
Prepared By (Initials)	Phone Ext	Date	Recommended for Approval (Initials)	Phone Ext	Date
REVIEWED BY (Initials Only)					
Buyer	Date	Procurement Officer	Date		
Chief Financial Officer (Decision Memos Over \$25,000)	Date	Chairman's Office (Decision Memos Over \$25,000)	Date		

[Signature] 11-5-2024