

TEC 6/18
 FI + CB 6/25



Request for Change Order
Procurement Services Division

Attach copies of all prior Change Orders

Date: Jun 3, 2024

MinuteTraq (IQM2) ID #: _____

Purchase Order #: 6956-1-SERV	Original Purchase Order Date: Mar 12, 2024	Change Order #: 2	Department: IT
Vendor Name: Toshiba	Vendor #: 14171		Dept Contact: Shanita Thompson
Background and/or Reason for Change Order Request:	1. Add new line for ETSB Acct 4000-5820-54100: New Equipment - \$63,928.27 2. Add new line for ETSB Acct 4000-5820-53800: Printing Cost - \$30,571.73 3. Add to Line 29: \$100,107.00 (Sheriff) 4. Add to Line 30: \$67,071.69 (Sheriff)		
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	\$1,500,000.00
B	Net \$ change for previous Change Orders	\$0.00
C	Current contract amount (A + B)	\$1,500,000.00
D	Amount of this Change Order <input checked="" type="checkbox"/> Increase <input type="checkbox"/> Decrease	\$261,678.69
E	New contract amount (C + D)	\$1,761,678.69
F	Percent of current contract value this Change Order represents (D / C)	17.45%
G	Cumulative percent of all Change Orders (B+D/A); (60% maximum on construction contracts)	17.45%

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 checked="" type="checkbox"/> 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: <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>	

SJJ	5037	Jun 3, 2024	<u>RAB</u> RAB	<u>ALM</u> ALM	5005	06/03/2024
Prepared By (Initials)	Phone Ext	Date	Recommended for Approval (Initials)	Phone Ext	Date	
REVIEWED BY (Initials Only)						
Buyer	Date	<u>[Signature]</u>		Procurement Officer	6/4/2024	
Chief Financial Officer (Decision Memos Over \$25,000)	Date	Chairman's Office (Decision Memos Over \$25,000)		Date		