

Consent
HS 8/15
OB 8/22



Request for Change Order

Procurement Services Division

Attach copies of all prior Change Orders

Date: Jul 26, 2023

MinuteTraq (IQM2) ID #: 23-2577

Purchase Order #: 5649-0001 SERV	Original Purchase Order Date: Jan 26, 2022	Change Order #: 4	Department: DuPage Care Center
Vendor Name: KCI USA, Inc.	Vendor #: 28606	Dept Contact: Nursing	

Background and/or Reason for Change Order Request:
 This contract is for the rental of Wound Vac Therapy & Medical supplies for wound & skin care, for the DuPage Care Center, for the period 01/26/22 through 01/25/23.
 Decrease line 1, 1200-2050-53410, in the amount of \$562.72
 Decrease line 2, 1200-2050-52320, in the amount of \$11.23
 Decrease line 5, 1200-2050-53410, in the amount of \$31,604.32
 Decrease line 6, 1200-2050-52320, in the amount of \$500.00 - 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	\$46,000.00
B	Net \$ change for previous Change Orders	
C	Current contract amount (A + B)	\$46,000.00
D	Amount of this Change Order <input type="checkbox"/> Increase <input checked="" type="checkbox"/> Decrease	(\$32,678.27)
E	New contract amount (C + D)	\$13,321.73
F	Percent of current contract value this Change Order represents (D / C)	-71.04%
G	Cumulative percent of all Change Orders (B+D/A); (60% maximum on construction contracts)	-71.04%

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 ≥ \$2,500.00, or ≥ 10%, of current contract amount Funding Source _____
- OTHER - explain below:

cdk	4208	Jul 26, 2023	4208	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
Chief Financial Officer (Decision Memos Over \$25,000)	Date	Chairman's Office (Decision Memos Over \$25,000)	Date

8/2/23