



Request for Change Order

Procurement Services Division

Attach copies of all prior Change Orders

HS 3/19
FI + CB 3/26

Date: Feb 29, 2024

MinuteTraq (IQM2) ID #: 24-0917

Purchase Order #: 6363-0001 SERV	Original Purchase Order Date: Apr 13, 2023	Change Order #: 5	Department: DuPage Care Center
Vendor Name: Maxim Healthcare Services, Inc.		Vendor #: 13962	Dept Contact: Nursing

Background and/or Reason for Change Order Request:	Supplemental Nursing Staffing Services for the period 04/13/23 through 04/12/24 #1 Decrease line 2, (FY23) 1100-1215-53090-Covid-19_DCC in the amount of \$6,285.00 & move to line 3, 1200-2050-53090 (FY24) #2 Decrease line 4, (FY24) 1100-1215-53090-Covid-19_DCC in the amount of \$10,000.00 & move to line 3, 1200-2050-53090 (FY24) #3 Additionally Increase line 3, (FY24) 1200-2050-53090 in the amount of \$28,715.00 NOTE: monies coming from Novastaff Healthcare contract being decreased, as contract does not provide the amount of staff then Maxim currently provides.
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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	\$120,000.00
B	Net \$ change for previous Change Orders	\$95,310.00
C	Current contract amount (A + B)	\$215,310.00
D	Amount of this Change Order <input checked="" type="checkbox"/> Increase <input type="checkbox"/> Decrease	\$28,715.00
E	New contract amount (C + D)	\$244,025.00
F	Percent of current contract value this Change Order represents (D / C)	13.34%
G	Cumulative percent of all Change Orders (B+D/A); (60% maximum on construction contracts)	103.35%

DECISION MEMO NOT REQUIRED

- ☐ Cancel entire order ☐ Close Contract ☐ Contract Extension (29 days) ☐ Consent Only
☒ Change budget code from: line 2 and 4 to: line 3 (FY24)
☐ 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	Feb 29, 2024	JC	4208	Feb 29, 2024
Prepared By (Initials)	Phone Ext	Date	Recommended for Approval (Initials)	Phone Ext	Date
REVIEWED BY (Initials Only)					
Buyer		Date	Procurement Officer		Date