

# REQUEST FOR CHANGE ORDER FORM

Procurement Services Division

Revised 10-01-2025

HS 7/7  
FI+CB 7/14

Date: Jun 9, 2026

File ID #:

<b>Purchase Order #:</b> 6593	<b>Original Purchase Order Date:</b> 9/5/2023	<b>Change Order #:</b> 10	<b>Department:</b> Community Services
<b>Vendor Name:</b> LAVI INDUSTRIES INC.		<b>Vendor #:</b> 42601	<b>Dept. Contact:</b> Gina Strafford-Ahmed
<b>Action Requested and Reason for Change Order Request:</b> To increase funding to the PO amount for scheduling system. Increase PO line 19 Description 1: SMS OUT MESSAGES 2: 5000 1495 53807 26-254028 by \$4,015.00. Increase in contract total.			

### 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		\$28,423.13
B	Net \$ Change for Previous Change Order		\$320.00
C	Current Contract Amount (A + B)		\$28,743.13
D	Amount of this Change Order	<input checked="" type="checkbox"/> Increase <input type="checkbox"/> Decrease	\$4,015.00
E	New Contract Amount (C + D)		\$32,758.13
F	Cumulative Change Order Amount (B + D)		\$4,335.00
G	Cumulative Percent of all Change Orders (B+D/A); (60% maximum on construction contracts)		15.25%

### DECISION MEMO NOT REQUIRED - Check Applicable Box(es)

- Cancel Entire Order
- Close Contract
- Contract Extension (≤59 Days)
- Update Budget Code
- Change Budget Code From: \_\_\_\_\_ to: \_\_\_\_\_
- Increase/Decrease Quantity From: \_\_\_\_\_ to: \_\_\_\_\_
- Price Shows: \_\_\_\_\_ should be: \_\_\_\_\_
- Move Funds Between Lines
- Decrease Remaining Encumbrance and Close Contract
- Increase Encumbrance and Close Contract
- Decrease Encumbrance
- Increase Encumbrance

### DECISION MEMO REQUIRED - Check Applicable Box(es) and Fill In All Answers Below

- Contract Extension Greater Than 59 Days From \_\_\_\_\_ to: \_\_\_\_\_
- Cancel Contract
- Cumulative Increase Greater Than \$10,000 (Row 'F' Above)
- Other - Explain In Summary Explanation Box Below

**Summary Explanation** - Provide a summary of the action. Explain why it is necessary and what is to be accomplished.  
Need to increase encumbrance due to unforeseen text messaging costs that were unable to be projected at the beginning of the agreement of \$4,335.


**Original Source Selection/Vetting Information** - Describe method used to select source; for instance, bid, RFP, sole source, etc.

Cooperative Agreement GSA Contract #47QSM22D08P4

**Recommendations/Alternatives** - Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request.  
1. Increase encumbrance by \$4335 to cover text messaging through the end of our fiscal year and we are able to maintain our grant deliverables for appointment setting and monitoring.  
2. Do no fund and have no access to appointment setting and reminders for appointments and not meet grant deliverables.

**Fiscal Impact/Cost Summary** - Include projected cost for each fiscal year, approved budget amount and account number  
Total cost for 3 years \$32,758

**APPROVALS - Initials Only**

HS	6147	Jun 9, 2026	GSA	6444	Jun 17, 2026
Prepared By	Phone Ext.	Date	Recommended for Approval	Phone Ext.	Date
					
Reviewed by Procurement Officer	Date		Completed by Buyer	Date	
	6/18/2026				