

Hernando County Board of County Commissioners

Change Order Request

<input checked="" type="checkbox"/> Add Line(s)	<input type="checkbox"/> Cancel Outstanding Balance	<input checked="" type="checkbox"/> Increase/Decrease Funds
<input type="checkbox"/> Delete Line(s)	<input type="checkbox"/> Change Project Number	<input type="checkbox"/> Increase/Decrease Blanket
<input type="checkbox"/> Cancel Purchase Order	<input type="checkbox"/> Change Account Number	<input type="checkbox"/> Increase/Decrease Quantity

Today's Date: 04-01-2025

PO/Contract #: 24001023

Change Order Number: 3

Requisition Number: RQ0

Vendor's Name on PO: CTC DISASTER RESPONSE INC

Department/Employee: CASEY PHILLIPS

Instructions: In the explanation, details of the request must be provided. All requests must include account number, line item number, project number, new purchase order total. Include details as if entering a new requisition. If change request is due to new agreements, quotes, projects, etc. necessary documents must be attached.

Explanation:

Justification: Contract #: 24-TF00708 Grant GMS #: 570

CO #3 is to increase funds to cover outstanding and additional invoices that we receive before finalization of this purchase order.

Increase Line 1) \$750,000.00; New Line Total \$900,000.00

Old PO Total \$150,000.00 New PO Total \$900,000.00

Dept 40011 Account 5303401 Project Code PTC924 Line #1 \$750,000.00

40011-5303401 1 750000.00 PTC924

Department Approval:

LILLIAN HOYT

Date: 03-10-2025

Chief Procurement Officer:

Date:

BOCC Approval Date:

(BOCC Required per Purchasing 080E)

Revised May, 2012