

SUMTER COUNTY BOARD OF COUNTY COMMISSIONERS
EXECUTIVE SUMMARY

SUBJECT: Change Order to Purchase Order No. 9122695 for FY 2022/23 (Staff Recommends Approval).

REQUESTED ACTION: Staff Recommends Approval

Meeting Type: Regular Meeting

DATE OF MEETING: 8/8/2023

CONTRACT: N/A

Vendor/Entity: American Medical Response

Effective Date:

Termination Date:

Managing Division / Dept: Fire & EMS

BUDGET IMPACT: \$390,035.00

FUNDING SOURCE: General Fund

Type: Annual

EXPENDITURE ACCOUNT: 001-182-522-3100

HISTORY/FACTS/ISSUES:

Purchase Order No. 9122695 – American Medical Response increase request of \$390,035.00.

Additional funds are needed to cover the cost of Paramedic Services for the remainder of the FY 2022/23.

Staff is recommending that this Change Order be approved.

Prepared by: Jacqueline Valdez

ProWritingAid Check

Exhibit E

PURCHASE ORDER CHANGE ORDER REQUEST FORM

Attach a copy of the purchase order and any supporting documentation.



Purchase order number 9122695
 Vendor (include vendor's number from ADG) American Medical Reponse - #8640

Current purchase order amount (including any previously approved change orders) \$ 895,350.00
 Requested change order amount \$ 390,035.00
 New purchase order total \$1,285,385.00

PLEASE CHANGE THE FOLLOWING ITEMS (FILL IN ALL THAT APPLY)						
Item Number	From Quantity	To Quantity	From Unit Price	To Unit Price	From Account Code	To Account Code
2			\$543,600.00	\$933,635.00		001-182-522-3100

PLEASE ADD THE FOLLOWING ITEMS					
Item	Account	Description	Quantity	Unit Price	Amount

Reason/Justification/Special Instructions: **OMB has requested funds to pay invoices. Purchase Order is attached.**

Signature/Approvals _____
 Division Head _____
 Date _____


 Digitally signed by Robert J Hanson
 Date: 2023.07.26 18:37:59 -04'00'
 Department Director _____
 Date _____

Becky Segrest Digitally signed by Becky Segrest
 Date: 2023.07.27 07:59:06 -04'00'
 Purchasing Agent _____
 Date _____

Bradley Arnold Digitally signed by Bradley Arnold
 Date: 2023.07.27 15:14:58 -04'00'
 County Administrator - if applicable _____
 Date _____

Submit to Purchasing

SUMTER BOARD OF COMMISSIONERS

7375 POWELL RD STE 200
WILDWOOD FL 34785

PURCHASE ORDER: 9122695

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***** VENDOR *****

AMERICAN MEDICAL RESPONSE
LIFEFLEET SOUTHEAST, INC
PO BOX 841439
DALLAS TX 75284-1439

***** DELIVER TO *****

SUMTER BOARD OF COMMISSIONERS
7375 POWELL RD STE 200
WILDWOOD FL 34785

Ordered	Due By	Ship Via	FOB	Terms	Customer No	By
11/09/22	12/09/22			NET		MALDERMAN

Requisition No	Vendor No	Vendor Phone	Vendor Fax	Vendor Contact
00023855	8640-1			

No	Quantity	U/M	Description	Unit Price	Extended	G/L Account
1	1.00		Ambulance Lease Vehicles	351,750.0000	351,750.00	001-416-522-4400
2	1.00		Paramedic Services	543,600.0000	543,600.00	001-182-522-3100
			** TOTAL **		895,350.00	

VENDOR INSTRUCTIONS:

SPECIAL INSTRUCTIONS:

- MAIL INVOICES TO:
SUMTER CO BOARD OF COMMISSIONERS
7375 POWELL RD SUITE 206
WILDWOOD, FL 34785-4203
OR EMAIL INVOICES TO:
ADMINISTRATIVE.SERVICES@SUMTERCOUNTYFL.GOV
- INVOICES AND PACKAGES MUST BEAR THE P.O. NO. ABOVE.
- PURCHASES MAY NOT EXCEED THE TOTAL AMOUNT OF THIS ORDER WITHOUT PRIOR APPROVAL BY THE PURCHASING DEPT.
- ACCEPTANCE OF THIS ORDER INCLUDES ACCEPTANCE OF ALL TERMS, PRICES, DELIVERY INSTRUCTIONS, SPECIFICATIONS AND CONDITIONS.
- STATE TAX EXEMPT#: 85-8012622366C-3
- IF YOU HAVE QUESTIONS, PLEASE CALL (352)689-4400.

AUTHORIZED BY