

SECTION 1: DESCRIPTION					
General Tracking		Contract Terms			
FILE ID#:	RFP, BID, QUOTE OR RENEWAL #:	INITIAL TERM WITH RENEWALS:	INITIAL TERM TOTAL COST:		
23-3757	23-121-FIN	4 YRS + 0 TERM PERIOD	\$18,665.00		
COMMITTEE:	TARGET COMMITTEE DATE:	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS:		
FINANCE	11/28/2023		\$18,665.00		
	CURRENT TERM TOTAL COST:	MAX LENGTH WITH ALL RENEWALS:	CURRENT TERM PERIOD:		
	\$18,665.00	FOUR YEARS	INITIAL TERM		
Vendor Information		Department Information			
VENDOR:	VENDOR #:	DEPT:	DEPT CONTACT NAME:		
FOSTER & FOSTER, INC. 39318		Finance	Melanie Koga		
VENDOR CONTACT:	VENDOR CONTACT PHONE:	DEPT CONTACT PHONE #:	DEPT CONTACT EMAIL:		
Jason Franken	630-620-0200	630-407-6134	Melanie.Koga@dupagecounty.gov		
VENDOR CONTACT EMAIL:	VENDOR WEBSITE:	DEPT REQ #:	,		
jason.franken@foster-foster.com	www.foster-foster.com				

Overview

DESCRIPTION Identify scope of work, item(s) being purchased, total cost and type of procurement (i.e., lowest bid, RFP, renewal, sole source, etc.). Actuarial services for the OPEB Audit.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Required services per GASB 74/75.

SECTION 2: DECISION MEMO REQUIREMENTS				
DECISION MEMO NOT REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required.			
DECISION MEMO REQUIRED RFP (REQUEST FOR PROPOSAL)	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required.			

	SECTION 3: DECISION MEMO				
STRATEGIC IMPACT	Select an item from the following dropdown menu of County's strategic priorities that this action will most impact. FINANCIAL PLANNING				
SOURCE SELECTION	Describe method used to select source. ACTUARIAL SERVICES 23-121-FIN RFP				
RECOMMENDATION AND TWO ALTERNATIVES	Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request, including status quo, (i.e., take no action). Utilize RFP Scorecard				

	SECTION 4: SOLE SOURCE MEMO/JUSTIFICATION
JUSTIFICATION	Select an item from the following dropdown menu to justify why this is a sole source procurement.
NECESSITY AND UNIQUE FEATURES	Describe the product or services that are not available from other vendors. Explain necessary and unique features or services. Attach letters from manufacturer, letters from distributor, warranties, licenses, or patents as needed. Be specific.
MARKET TESTING	List and describe the last time the market has been tested on the applicability of the sole source. If it has not been tested over the last 12 months, explain why not.
AVAILABILITY	Describe steps taken to verify that these features are not available elsewhere. Included a detailed list of all products or services by brand/manufacturer examined and include names, phone numbers, and emails of people contacted.

Send Pur	chase Order To:	Send Invoices To:				
Vendor:	Vendor#:	Dept:	Division:			
Foster & Foster, Inc.	39318	Finance	Audit			
Attn:	Email:	Attn:	Email:			
Jason L. Franken	jason.franken@foster-foster.com	Melanie Koga	Melanie.Koga@dupagecounty.			
Address:	City:	Address:	City:			
184 Shuman Blvd., Suite 305	Naperville	421 N County Farm Rd	Wheaton			
State:	Zip:	State:	Zip:			
L	60563	IL	60187			
Phone:	Fax:	Phone:	Fax:			
(630) 620-0200	(239) 481-0634	(630) 407-6134				
Send Payments To:		Ship to:				
/endor:	Vendor#:	Dept:	Division:			
Same As Above		Same As Above				
Attn:	Email:	Attn:	Email:			
Address:	City:	Address:	City:			
State:	Zip:	State:	Zip:			
Phone: Fax:		Phone:	Fax:			
 Shipping		Contract Dates				
ayment Terms:	FOB:	Contract Start Date (PO25):	Contract End Date (PO25):			
ER 50 ILCS 505/1	Destination	12/1/2023	11/30/2027			

					Purchas	se Requis	ition Lin	e Details			
LN	Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	EA	Audit Services	Actuarial Services for OPEB FY23 Audit	FY24	1000	1150	53000		2,500.00	2,500.00
2	1	EA	Audit Services	Actuarial Services for OPEB FY24 Audit	FY25	1000	1150	53000		6,695.00	6,695.00
3	1	EA	Audit Services	Actuarial Services for OPEB FY25 Audit	FY26	1000	1150	53000		2,575.00	2,575.00
4	1	EA	Audit Services	Actuarial Services for OPEB FY26 Audit	FY27	1000	1150	53000		6,895.00	6,895.00
FY is required, assure the correct FY is selected. Requisition Total						\$ 18,665.00					

Comments				
HEADER COMMENTS	Provide comments for P020 and P025.			
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO.			
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO.			
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB.			
The following docum	nents have been attached: W-9 Vendor Ethics Disclosure Statement			