



Procurement Review Comprehensive Checklist  
Procurement Services Division  
This form must accompany all Purchase Order Requisitions

### SECTION 1: DESCRIPTION

General Tracking		Contract Terms	
FILE ID#:	RFP, BID, QUOTE OR RENEWAL #:	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$14,999.99
COMMITTEE: PUBLIC WORKS	TARGET COMMITTEE DATE: 07/02/2024	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$29,500.00
	CURRENT TERM TOTAL COST: \$14,500.01	MAX LENGTH WITH ALL RENEWALS: ONE YEAR	CURRENT TERM PERIOD: INITIAL TERM
Vendor Information		Department Information	
VENDOR: Menards	VENDOR #: 10851	DEPT: Public Works	DEPT CONTACT NAME: Drew Cormican
VENDOR CONTACT:	VENDOR CONTACT PHONE:	DEPT CONTACT PHONE #: 630-985-7400	DEPT CONTACT EMAIL: drew.cormican@dupagecounty.gov
VENDOR CONTACT EMAIL:	VENDOR WEBSITE:	DEPT REQ #:	
<b>Overview</b>			
DESCRIPTION Identify scope of work, item(s) being purchased, total cost and type of procurement (i.e., lowest bid, RFP, renewal, sole source, etc.). DuPage County Public Works is seeking a contract till the end of the FY24 fiscal year with Menards totaling \$29,500.00. Year-to-Date spend as of the end of May was roughly \$12,000.00.			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished A contract was not anticipated at the beginning of the fiscal year, but due to competitive pricing and product variety, a contract to continue utilizing Menards for a wide variety of products is being requested.			

### 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.  
PER 55 ILCS 5/5-1022 'COMPETITIVE BIDS' (C) NOT SUITABLE FOR COMPETITIVE BIDDING

DECISION MEMO REQUIRED 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.
SOURCE SELECTION	Describe method used to select source.
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).

SECTION 4: SOLE SOURCE MEMO/JUSTIFICATION	
<b>JUSTIFICATION</b> Select an item from the following dropdown menu to justify why this is a sole source procurement.	
<b>NECESSITY AND UNIQUE FEATURES</b>	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.
<b>MARKET TESTING</b>	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.
<b>AVAILABILITY</b>	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.

SECTION 5: Purchase Requisition Information			
<i>Send Purchase Order To:</i>		<i>Send Invoices To:</i>	
Vendor: Menards	Vendor#: 10851	Dept: Public Works	Division: Public Works
Attn:	Email:	Attn: Magda	Email: pwaccountspayable@dupagecount y.gov
Address:	City:	Address: 7900 S. Rt 53	City: Woodridge
State:	Zip:	State: Illinois	Zip: 60517
Phone:	Fax:	Phone: 6309857400	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: Same as Above	Vendor#: Same as Above	Dept: Same as Above	Division: Same as Above
Attn:	Email:	Attn:	Email:
Address:	City:	Address:	City:
State:	Zip:	State:	Zip:
Phone:	Fax:	Phone:	Fax:
<b>Shipping</b>		<b>Contract Dates</b>	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): August 1, 2024	Contract End Date (PO25): Nov 30, 2024
Contract Administrator (PO25): Drew Cormican			

Purchase Requisition Line Details											
LN	Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	EA		Misc parts as needed	FY24	2000	2555	52200		1,500.00	1,500.00
2	1	EA		Misc parts as needed	FY24	2000	2555	52250		5,000.01	5,000.01
3	1	EA		Misc parts as needed	FY24	2000	2665	52200		1,500.00	1,500.00
4	1	EA		Misc parts as needed	FY24	2000	2665	52250		5,000.00	5,000.00
5	1	EA		Misc parts as needed	FY24	2000	2640	52200		500.00	500.00
6	1	EA		Misc parts as needed	FY24	2000	2640	52250		500.00	500.00
7	1	EA		Misc parts as needed	FY24	2000	2555	52270		500.00	500.00
<b>FY is required, assure the correct FY is selected.</b>										Requisition Total	\$ 14,500.01

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. DO NOT ENCUMBER FUNDS.
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 documents have been attached: ☐ W-9 ☐ Vendor Ethics Disclosure Statement