

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 #: 24-049-CS	INITIAL TERM WITH RENEWALS: 2 YRS + 1 X 2 YR TERM PERIOD	INITIAL TERM TOTAL COST: \$26,420.00		
COMMITTEE: HUMAN SERVICES	TARGET COMMITTEE DATE: 07/02/2024	PROMPT FOR RENEWAL: 6 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$45,974.00		
	CURRENT TERM TOTAL COST: \$26,420.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: INITIAL TERM		
Vendor Information		Department Information			
VENDOR: Carahsoft	VENDOR #:	DEPT: Community Services	DEPT CONTACT NAME: Gina Strafford-Ahmed		
VENDOR CONTACT: Michelle Gomez-Colon	VENDOR CONTACT PHONE: 571-662-3354	DEPT CONTACT PHONE #: 630-407-6444	DEPT CONTACT EMAIL: gina.strafford@dupagecounty.gov		
VENDOR CONTACT EMAIL: michelle.gomez- colon@carahsoft.com	VENDOR WEBSITE: www.carahsoft.com	DEPT REQ #:			

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.). RFP selection process Carahsoft was selected for the County to provide a survey system for Community Services to collect and maintain resident satisfaction results post County services.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Collection of resident satisfaction and resident needs will allow Community Services to better service our residents moving forward and meet the Federal grant requirements of our funding sources.

	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				
SOURCE SELECTION	Describe method used to select source. RFP conducted (24-049-CS)				
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). Proceed forward with the procurement of the survey and data analysis system from Carahsoft so that Community Services may have the needed tools to meet Federal and State Grant requirements for data collection.				

	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.

	SECTION 5: Purcha	ase Requisition Informat	ion			
Send Purch	ase Order To:	Send Invoices To:				
Vendor: Carahsoft Technology Corporation	Vendor#: Dept: t Technology Corporation Community Services		Division: Intake & Referral			
Attn: Michelle Gomez-Colon	Email: michelle.gomez- colon@carahsoft.com	Attn: Gina Strafford-Ahmed	Email: gina.strafford@dupagecounty.gov			
Address: 11493 Sunset Hills Road, Suite 100	City: Reston	Address: 421 N. County Farm Road	City: Wheaton			
State: VA	Zip: 20190	State:	Zip: 60187			
Phone: 888-662-2724	Fax:	Phone: 630-407-6444	Fax: 630-407-6501			
Send Pay	ments To:	Ship to:				
Vendor: SAA	Vendor#:	Dept: SAA	Division:			
Attn:	Email:	Attn:	Email:			
Address: City:		Address:	City:			
State:	e: Zip: State: Zip:		Zip:			
Phone:	Fax:	Phone:	Fax:			
 Shipping		Contract Dates				
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Jul 10, 2024	Contract End Date (PO25): July 9, 2026			

	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		System Implementation	FY24	5000	1650	54107	24-231028	1,683.00	1,683.00
2	1	EA		System Implementation	FY24	5000	1420	54107	24-224028	500.00	500.00
3	1	EA		System Implementation	FY24	5000	1720	54107	24-703S	1,683.00	1,683.00
4	1	EA		User License	FY24	5000	1650	53807	24-231028	6,710.00	6,710.00
5	1	EA		User License	FY24	5000	1495	53807	24-254028	1,500.00	1,500.00
6	1	EA		User License	FY24	5000	1720	53807	24-703S	2,317.00	2,317.00
7	1	EA		User License	FY25	5000	1650	53807	25-231028	6,527.00	6,527.00
8	1	EA		User License	FY25	5000	1420	53807	25-224028	1,500.00	1,500.00
9	1	EA		User License	FY25	5000	1720	53807	25-703S	4,000.00	4,000.00
FY is required, ensure the correct FY is selected. Requisition Total					\$ 26,420.00						

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.			