



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

SECTION 1: DESCRIPTION

<i>General Tracking</i>		<i>Contract Terms</i>	
FILE ID#: 25-1992	RFP, BID, QUOTE OR RENEWAL #: Proposal #48413	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$29,487.49
COMMITTEE: FINANCE	TARGET COMMITTEE DATE: 08/26/2025	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS:
	CURRENT TERM TOTAL COST: \$29,487.49	MAX LENGTH WITH ALL RENEWALS: ONE YEAR	CURRENT TERM PERIOD: INITIAL TERM
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: MIDWEST OFFICE INTERIORS, INC.	VENDOR #: #11403	DEPT: SUPERVISOR OF ASSESSMENTS	DEPT CONTACT NAME: AARON CROKER
VENDOR CONTACT: CHERYL FISCHER	VENDOR CONTACT PHONE: 630-850-8700	DEPT CONTACT PHONE #: 630-407-5850	DEPT CONTACT EMAIL: AARON.CROKER@DUPAGECOUNTY.GOV
VENDOR CONTACT EMAIL: CFISCHER@MIDWESTOFFICEINC.COM	VENDOR WEBSITE: WWW.MIDWESTOFFICEINC.COM	DEPT REQ #:	
<i>Overview</i>			
DESCRIPTION Identify scope of work, item(s) being purchased, total cost and type of procurement (i.e., lowest bid, RFP, renewal, sole source, etc.). PROCUREMENT OF NEW CONFERENCE ROOM FURNITURE FOR THE SUPERVISOR OF ASSESSMENTS OFFICE AND BOARD OF TAX REVIEW			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished REPLACEMENT OF TABLES AND CHAIRS FOR 3 CONFERENCE ROOMS, THESE ROOMS ARE OPEN TO PUBLIC DURING APPEAL HEARINGS AND CURRENT FURNITURE IS DATED.			

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	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required. COOPERATIVE (DPC2-352), GOVERNMENT JOINT PURCHASING ACT (30ILCS525) OR GSA SCHEDULE PRICING

SECTION 3: DECISION MEMO

SOURCE SELECTION	Describe method used to select source. COOPERATIVE
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 with quote proposal as-is, have proposal broken down into parts based on need, or reject the proposal.

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: Purchase Requisition Information			
<i>Send Purchase Order To:</i>		<i>Send Invoices To:</i>	
Vendor: MIDWEST OFFICE INTERIORS, INC	Vendor#: #11403	Dept: SUPERVISOR OF ASSESSMENTS	Division:
Attn: CHERYL FISCHER	Email: CFISCHER@MIDWESTOFFICEINC.COM	Attn: AARON CROKER	Email: AARON.CROKER@DUPAGECOUNTY.GOV
Address: 10330 ARGONNE WOODS DR, STE 600	City: WOODRIDGE	Address: 421 N. COUNTY FARM RD	City: WHEATON
State: IL	Zip: 60517	State: IL	Zip: 60187
Phone: 630-850-8700	Fax:	Phone: 630-407-5850	Fax: 630-407-5860
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: MIDWEST OFFICE INTERIORS, INC	Vendor#: #11403	Dept: SUPERVISOR OF ASSESSMENTS	Division:
Attn: CHERYL FISCHER	Email: CFISCHER@MIDWESTOFFICEINC.COM	Attn: AARON CROKER	Email: AARON.CROKER@DUPAGECOUNTY.GOV
Address: 10330 ARGONNE WOODS DR, STE 600	City: WOODRIDGE	Address: 421 N. COUNTY FARM RD	City: WHEATON
State: IL	Zip: 60517	State: IL	Zip: 60187
Phone: 630-850-8700	Fax:	Phone: 630-407-5850	Fax: 630-407-5860
Shipping		Contract Dates	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Aug 26, 2025	Contract End Date (PO25): Nov 30, 2025

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		FURNITURE SERVICES	FY25	1000	1800	52000		29,487.49	29,487.49
FY is required, ensure the correct FY is selected.										Requisition Total	\$ 29,487.49

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.