

## Procurement Review Comprehensive Checklist Procurement Services Division

This form must accompany all Purchase Order Requisitions

SECTION 1: DESCRIPTION					
General Tracking		Contract Terms			
FILE <b>I</b> D#:	RFP, BID, QUOTE OR RENEWAL #:	INITIAL TERM WITH RENEWALS:	INITIAL TERM TOTAL COST: \$28,942.10		
23-2410	5175754	OTHER			
COMMITTEE:	TARGET COMMITTEE DATE:	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL		
TECHNOLOGY	08/01/2023	3 MONTHS	RENEWALS:		
	00,00,72025		\$28,942.10		
	CURRENT TERM TOTAL COST:	MAX LENGTH WITH ALL RENEWALS:	CURRENT TERM PERIOD:		
	\$28,942.10	ONE YEAR	INITIAL TERM		
Vendor Information	L	Department Information	L		
VENDOR:	VENDOR #:	DEPT:	DEPT CONTACT NAME:		
DLT Solutions, LLC		Information Technology	Wendi Wagner		
VENDOR CONTACT: VENDOR CONTACT PHONE:		DEPT CONTACT PHONE #:	DEPT CONTACT EMAIL:		
Lamont Wilkins 703-773-9251		630-407-5064	wendi.wagner@dupageco.org		
VENDOR CONTACT EMA <b>I</b> L:	VENDOR WEBSITE:	DEPT REQ #:			
Lamont.wilkins@dlt.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.). Procurement of Bitsight sofware for \$28,942.10 though DLT Solutions. This is an IT purchase under \$35,000.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished

This software continuously scans all DuPage websites for vulnerabilities and gives remediation recommendations. It also produces a security score and benchmarks us against similar entities. This is an important part of our cybersecurity defenses.

SECTION 2: DECISION MEMO REQUIREMENTS				
DECISION MEMO NOT REQUIRED PER 55 ILCS 5/5-1022 'COMPETITIV	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required. EBIDS' (D) IT/TELECOM PURCHASES UNDER \$35,000.00			
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				
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 Purch	ase Order To:	Send Invoices To:				
Vendor: DLT Solutions, LLC	Vendor#:	Dept: Information Technology	Division:			
Attn: Lamont Wi <b>l</b> kins	Email: Lamont.wilkins@dlt.com	Attn: Sarah Godzicki	Email: sarah.godzicki@dupageco.org			
Address: P.O. Box 743359	City: Atlanta	Address: City: 421 N. County Farm Road Wheaton				
State: GA	Zip: 30374-3359	State: Zip: IL 60187				
Phone:	Fax:	Phone: Fax: 630-407-5037 630-407-5000				
Send Payments To:		Ship to:				
Vendor: DLT Solutions, LLC	Vendor#:	Dept: Information Technology	Division:			
Attn: Lamont Wi <b>l</b> kins	Email: lamont.wilkins@dlt.com	Attn: Email: wendi.wagner@dup				
Address: 2411 Dulles Corner Park, Suite 800	City: Herndon	Address: 421 N. County Farm Road	City: Wheaton			
State: VA	Zip: 20171	State:	Zip: 60148			
Phone: 703-773-9251	Fax: 703-773-9251	Phone: 630-407-5064	Fax: 630-407-5000			
 Shipping		Contract Dates				
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Contract End Date (PO2 09/01/2023 08/31/2024				

					Purchas	se Requis	ition Lin	e Details			
LN	Qty	UOM	ltem Detai <b>l</b> (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	EA	1223-0108	SPM Essentials C: -External Attack Surface Management Foundation == 12 MONTH TERM	FY23	1000	1110	53807		14,163.16	14,163.16
2	1	EA	1223-0109	Peer Comparison C: -Peer Analytics -5 Benchmarking Subscriptions == 12 MONTH TERM	FY23	1000	1110	53807		8,005.26	8,005.26
3	1	EA	1223-0110	Proactive Performance Management C: - Risk Remediation Plan -Forecasting == 12 MONTH TERM	FY23	1000	1110	53807		6,773.68	6,773.68
FY is required, assure the correct FY is selected.  Requisition Total				\$ 28,942.10							

Comments				
HEADER COMMENTS	Provide comments for P020 and P025.  Re: Bitsignt Quote #Q-81843-1 and Opp #5175754.			
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO.  Please send PO to Sarah Godzicki & Wendi and copy both when emailing PO to vendor.			
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: 

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Vendor Ethics Disclosure Statement