

DU PAGE COUNTY

421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

Finance Committee Final Regular Meeting Agenda

Tuesday, July 8, 2025

8:00 AM

County Board Room

- 1. CALL TO ORDER
- 2. ROLL CALL
- 3. PUBLIC COMMENT
- 4. CHAIRWOMAN'S REMARKS CHAIR GARCIA
- 5. APPROVAL OF MINUTES
 - 5.A. <u>25-1598</u>

Finance Committee - Regular Meeting - Tuesday, June 24, 2025

- 6. BUDGET TRANSFERS
 - 6.A. **FI-R-0114-25**

Budget Transfers 07-08-2025 - Various Companies and Accounting Units

- 7. PROCUREMENT REQUISITIONS
- A. Finance Garcia
 - 7.A.1. <u>25-1538</u>

Recommendation for the approval of a contract to Edward Hospital d/b/a Edward Occupational Health, to provide health-related services including TB tests, chest x-rays, drug screens, and functional job screens, for Human Resources, for the period of July 18, 2025 through July 17, 2026, for a contract total amount of \$27,983; per bid #24-055-HR, first optional one-year contract renewal. (Human Resources)

7.A.2. <u>FI-R-0112-25</u>

Amendment to Requisition 25-1538, issued to Edward Hospital d/b/a Edward Occupational Health, to provide health-related services, for Human Resources, for a one-time price increase and an addition to scope. (Human Resources)

7.A.3. **FI-P-0007-25**

Recommendation for the approval of a contract to Mail Services, LLC, for the purchase of assessment mailers to DuPage County taxpayers, for the Supervisor of Assessments, for the period of June 1, 2025 through August 7, 2026, for a contract total amount not to exceed \$130,000; per renewal of Bid 23-077-TRES, first of two optional renewals. (Supervisor of Assessments)

B. Human Services - Schwarze

7.B.1. **25-1645**

HS-P-0009A-25 - Amendment to Resolution HS-P-0009-25 issued to DuPage Homeownership Center d/b/a H.O.M.E. DuPage, to increase encumbrance in the amount of \$40,000, for additional grant funding received by the ILDCEO, resulting in an amended contract total not to exceed \$86,888. (7541-0001 SERV) (Community Services)

7.B.2. **25-1646**

HS-P-0005A-25 - Amendment to Resolution HS-P-0005-25, issued to Gardenworks Project, to increase the encumbrance in the amount of \$4,992, for additional grant funding received by the ILDCEO, resulting in an amended contract total not to exceed \$74,992. (7531-0001 SERV) (Community Services)

7.B.3. **25-1647**

HS-P-0008A-25 - Amendment to Resolution HS-P-0008-25, issued to Outreach Community Services, Inc., to increase encumbrance in the amount of \$15,000, for additional grant funding received by the ILDCEO, resulting in an amended contract total not to exceed \$115,000. (7522-0001 SERV) (Community Services)

7.B.4. **HS-P-0028-25**

Awarding resolution issued to Arcos Environmental Services, Inc., to provide mechanical (HVAC) and architectural weatherization labor and materials, for the Weatherization Program, for the period of July 1, 2025 through June 30, 2026, for a contract total not to exceed \$135,000; under RFP 24-099-WEX, first and final optional renewal. (Community Services)

7.B.5. **HS-P-0029-25**

Awarding resolution issued to Chicago United Industries, Ltd., to furnish, deliver and install Energy Star Appliances, for the Weatherization Program, for the period of July 1, 2025 through June 30, 2026, for a contract total not to exceed \$238,000; under RFP #22-065-CS, third of three one-year optional renewals. (Community Services)

7.B.6. **HS-P-0030-25**

Awarding resolution issued to Healthy Air Heating and Air, Inc., to provide mechanical (HVAC) and architectural weatherization labor and materials, for the Weatherization Program, for the period of July 1, 2025 through June 30, 2026 for a contract total not to exceed \$135,000; under RFP #24-099-WEX, first and final optional renewal. (Community Services)

7.B.7. <u>HS-P-0031-25</u>

Awarding resolution issued to My Green House HVAC, LLC, to provide mechanical (HVAC) and architectural weatherization labor and materials, for the Weatherization Program, for the period of July 1, 2025 through June 30, 2026, for a contract total amount not to exceed \$135,000, under RFP #24-099-WEX, first and final optional renewal. (Community Services)

C. Public Works - Childress

7.C.1. <u>FM-R-0005-25</u>

Resolution to rescind Requisition 25-1186, issued to Sanders Distributing, LLC d/b/a Air Care Services, to provide semi-annual cleaning of the kitchen ducts, hoods, and fans, for the period May 26, 2025 through May 25, 2027, for Facilities Management, for a total contract amount not to exceed \$20,840; per bid #25-043-FM. (PO 7678-0001 SERV)

7.C.2. **FM-CO-0001-25**

Amendment to Purchase Order 6937-0001 SERV, issued to A&P Grease Trappers, Inc., for sanitary, grease trap and storm basin pumping, jetting and cleaning, for Facilities Management, for a change order to increase the contract in the amount of \$15,000, taking the contract amount of \$87,750 and resulting in an amended contract amount not to exceed \$102,750, an increase of 17.09%.

7.C.3. <u>FM-R-0006-25</u>

Amendment to Contract 21-017-FM, issued to A&P Grease Trappers, Inc., for sanitary, grease trap and storm basin pumping, jetting and cleaning, for Facilities Management, to extend the expiration date of the contract term from June 12, 2025 to August 31, 2025. (PO 6937-0001 SERV)

7.C.4. <u>FM-P-0033-25</u>

Recommendation for the approval of a contract to Airways Systems, Inc., for semi-annual cleaning of the kitchen ducts, hoods, and fans for the Judicial Office Facility, JTK Administration Building, Jail, and Care Center, for Facilities Management, for the period of July 9, 2025 through July 8, 2027, for a total contract amount not to exceed \$37,525; per lowest responsible bid #25-043-FM.

7.C.5. <u>FM-P-0034-25</u>

Recommendation for the approval of a contract to Fox Valley Fire & Safety Company, for preventative maintenance, testing, and repair of the Non-Edwards System Technology Fire Alarm and Life Safety Systems for County facilities, for the period of August 28, 2025 through August 27, 2026, for a total contract amount not to exceed \$117,250; per renewal option under bid award #22-080-FM, third and final option to renew. (\$95,000 for Facilities Management, \$1,250 for Animal Services, \$10,000 for Division of Transportation, \$11,000 for Public Works)

7.C.6. **PW-P-0017-25**

Recommendation for the approval of a contract to Dynamic Industrial Services, Inc., for the rehabilitation of a 250,000 gallon elevated water storage tank (Greene Road Water Tower), for Public Works, for the period of July 8, 2025 to November 30, 2026, for a total contract amount not to exceed \$390,600; per lowest responsible bid #25-069-PW.

7.C.7. **PW-P-0018-25**

Recommendation for the approval of a contract to Mid American Water, for Waterous Pacer Hydrants, for Public Works, for the period of June 26, 2025 to June 25, 2026, for a total contract amount not to exceed \$62,500; per bid #24-078-PW, first of three options to renew.

7.C.8. **PW-P-0019-25**

Recommendation for the approval of a contract to Revere Electric Supply Company, to furnish Rockwell Automation Hardware and Software Support, for Public Works and Stormwater Management, for the period of May 29, 2025 to May 28, 2028, for a total contract amount not to exceed \$72,090 (Public Works \$54,067.50 and Stormwater \$18,022.50); per 55 ILCS 5/5-1022(c) not suitable for competitive bids. (Sole provider of Rockwell Automation Hardware and Software Support.)

D. Technology - Covert

7.D.1. **TE-P-0009-25**

Recommendation for the approval of a contract purchase order issued to KARA Company, Inc., for the management of the County GPS CORS sites, to include operating, monitoring and upgrading of software and firmware, for Information Technology - GIS Division, for the period of September 1, 2025 through August 31, 2026, for a contract total amount of \$39,500. Per 55 ILCS 5/5-1022(c) not suitable for competitive bids. (Sole source - KARA Company is the only vendor who can maintain system functions and software, has network knowledge, and has the ability to be on-site to correct any problems with the seven individual stations.)

E. Transportation - Ozog

7.E.1. **25-1557**

DT-R-0082A-23 - Amendment to the Intergovernmental Agreement between the County of DuPage and the City of Darien, to replace the existing retaining wall and fencing along the southside right-of-way of CH 31/Plainfield Road; to increase the funding in the amount of \$264, 500, +141.07%; resulting in a final County cost of \$452,000.

7.E.2. **DT-R-0021-25**

Awarding Resolution to Earthwerks Land Improvement & Development Corp., for drainage improvements to Army Trail Road, Section 24-00286-12-DR, for an estimated County cost of \$435,376.10; per lowest responsible bid.

8. FINANCE RESOLUTIONS

8.A. **FI-R-0111-25**

Acceptance and appropriation of additional funding and extension of time for the ILDCEO Community Services Block Grant PY25, Inter-governmental Agreement No. 25-231028, Company 5000 - Accounting Unit 1650, from \$1,269,609 to \$1,401,491 (an increase of \$131,882). (Community Services)

8.B. **FI-R-0113-25**

Approval of Employee Compensation and Job Reclassification Adjustments. (Workforce Development)

8.C. <u>FI-R-0115-25</u>

Authorization of Contract With International Union of Operating Engineers, Local 150 (Public Works, Stormwater and Facilities Management)

9. INFORMATIONAL

A. Payment of Claims

9.A.1. <u>25-1577</u> 06-20-2025 Paylist

9.A.2. <u>25-1584</u>

06-23-2025 Auto Debit Paylist

9.A.3. **25-1596**

06-24-2025 Paylist

9.A.4. **25-1629**

06-27-2025 Auto Debit Paylist

9.A.5. **25-1652**

06-27-2025 Paylist

9.A.6. <u>25-1670</u>

07-01-2025 Paylist

B. County Board Resolutions

9.B.1. **CB-R-0057-25**

Resolution Approving Member Initiative Program Agreements.

9.B.2. **CB-R-0058-25**

2026 County Board Meeting Schedule

10. PRESENTATIONS

- 10.A. DuPage County Recorder FY2026 Budget Presentation
- 10.B. DuPage County Supervisor of Assessments FY2026 Budget Presentation
- 11. OLD BUSINESS
- 12. NEW BUSINESS
- 13. ADJOURNMENT

Minutes



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: 25-1598 Agenda Date: 7/8/2025 Agenda #: 5.A.



DU PAGE COUNTY

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Finance Committee Summary

Tuesday, June 24, 2025 8:00 AM County Board Room

1. CALL TO ORDER

8:00 AM meeting was called to order by Chair Garcia at 8:01 AM.

2. ROLL CALL

PRESENT	Childress, Cronin Cahill, DeSart, Eckhoff, Evans, Galassi, Garcia, Haider, Honig, Krajewski, LaPlante, Ozog, Rutledge, Schwarze,
	Tornatore, Yoo, and Zay
ABSENT	Covert

Member Tornatore arrived at 8:06 AM.

3. PUBLIC COMMENT

No public comments were offered.

4. CHAIRWOMAN'S REMARKS - CHAIR GARCIA

Chair Garcia reminded the Committee that the Small Agency Grant Reception is taking place at 9:30 AM today.

5. APPROVAL OF MINUTES

5.A. <u>25-1541</u>

Finance Committee - Regular Meeting - Tuesday, June 10, 2025

RESULT: APPROVED

MOVER: Brian Krajewski

SECONDER: Saba Haider

AYES: Childress, Cronin Cahill, DeSart, Eckhoff, Evans, Galassi, Garcia,

Haider, Honig, Krajewski, LaPlante, Ozog, Rutledge, Schwarze,

Yoo, and Zay

ABSENT: Covert, and Tornatore

6. BUDGET TRANSFERS

6.A. **25-1567**

Transfer of funds from 6000-1195-53828 (contingencies) to 6000-1225-53090 (other professional services) and 6000-1225-54107 (software), in the amount of \$470,420, to cover continued implementation cost for new Dayforce payroll system. (Human Resources)

Committee members asked for a brief write-up regarding the Dayforce payroll system's history, current status, and cost. Human Resources staff will gather the information together.

RESULT: APPROVED

MOVER: Sheila Rutledge

SECONDER: Saba Haider

6.B. **25-1571**

Transfer of funds from 1000-1120-50000 (regular salaries) to 1000-1120-50010 (overtime), in the amount of \$20,000, to cover costs of staff overtime hours that will be needed to complete implementation and go-live of new payroll software. (Human Resources)

RESULT: APPROVED

MOVER: Michael Childress

SECONDER: Kari Galassi

6.C. <u>25-1564</u>

Budget Transfers 06-24-2025 - Various Companies and Accounting Units

RESULT: APPROVED

MOVER: Yeena Yoo

SECONDER: Saba Haider

7. PROCUREMENT REQUISITIONS

A. Finance - Garcia

7.A.1. **25-1554**

Ceridian HCM, 6499-0001 SERV - This Purchase Order is decreasing in the amount of \$373,750 due to funds allocated will not be used as the payroll implementation project is still in process. The go-live date has been moved to October 1, 2025. The decreased funds will be moved to Purchase Order 6496-0001 SERV, issued to OnActuate Consulting US, Inc. (Human Resources)

RESULT: APPROVED

MOVER: Cynthia Cronin Cahill

SECONDER: Sheila Rutledge

7.A.2. **FI-CO-0002-25**

OnActuate Consulting U.S., Inc, 6496-0001 SERV - This Purchase Order is being extended to January 31, 2026 and is increasing in the amount of \$373,750 to allow the change in the go-live time line to completely accomplish the implementation. These funds were decreased from Purchase Order 6499-0001 SERV, issued to Ceridian HCM, Inc. This request will not result in an increase to the original budget. (Human Resources)

RESULT: APPROVED

MOVER: Cynthia Cronin Cahill

SECONDER: Yeena Yoo

7.A.3. **25-1548**

Recommendation for the approval of a contract to Corrigan Moving Systems, to provide moving services for the Regional Office of Education, for the period of June 24, 2025 through July 31, 2025, for an amount not to exceed \$25,981; per bid #25-065-ROE. (Regional Office of Education)

RESULT: APPROVED

MOVER: Cynthia Cronin Cahill

SECONDER: Jim Zay

7.A.4. **FI-P-0006-25**

Recommendation for the approval of a contract purchase order issued to Riverdale Travel, to provide travel services for various County departments, for the period of July 1, 2025 through November 30, 2026, for a contract total amount not to exceed \$144,434.85; per renewal of RFP 24-046-FIN.

RESULT: APPROVED

MOVER: Cynthia Cronin Cahill

SECONDER: Yeena Yoo

B. Human Services - Schwarze

A motion was made by Member Schwarze and seconded by Member Evans to discharge the Human Services Committee for item FI-R-0108-25. Upon a voice vote, the motion passed.

7.B.1. **FI-R-0108-25**

Acceptance and appropriation of additional funding for the Illinois Department of Human Services (IDHS) Supportive Housing Grant PY25, Agreement No. FCSDH00352, Company 5000 - Accounting Unit 1760, from \$154,180 to \$168,180 (an increase of \$14,000). (Community Services)

RESULT: APPROVED

MOVER: Greg Schwarze

SECONDER: Saba Haider

7.B.2. **HS-P-0024-25**

Recommendation for the approval of a contract purchase order to Alpha Baking Company, to provide assorted sliced breads, rolls and sandwich buns, for the DuPage Care Center and Cafes on County Campus, for the period of August 5, 2025 through August 4, 2026, for a contract total not to exceed \$43,200; under bid renewal #22-055-DCC, third and final option to renew.

RESULT: APPROVED

MOVER: Greg Schwarze

SECONDER: Yeena Yoo

7.B.3. **HS-R-0012-25**

Amendment to Resolution HS-P-0024-25, issued to Alpha Baking Company, to provide assorted sliced breads, rolls and sandwich buns, for the DuPage Care Center and Cafe's on County Campus, for a one-time price increase of specific products. (DuPage Care Center)

RESULT: APPROVED

MOVER: Greg Schwarze

SECONDER: Yeena Yoo

7.B.4. **HS-P-0025-25**

Recommendation for the approval of a contract to Medline Industries, Inc., for various linens for the DuPage Care Center, for the period August 10, 2025 through August 9, 2026, for a contract total not to exceed \$72,000; contract pursuant to the Intergovernmental Cooperation Act (OMNIA Contract #2021003157).

RESULT: APPROVED

MOVER: Greg Schwarze

SECONDER: Yeena Yoo

7.B.5. **HS-P-0026-25**

Recommendation for the approval of a contract purchase order to A Lugan Contractors, LLC, to provide architectural and mechanical services for multi-family homes for the Weatherization grant program, for Community Services, for the period of July 1, 2025 through June 30, 2026, for a contract total not to exceed \$1,800,000; per RFP 25-023-WEX. (Community Services)

RESULT: APPROVED

MOVER: Greg Schwarze

SECONDER: Yeena Yoo

C. Judicial and Public Safety - Evans

A motion was made by Member Evans and seconded by Member Galassi to discharge the Judicial and Public Safety Committee for item FI-R-0107-25. Upon a voice vote, the motion passed.

7.C.1. **FI-R-0107-25**

Acceptance and appropriation of the National Integrated Ballistic Information Network (NIBIN) Grant PY25, Intergovernmental Agreement No. 20250018, Company 5000 - Accounting Unit 4540, in the amount of \$24,999. (Sheriff's Office)

RESULT: APPROVED
MOVER: Lucy Evans
SECONDER: Yeena Yoo

7.C.2. **JPS-P-0030-25**

Recommendation for the approval of a contract to Kelly Graham, to design and implement comprehensive job placement for unemployed Probationers, for the period of June 30, 2025 through June 29, 2026, for a contract total amount not to exceed \$32,000. Other Professional Service not subject to competitive bidding per 55 ILCS 5/5-1022(a). Vendor selected pursuant to DuPage County Code Section 2-353(1) (b). (Probation and Court Services)

RESULT: APPROVED MOVER: Lucy Evans

SECONDER: Cynthia Cronin Cahill

7.C.3. **JPS-P-0031-25**

Recommendation for the approval of a contract to Lauren McLaughlin, as a Recovery Coach Coordinator to work with Serenity House and PATH to Recovery, coaches, probation, and other stakeholders to provide services to the participants in the program, for the period of July 9, 2025 through July 8, 2026, for a contract total amount not to exceed \$45,000. Other Professional Service not subject to competitive bidding per 55 ILCS 5/5-1022(a). Vendor selected pursuant to DuPage County Code Section 2-353(1) (b). (Grant Funded) (Probation and Court Services)

RESULT: APPROVED

MOVER: Lucy Evans

SECONDER: Sheila Rutledge

D. Public Works - Childress

7.D.1. **FM-P-0029-25**

Recommendation for the approval of a contract to Commonwealth Edison Company, for electric utility supply and distribution services for the connected County facilities, for Facilities Management, for the period of June 29, 2025 through June 28, 2027, for a total contract amount not to exceed \$7,711,220. Per 55 ILCS 5/5-1022 (c) not suitable for competitive bids – Public Utility. (\$5,560,560 for Facilities Management, \$62,695 for Animal Services, \$1,401,875 for the Care Center, \$231,960 for the Division of Transportation, and \$454,130 for the Health Department)

RESULT: APPROVED

MOVER: Michael Childress

SECONDER: Jim Zay

7.D.2. **FM-P-0031-25**

Recommendation for the approval of a contract to TouchSource, LLC, to provide and deliver an outdoor touchscreen kiosk for the JTK Administration Building, for Facilities Management, for the period June 25, 2025 through June 24, 2030, for a total contract amount not to exceed \$40,877.61. Contract pursuant to the Intergovernmental Cooperation Act (GSA Cooperative Contract #47QTCA23D0058; TouchSource, LLC Quote #Q-17922).

RESULT: APPROVED

MOVER: Michael Childress

SECONDER: Yeena Yoo

7.D.3. **FM-P-0032-25**

Recommendation for the approval of a contract to Huen Electric, Inc., for phase II installation of solar panels on the roof of the JTK Administrative Building, for Facilities Management, for the period of June 24, 2025 through June 23, 2026, for a total contract amount not to exceed \$574,833; per lowest responsible bid #25-075-FM. (Partial EECBG)

RESULT: APPROVED

MOVER: Michael Childress

SECONDER: Dawn DeSart

7.D.4. **FM-R-0004-25**

Rescission of Requisition 25-0748 for the approval of a contract to Wipfli LLP, to provide accounting services and support related to the Pursuit of the Federal Renewable Energy Tax Credit as part of the Inflation Reduction Act 2022, for Facilities Management, for the period March 18, 2025 through March 17, 2026, for a total contract amount not to exceed \$16,370, per RFP #25-028-FM.

RESULT: APPROVED

MOVER: Michael Childress

SECONDER: Saba Haider

7.D.5. **PW-P-0015-25**

Recommendation for the approval of a contract to Sheffield Safety and Loss Company, LLC, for Safety Program Management for various County Departments, for the period of June 25, 2025 to June 24, 2026, for a total contract amount not to exceed \$150,000; per RFP #25-046-PW. (\$25,000 Public Works, \$25,000 Stormwater, \$25,000 Division of Transportation, \$25,000 Facilities Management, and \$50,000 Finance)

RESULT: APPROVED

MOVER: Michael Childress

SECONDER: Sheila Rutledge

7.D.6. **PW-P-0016-25**

Recommendation for the approval of a contract to Commonwealth Edison Company, for electric utility supply and distribution services for the connected County facilities, for Public Works, for the period of June 29, 2025 through June 28, 2027, for a total contract amount not to exceed \$3,360,000. Per 55 ILCS 5/5-1022 (c) not suitable for competitive bids – Public Utility.

RESULT: APPROVED

MOVER: Michael Childress

SECONDER: Jim Zay

E. Transportation - Ozog

A motion was made by Member Ozog and seconded by Member Zay to combine items 7.E.1. through 7.E.3. under Transportation. Upon a voice vote, the motion passed.

7.E.1. **25-1461**

DT-P-0057A-24 – Amendment to Resolution DT-P-0057-24, issued to Lightle Enterprises of Ohio, to furnish and deliver sign materials-rolled goods, as needed for the Division of Transportation, to increase the funding in the amount of \$34,190, resulting in a revised encumbrance of \$44,190, with no change to the contract amount.

RESULT: APPROVED
MOVER: Mary Ozog
SECONDER: Saba Haider

7.E.2. <u>25-1465</u>

DT-P-0053A-24 – Amendment to Resolution DT-P-0053-24, issued to Mandel Metals, to furnish and deliver aluminum sign blanks, as needed for the Division of Transportation, to increase the funding in the amount of \$26,800, resulting in a revised encumbrance of \$41,467.88, with no change to the contract amount.

RESULT: APPROVED
MOVER: Mary Ozog
SECONDER: Saba Haider

7.E.3. **DT-CO-0001-25**

Amendment to contract purchase order 7593-1-SERV, issued to Brad Bailey Sales d/b/a Lake County Trailers to furnish and deliver two (2) enclosed trailers, for the Division of Transportation to increase the funding in the amount of \$1,000, resulting in an amended contract total amount of \$30,544, an increase of 3.38%.

RESULT: APPROVED

MOVER: Mary Ozog

SECONDER: Saba Haider

7.E.4. **DT-P-0038-25**

Recommendation for the approval of a contract to Elmhurst Chicago Stone, LLC, to provide Portland Cement Concrete, as-needed, for the Division of Transportation and Public Works, for the period of June 24, 2025 through March 31, 2026, for a contract total not to exceed \$64,000; per lowest responsible bid #25-067-DOT. (Division of Transportation \$50,000 / Public Works \$14,000).

RESULT: APPROVED MOVER: Mary Ozog

SECONDER: Cynthia Cronin Cahill

A motion was made by Member Ozog and seconded by Member Zay to combine items 7.E.5. through 7.E.7. under Transportation. Upon a voice vote, the motion passed.

7.E.5. **DT-R-0015-25**

Awarding resolution to Compass Minerals America Inc. for the Bulk Rock Salt Program, Section 25-0SALT-02-MS, for an estimated County cost of \$707,900; per lowest responsible bid.

RESULT: APPROVED

MOVER: Mary Ozog

SECONDER: Saba Haider

7.E.6. **DT-R-0016-25**

Awarding Resolution to Builder's Paving, LLC, for Improvements to CH33/75th Street Frontage Road, Section 25-00233-10-CH, for an estimated County cost of \$2,136,950.76; per lowest responsible bid.

RESULT: APPROVED
MOVER: Mary Ozog
SECONDER: Saba Haider

7.E.7. **DT-R-0018-25**

Resolution to rescind DT-P-0017-25, issued to Ozinga Ready Mix Concrete, Inc., to furnish and deliver Portland Cement concrete, as needed, for Division of Transportation and Public Works. (Contract total amount of \$75,000)

RESULT: APPROVED
MOVER: Mary Ozog
SECONDER: Saba Haider

7.E.8. **DT-R-0019-25**

Recommendation for approval of Annual Financial Commitment in support of the Chicago Metropolitan Agency for Planning to consolidate planning of land use and transportation for the seven Counties of northeastern Illinois - \$79,263.00.

RESULT: APPROVED
MOVER: Mary Ozog
SECONDER: Dawn DeSart

8. FINANCE RESOLUTIONS

8.A. **FI-R-0099-25**

Acceptance and appropriation of additional funding for the Aging-Case Coordination Unit Fund PY25, Company 5000 - Accounting Unit 1660, in the amount of \$120,000. (Community Services)

RESULT: APPROVED

MOVER: Cynthia Cronin Cahill

SECONDER: Sheila Rutledge

8.B. **FI-R-0102-25**

Acceptance and appropriation of the HUD 2024 and 2025 Continuum of Care Homeless Management Information System Grant Agreement No. IL0306L5T142417, Company 5000 - Accounting Unit 1480, in the amount of \$199,080. (Community Services)

RESULT: APPROVED

MOVER: Cynthia Cronin Cahill

SECONDER: Greg Schwarze

8.C. **FI-R-0103-25**

Acceptance and appropriation of the HUD 2024 and 2025 Continuum of Care Homeless Management Information System Agreement No. IL1886L5T142401, Company 5000 - Accounting Unit 1480, in the amount of \$84,800. (Community Services)

RESULT: APPROVED

MOVER: Cynthia Cronin Cahill

SECONDER: Saba Haider

8.D. <u>FI-R-0104-25</u>

Additional appropriation for the Title IV-D Grant SFY 26-27 Intergovernmental Agreement No. 2026-55-013-IGA, Company 5000 - Accounting Unit 6570, in the amount of \$1,629,842. (State's Attorney's Office)

RESULT: APPROVED

MOVER: Cynthia Cronin Cahill

SECONDER: Yeena Yoo

8.E. **FI-R-0105-25**

Amendment to Resolution FI-P-0002-25, issued to CorVel Corporation, to add and approve the CorVel Corporation's CareMC License Agreement and Mutual Non-Disclosure Agreement as additional Contract Documents. (Human Resources)

RESULT: APPROVED

MOVER: Cynthia Cronin Cahill

SECONDER: Jim Zay

8.F. **FI-R-0106-25**

Approval of the 2026 Holiday Schedule. (Human Resources)

RESULT: APPROVED

MOVER: Cynthia Cronin Cahill

SECONDER: Yeena Yoo

8.G. **FI-R-0109-25**

Approval of Employee Compensation and Job Classification Adjustments. (Facilities Management)

RESULT: APPROVED

MOVER: Cynthia Cronin Cahill

SECONDER: Saba Haider

9. INFORMATIONAL

A motion was made by Member Cahill and seconded by Member Schwarze to receive and place on file: Payment of Claims, Wire Transfers, County Board Resolutions, and Grant Proposal Notifications. Upon a voice vote, the motion passed.

A. Payment of Claims

9.A.1. **25-1480**

06-05-2025 Auto Debit Paylist

9.A.2. **25-1500**

06-06-2025 Paylist

9.A.3. **25-1508**

06-09-2025 1000 Special Paylist

9.A.4. **25-1518**

06-10-2025 Paylist

9.A.5. **25-1549**

06-13-2025 Auto Debit Paylist

9.A.6. <u>25-1555</u>

06-13-2025 Paylist

9.A.7. <u>25-1561</u>

06-17-2025 Paylist

B. Wire Transfers

9.B.1. **25-1460**

06-04-2025 IDOR Wire Transfer

9.B.2. <u>25-1481</u>

06-05-2025 Corvel Wire Transfer

C. County Board Resolutions

9.C.1. **CB-R-0056-25**

Resolution Approving Member Initiative Program Agreements.

D. Grant Proposal Notifications

9.D.1. <u>25-1524</u>

GPN 016-25: DuPage County Adult Redeploy Illinois Programs SFY26 – Illinois Criminal Justice Information Authority – Probation and Court Services - \$429,853. (Probation and Court Services)

9.D.2. **25-1521**

GPN 017-25: Illinois Department of Commerce & Economic Opportunity, Department of Labor, Workforce Innovation & Opportunity Act Grant (WIOA) PY25, \$6,140,333. (Human Resources, Workforce Development Division)

RESULT: APPROVED THE CONSENT AGENDA

MOVER: Cynthia Cronin Cahill

SECONDER: Greg Schwarze

AYES: Childress, Cronin Cahill, DeSart, Eckhoff, Evans, Galassi, Garcia,

Haider, Honig, Krajewski, LaPlante, Ozog, Rutledge, Schwarze,

Tornatore, Yoo, and Zay

ABSENT: Covert

10. OLD BUSINESS

No old business was discussed.

11. NEW BUSINESS

An issue with property tax freezes affecting some of the seniors in the County was brought forward. Staff will look into this issue to see what can be done to correct it.

12. ADJOURNMENT

The meeting was adjourned at 9:04 AM.

Finance Resolution





File #: FI-R-0114-25 Agenda Date: 7/8/2025 Agenda #: 10.D.

BUDGET TRANSFERS VARIOUS COMPANIES AND ACCOUNTING UNITS FISCAL YEAR 2025

WHEREAS, it appears that certain appropriations for various County companies and accounting units are insufficient to cover necessary expenditures for the balance of the 2025 fiscal year; and

WHEREAS, it appears that there are other appropriations within these companies and accounting units from which transfers can be made at the present time to meet the need for funds.

NOW, THEREFORE, BE IT RESOLVED by the DuPage County Board that the attached transfers be made within the indicated companies and accounting units.

Enacted and approved this 8th day of July, 2025 at Wheaton, Illinois.

	DU PAGE COUNTY BOARD
Attest:	
	JEAN KACZMAREK, COUNTY CLERK

DEBORAH A. CONROY, CHAIR

DuPage County, Illinois BUDGET ADJUSTMENT Effective April 1, 2025

From:	5000	-		From	: Company/Acco	EECBG GRANTS ounting Unit Name		-
counting	Company #					Availabl	ept Use Only e Balance	Date of
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance
2704	53801		ADVERTISING	\$	1,000.00	1,000.00	Ø	6/16/25
2704	53820		GRANT SERVICES	\$	46,848.00	47,000,00	152.00	6/16/25
			Total	\$	47,848.00	J		
To:				To: Co	ompany/Accoun	EECBG GRANTS ting Unit Name		
counting	Company #						pt Use Only e Balance	Date of
Unit	Account	Sub-Account	Title		Amount	Prior to Transfer	After Transfer	Balance
2704	54010		BUILDING IMPROVEMENTS	S	47,848.00	234,635,93	282,483.93	6/16/25
				-				
			Total	\$	47,848.00			
		and the same of						
	Reason for Req	ruest:	Budget transfer to move money from unused funds to b on the JTK building for Facilities Management (EECGB).	uilding	improvements fo	or the Solar Array Ph	ase II installation	
				-		3/		6/10
								Date
	Activity			Chief	Financial Officer		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Date
			(optional) ****Please sign in blue ink on	the ori	ginal form****			
		9	Finance Department Use On	ly				
	Fiscal Year	35 Budget.	ournal # Acctg Period					

8

PW-7/1/25 FIN/CB-7/8/25

Finance Requisition under \$30,000



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: 25-1538 Agenda Date: 7/8/2025 Agenda #: 7.A.1.



Procurement Review Comprehensive Checklist Procurement Services Division

This form must accompany all Purchase Order Requisitions

SECTION 1: DESCRIPTION					
General Tracking		Contract Terms			
FILE ID#: 25-1538	RFP, BID, QUOTE OR RENEWAL #: 24-055-HR	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: \$22,948.00 CONTRACT TOTAL COST WITH ALL RENEWALS: \$106,897.00		
COMMITTEE: FINANCE	TARGET COMMITTEE DATE: 06/24/2025	PROMPT FOR RENEWAL: 6 MONTHS			
	CURRENT TERM TOTAL COST: \$27,983.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: FIRST RENEWAL		
Vendor Information		Department Information			
VENDOR: Edward Hospital D/B/A Edward Occupational Health	VENDOR #: 19875	DEPT: Human Resources	DEPT CONTACT NAME: Christine Clevenger		
VENDOR CONTACT: Sharon Moore	VENDOR CONTACT PHONE: 331-221-6148	DEPT CONTACT PHONE #: 630-407-6300	DEPT CONTACT EMAIL: dpchumanresources@ dupagecounty.gov		
VENDOR CONTACT EMAIL: sharon.moore@eehealth.org	VENDOR WEBSITE:	DEPT REQ #: N/A			

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.). Pre-employment drug screens, functional job screens, TB tests, and drug and alcohol screens for applicants and employees. Requesting an estimate of \$27,983.00 to accommodate the cost for applicants and current employees. Amount requested is based on annual activity. This will be the first of three 1-year optional renewals.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Drug screens, alcohol screens, and TB tests are a necessary part of the hiring process. Conducting these screens prevents negligent hiring and potential dangers in the workplace. All testing will be conducted in compliance with applicable employment laws as referenced in Policy 2.4-Pre-Employment Testing.

SECTION 2: DECISION MEMO REQUIREMENTS					
DECISION MEMO NOT REQUIRED RENEWAL	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.				

	SECTION 3: DECISION MEMO						
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.				

	SECTION 5: Purchase	e Requisition Informat	ion	
Send Pu	rchase Order To:	Sen	d Invoices To:	
Vendor: Edward Hospital D/B/A Edward Occupational Health	Vendor#:	Dept: Human Resources	Division: N/A	
Attn: Sharon Moore	Email: sharon.moore@eehealth.org	Attn: Human Resources Dept	Email: dpchumanresources@ dupagecounty.gov	
Address: P.O. Box 776945	City: Chicago	Address: 421 N. County Farm Rd Suite 3-300	City: Wheaton	
State: IL	Zip: 60677-6945	State:	Zip: 60187	
Phone: Fax: 331-221-6148		Phone: 630-407-6300	Fax: 630-407-6301	
Send .	Payments To:		Ship to:	
Vendor: Edward Hospital D/B/A Edward Occupational Health	Vendor#:	Dept: Human Resources	Division: N/A	
Attn:	Email:	Attn: Human Resources Dept	Email: dpchumanresources@ dupagecounty.gov	
Address: P.O. Box 776945	City: Chicago	Address: 421 N. County Farm Rd Suite 3-300	City: Wheaton	
State: IL	Zip: 60677-6945	State:	Zip: 60187	
Phone:	Fax:	Phone: 630-407-6300	Fax: 630-407-6301	
S	hipping	Con	tract Dates	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Jul 18, 2025	Contract End Date (PO25): Jul 17, 2026	

					Purcha:	se Requis	ition Lir	ne Details			
LN	Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	EA	N/A	Pre-employment drug screens, functional job screens, TB tests, and chest x- rays for applicants and, TB tests, and chest x-rays for current employees.	FY25	1000	1120	53070	N/A	5,671.00	5,671.00
2	1	EA	N/A	Pre-employment drug screens, functional job screens, TB tests, and chest x- rays for applicants and, TB tests, and chest x-rays for current employees.	FY26	1000	1120	53070	N/A	22,312.00	22,312.00
FY is	require	d, ensure	the correct FY i	s selected.						Requisition Total	\$ 27,983.00

	Comments				
HEADER COMMENTS	Provide comments for P020 and P025. This service agreement is to provide pre-employment TB tests, chest x-rays, drug screens, and functional job scree for applicants, and TB tests, and chest x-rays for current employees. This will be the first of three 1-year optional renewals.				
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 County of DuPage Finance Department Procurement Division, Room 3-400 421 North County Farm Road Wheaton, Illinois 60187

CONTRACT RENEWAL AGREEMENT

This contract, made and entered into by The County of DuPage, 421 North County Farm Road, Wheaton, Illinois, 60187, hereinafter called the "COUNTY" and, Edward Hospital, located at PO box 776945, Chicago, IL 60677-6945 hereinafter called the "CONTRACTOR", witnesseth;

The COUNTY and the CONTRACTOR have previously entered into a Contract, pursuant to Bid #24-055-HR which became effective on 7/18/2024 and which will expire 7/17/2025. The contract is subject to the first of three options to renew for a twelve (12) month period.

The contract renewal shall be effective on the date of last signature and shall terminate on 7/17/2026.

The parties now agree to renew said agreement, upon the same terms as previously agreed to, as specified in the original contract.

THE COUNTY OF DUPAGE	CONTRACTOR
	Signature on File
SIGNATURE	SIGNATURE8BE407
Sara Rogers PRINTED NAME	YVette Saba PRINTED NAME
Buyer I PRINTED TITLE	President, Edward Hospital
DATE	5/14/2025 DATE

SECTION 7 - BID FORM PRICING

The Contractor shall elect to provide pricing for Section A, Section B, or both. Any quantities shown are estimates only and are provided for bid canvassing purposes.

NO	ITEM	UOM	QTY	PRICE	EXTENDED PRICE
SECTIO	ON A: Testing to be performed on the pro	emises of a	n Occupation	nal Health facility.	
1	Post-Offer or Pre-Placement Physical Exam EA 135 \$66		\$66	\$8,910	
2	5-Panel Drug Screen - DOT & Non- DOT	EA	120	\$ 57	\$6,840
3	Functional Job Screen	EA	35	\$60 - \$195	\$2,100
4	TB Test - T-Spot, Quantiferon Gold	EA	115	\$95 (Quantiferon TB)	\$10,925
5	Chest X-Rays - two (2) view PA & Lat	EA	12	\$124 (Edward)	\$1,488
6	Pulmonary Function	EA	5	\$ 54	\$270
7	OSHA Questionnaire/Certificate	EA	5	\$36	\$180
8	DOT Breath Alcohol Screen	EA	20	\$41	\$820
9	Rabies Vaccination (3 doses)	EA	5	\$325	\$1,625
10	Titers Testing for Rabies Vaccination	EA	12	\$77	\$924
			4000.00	SECTION A TOTAL	\$34,082
	ON B: Testing to be performed at the Duoad, Wheaton, IL 60187, and the Public				
11	Annual Random Pool Drug Screen Program Administrative Fee	EA	1	\$	\$
12	Quarterly On-site Drug & Alcohol Testing Fee	EA	4	\$	\$
13	On-site DOT 5-Panel Drug Test	EA	100	\$	\$
14	On-site DOT Breath Alcohol Test	EA	100	\$	\$
				SECTION B TOTAL	\$

SECTION 8 - BID FORM SIGNATURE PAGE

The Contractor agrees to provide the service, and/or supplies as described in this solicitation and subject, without limitation, to all specifications, terms, and conditions herein contained. Bidder shall acknowledge receipt of each addendum issued in the space provided on the bid form.

Signature on File		
(Signature and Title)	,——————————————————————————————————————	
		CORPORATE SEAL (If available)
BID MUST BE SIGNED	AND NOTARIZED (WITH SEA	L) FOR CONSIDERATION
Subscribed and swom to before me this 29	day of May	AD, 20 24
(Notary Fublic)	My Commission Expires:	4110/26
	OFFICIAL SEAL MARINA J RUSH NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 04/16/2026 SEAL	

SECTION 9 - MANDATORY FORM PRE-EMPLOYMENT AND ON-SITE DRUG & ALCOHOL SCREENING 24-055-HR

	Full Name of Bidder		BE TYPE OR PRINT THE Hospital	EFOLLOW	ING INFOR	WATION)		- state
1	Main Business Address	201 S. V	Vashington Street	TOTAL PROPERTY.			oorannoomisiirii oo fi filooofiga kaa alkii kalkayi ku isaa isaa	and the same of th
	City, State, Zip Code	Napervi	lie, 11. 60540	water the second				
	Telephone Number	630-527	-7299	Email Address	linds.terwillig	er@cehealth.org	eren s	
	Bid Contact Person	Linda T	erwilliger					
The	undersigned certifies the	t he is:						
٥	the Owner/Sole Proprietor	Q	a Member authorized to sign on behalf of the Partnership	X and Corpo	Officer of the ration		a Member Venture	of the Joint
	rein after G alled the <u>Bidde</u> gnature on File	and the	at the members of the Pa		or Officers of nature o		n are as folio	ws :
_	(President or Pa	artner)				(Vice-Preside	nt or Partner	Ò
_	(Secretary or P	ertner)				(Treasurer or	Partner)	,
ref Ad Fu an	the Procurement Officer, Derred to or mentioned in the dende No	poses a ction, in contract	act documents, specification issued thereto. Issued thereto. Indiagrees, if this bid is a sciuding transportation is at documents in the man	ations and a accepted, to services na arrer and to	attached ext o provide all cessary to f ne therein pr	necessary mad urnish all the n escribed.	hinery, loois neterials and	, apparatus, I equipment
the	rther, the undersigned ce Bidder and in accordance nois and that this Certifica	e with t	he Partnership Agreeme	ent or by-la	ws of the Co	proporation, and		
oit	rther, the undersigned cer her 720 illinois Compiled i CS 130/1 et seq., the illino	Statutes	5/33 E-3 or 5/33 E-4, b	ed from bid ld rigging o	ding on this or bid-rotating	contract as a re y, or as a result	suit of a violation	stion of of 820
	e undersigned certifies the bmitting this bid, and thet					has checked th	ne same in d	etali before
we he	a Corporation, the undersing property adopted by the lid and have not been reperprovide a copy of the corp	e Board saled no	of Directors of the Corp r modified, and that the	oration at a	meeting of ain in full force	said Board of I sand effect. (B	Directors dub Bidder may b	one belies y
00	rther, the Bidder certifies intract to the parties listed adit at its option.							
_			THE COUNT	Ý OF DUPAG	Ě		- April occupie della com essi o	PM97C 1 *

Finally, the Bidder, if awarded the contract, agrees to do all other things required by the contract documents, and that he will take in full payment therefore the sums set forth in the bidding schedule (subject to unit quantity adjustments based upon actual usage).

CONTRACT ADMINISTRATION INFORMATION:

CORRESPON	DENCE TO CONTRACTOR:	REMIT TO CO						
NAME	Edward-Elmhurst Occupational Health	NAME	Edward Occupational Health					
CONTACT	Sharon Moore, Director - Occupational Health	CONTACT	Mallory Johnson, Billing Representative II					
ADDRESS	801 S. Washington Street	ADDRESS	P.O. Box 776945					
CITY ST ZIP	Naperville, IL 60540	CITY ST ZIP	Chicago, IL 60677-6945					
TX	331-221-6148	TX	331-221-6089					
FX		FX	331-221-3823					
EMAIL	sharon.moore@eehealth.org	EMAIL	mallory_johnson@echealth.org					
COUNTY BILL	TO INFORMATION:	COUNTY SH	IP TO INFORMATION:					
DuPage Coun	ty Human Resources	DuPage Cour	nty Human Resources					
421 North Cou	unty Farm Road	421 North Co	unty Farm Road					
Wheaton, IL 6	0187	Wheaton, IL 60187						
TX: (630) 407		TX: (630) 407-6300						

ALL MATERIALS MUST BE BID AND SHIPPED F.O.B. DESTINATION, DELIVERED AND INSTALLED (FREIGHT INCLUDED IN PRICE)



THE COUNTY OF DUPAGE
FINANCE - PROCUREMENT
PRE-EMPLOYMENT AND ON-SITE DRUG & ALCOHOL SCREENING 24-055-HR
BID TABULATION

					√														
				Elmhurst H	Occu ealth	•	Advocate M	1edio	cal Group	P	hysicians Im	nme	diate Care	Nao M	1edi	cal	Conc	entı	ra
NO.	ITEM	UOM	QTY	PRICE	E	XTENDED PRICE	PRICE	E	XTENDED PRICE		PRICE	Е	XTENDED PRICE	PRICE	Е	XTENDED PRICE	PRICE	Ε	XTENDED PRICE
SECT	ON A																		
1	Post-Offer or Pre-Placement Physical Exam	EA	135	\$ 66.0	\$	8,910.00	\$ 85.00	\$	11,475.00	\$	97.00	\$	13,095.00	\$ 130.00	\$	17,550.00	\$ 98.00	\$	13,230.00
2	5-Panel Drug Screen - DOT & Non-DOT	EA	120	\$ 57.0	\$	6,840.00	\$ 66.00	\$	7,920.00	\$	67.00	\$	8,040.00	\$ 60.00	\$	7,200.00	\$ 58.00	\$	6,960.00
3	Functional Job Screen	EA	35	\$ 195.0	\$	6,825.00	\$ 150.00	\$	5,250.00	\$	94.00	\$	3,290.00	\$ 130.00	\$	4,550.00	\$ 123.00	\$	4,305.00
4	TB Test - T-Spot, Quantiferon Gold	EA	115	\$ 95.00	\$	10,925.00	\$ 65.00	\$	7,475.00	\$	101.00	\$	11,615.00	\$ 100.00	\$	11,500.00	\$ 225.00	\$	25,875.00
5	Chest X-Rays - two (2) view PA & Lat	EA	12	\$ 124.00	\$	1,488.00	\$ 135.00	\$	1,620.00	\$	97.00	\$	1,164.00	\$ 117.00	\$	1,404.00	\$ 98.00	\$	1,176.00
6	Pulmonary Function	EA	5	\$ 54.00	\$	270.00	\$ 58.00	\$	290.00	\$	75.00	\$	375.00	\$ 78.00	\$	390.00	\$ 67.00	\$	335.00
7	OSHA Questionnaire/Certificate	EA	5	\$ 36.00	\$	180.00	\$ 32.00	\$	160.00	\$	45.00	\$	225.00	\$ 40.00	\$	200.00	\$ 45.00	\$	225.00
8	DOT Breath Alcohol Screen	EA	20	\$ 41.0	\$	820.00	\$ 45.00	\$	900.00	\$	41.00	\$	820.00	\$ 60.00	\$	1,200.00	\$ 45.00	\$	900.00
9	Rabies Vaccination (3 doses)	EA	5	\$ 975.0	\$	4,875.00	\$ 1,788.00	\$	8,940.00	\$	1,314.00	\$	6,570.00	\$ 1,300.00	\$	6,500.00	\$ 1,587.00	\$	7,935.00
10	Titers Testing for Rabies Vaccination	EA	12	\$ 77.00	\$	924.00	\$ 117.00	\$	1,404.00	\$	425.00	\$	5,100.00	\$ 100.00	\$	1,200.00	\$ 250.00	\$	3,000.00
		•	SEC	TION A TOTA	- \$	42,057.00		\$	45,434.00			\$	50,294.00		\$	51,694.00		\$	63,941.00

				Elmhurst Occu	Elmhurst Occupational Health			Advocate Medical Group		Physicians Immediate Care		Nao Medical			Concentra	
NO.	ITEM	UOM	QTY	PRICE	EXTENDED PRICE	PRICE	E	XTENDED PRICE	PRICE	EXTENDED PRICE	F	PRICE		TENDED PRICE	PRICE	EXTENDED PRICE
SECT	ON B: On-site Testing							•			•			•		
11	Annual Random Pool Drug Screen Program Administrative Fee	EA	1	NO	BID	\$ 250.00	\$	250.00	NO	BID		NO CI	HARG	SE .	NO	BID
12	Quarterly On-site Drug & Alcohol Testing Fee	EA	4	NO	BID	\$ 240.00	\$	960.00	NO	BID	\$	1,500.00	\$	6,000.00	NO	BID
13	On-site DOT 5-Panel Drug Test	EA	100	NO	BID	\$ 66.00	\$	6,600.00	NO	BID	\$	60.00	\$	6,000.00	NO	BID
14	On-site DOT Breath Alcohol Test	EA	100	NO	BID	\$ 45.00	\$	4,500.00	NO	BID	\$	60.00	\$	6,000.00	NO	BID
			SEC	TION B TOTAL	NO BID		\$	12,310.00		NO BID			\$	18,000.00		NO BID

NOTES

- 1. DISA Global Solutions, Inc. has been deemed non-responsive due to not providing required documents.
- 2. There are three (3) changes to Elmhurst Occupational Health's bid tab:
 - a. Item 3 when mulitplied out resulted in an adjusted Extended Price of \$6,825.00 (35 X \$195.00 = \$6,825.00).
 - b. Item 9 unit price was adjusted to \$975.00 to relfect 3 doses at \$325 per dose. When multiplied out, this resulted in an Extended Price of \$4,875.00 (5 X \$975.00 = \$4,875.00).
 - c. Section A Total increased from \$34,082.00 to \$42,057.00.
- 3. There are four (4) changes to Advocate Medical Group's bid tab:
 - a. Item 3 when multiplied out resulted in an adjusted Extended Price of \$5,250.00 (35 X \$150.00 = \$5,250.00).
 - b. Section A Total decreased from \$53,039.00 to \$45,434.00.
 - c. Item 12 unit price adjusted to \$240.00 to account for two (2) hours of labor at \$120 per hour. When multiplied out, this resulted in an adjusted Extended Price of \$960.00 (4 X \$240.00 = \$960.00).
 - d. Section B Total increased from \$11,350.00 to \$12,310.00.

Bid Opening 6/5/2024 @ 2:3	30 PM	BR, HK,	ΝE
Invitations	Sent	79	
Total Vendors Requesting Docui	ments	1	
Total Bid Resp	onses	5	



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	24-055-HR
COMPANY NAME:	Endeavor Health - Edward Hospital - Occupational Health
CONTACT PERSON:	Sharon E. Moore
CONTACT EMAIL:	Sharon.Moore@EEHealth.org

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

and political action committees to which the contracting person has made contributions.
Has the Bidder made contributions as described above?
□ Yes

If "Yes", complete the required information in the table below.

XI No

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

☑ No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- · With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

Ethics | DuPage Co, IL

The full text of the County's Procurement Ordinance is available at:

ARTICLE VI. - PROCUREMENT | Code of Ordinances | DuPage County, IL | Municode Library

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Printed	Name:	Yvette Saba	Signatu	Signature on File	
Title:	Presiden	t, Edward Hospital	Date:	5/14/2025	

Finance Resolution

421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov



File #: FI-R-0112-25 Agenda Date: 7/8/2025 Agenda #: 10.B.

AMENDMENT TO REQUISITION 25-1538 ISSUED TO EDWARD HOSPITAL D/B/A EDWARD OCCUPATIONAL HEALTH TO PROVIDE HEALTH-RELATED SERVICES FOR HUMAN RESOURCES (ONE-TIME PRICE INCREASE AND ADDITION TO SCOPE)

WHEREAS, on July 8th, 2025, through Requisition 25-1538, the DuPage County Finance Committee approved a renewed contract to provide health-related services including TB tests, chest x-rays, drug screens, and functional job screens, for Human Resources (hereinafter the "CONTRACT") between the County of DuPage (hereinafter the "COUNTY") and Edward Hospital d/b/a Edward Occupational Health (hereinafter the "CONTRACTOR"); and

WHEREAS, the current CONTRACT, by and through the DuPage Care Center, is \$27,983.00; and

WHEREAS, after consultation with CONTRACTOR, the COUNTY and CONTRACTOR seek to apply a one-time price increase for the 5-Panel Drug Screen, and modify the scope to include a TB positive reactor questionnaire, as listed in Exhibit A; and

WHEREAS, the Finance Committee recommends approving the one-time price increase and modifying the scope of the CONTRACT; and

WHEREAS, all provisions of the CONTRACT not expressly changed in the Amendment shall remain the same in their entirety.

NOW, THEREFORE BE IT RESOLVED, that the County Board adopts and approves this Amendment to Contract #24-055-HR, issued to Edward Hospital d/b/a Edward Occupational Health, to apply a one-time price increase and modify the scope of the CONTRACT; and

BE IT FURTHER RESOLVED that one (1) original copy of this Amendment be transmitted to Edward Hospital d/b/a Edward Occupational Health at P.O. Box 776945, Chicago, Illinois 60677-6945, by and through the Human Resources Department.

Enacted and approved this 8th of July, 2025 at Wheaton, Illinois.

	DEBORAH A. CONROY, CHAIR DU PAGE COUNTY BOARD
Attest:	JEAN KACZMAREK, COUNTY CLERK



FINANCE DEPARTMENT

630-407-6100

www.dupagecounty.gov/finance

DuPage County - Procurement Division

Contract Number: 24-055-HR

FIRST AMENDMENT TO CONTRACT 24-055-HR BETWEEN EDWARD HOSPITAL

AND THE COUNTY OF DUPAGE

THIS FIRST AMENDMENT to Contract 24-055-HR (the "First Amendment") shall be effective July 18, 2025 (the "First Amendment Effective Date") and is made and entered into by and between the County of DuPage ("County") and Edward Hospital ("Contractor"). County and Contractor are each referred to herein as a "party" and collectively the "parties."

RECITALS

WHEREAS, on July 9, 2024, County and Contractor previously entered into that certain Contract 24-055-HR (the "Agreement") for Contractor to provide certain goods and/or services to County's Department of Human Resources; and

WHEREAS, the parties desire to amend the Agreement, including the prices and items listed in the document titled "Section 7 – Bid Form Pricing" attached to Contractor's Bid Proposal, pursuant to this First Amendment.

NOW, THEREFORE, in consideration of the promises and mutual covenants contained herein and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties agree as follows:

- STATUS OF AGREEMENT. All other provisions of the Agreement not expressly changed herein shall remain the same in their entirety and shall not be deemed waived, modified, superseded, or otherwise affected in any respect.
- 2. **REPRESENTATION & WARRANTY**. The parties represent and warrant to each other that each party has full power, authority, and legal right to execute, deliver, and perform this First Amendment, and the execution, delivery, and performance hereof have been duly authorized by all necessary actions.
- AMENDMENT TO AGREEMENT. As of the First Amendment Effective Date, the Agreement shall be amended as follows:
 - a. Section 7 BID FORM PRICING. The document titled "Section 7 Bid Form Pricing" attached to Contractor's Bid Proposal and made part of the Agreement shall be amended as follows:
 - i. The pricing for Section A, Item No. 2, "5-Panel Drug Screen DOT & Non-DOT" shall be \$59.00 for each Non-DOT drug screen and \$76.00 for each DOT drug screen in accordance with the document attached hereto as Exhibit A.
 - ii. A new "Item No. 11" shall be added to Section A titled "TB Positive Reactor Questionnaire" ("Item No. 11"). The price for each Item No. 11 shall be \$12.00 each in accordance with the document attached hereto as Exhibit A.



FINANCE DEPARTMENT

630-407-6100

www.dupagecounty.gov/finance

IN WITNESS WHEREOF, the undersigned duly authorized representative of each of the parties has executed this First Amendment as of the date below written.

Ву:	THE COUNTY OF DUPAGE, ILLINOIS	By:	Signature on File	
by.	SIGNATURE	Бу.	SIGNATURE	
	Valerie Calvente		Yvette Saba	
	PRINTED NAME		PRINTED NAME	
	Chief Procurement Officer		President, Edward Hosital	
	PRINTED TITLE		PRINTED TITLE	
			6/30/2025	
	DATE		DATE	

EXHIBIT A

From:

Moore, Sharon

To:

Rogers, Sara; Moore, Sharon; Carpino, Gia

Subject:

Re: [EXTERNAL]DuPage County PO# 7184-SERV and Bid# 24-055-HR contract renewal

Date:

Thursday, June 5, 2025 7:14:55 PM

Attachments:

image001.png

[Caution: This email originated outside Dupagecounty.gov. Do not click links or open attachments unless you recognize the sender and know the content is safe.]

Hi Sara -

So sorry for my delayed response. We are migrating our emails to the new endeavorhealth.org.

The pricing would be as follows -

Effective July 18, 2025

- 1. Pricing for 5-Panel Drug Screen will be:
 - Non-DOT screening: \$59.00 each
 - DOT screening: \$76.00 each
- 2. TB positive reactor questionnaire will be priced at \$12.00 each.

Sharon

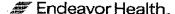
Sharon E. Moore MBA, BSN, RN (she/her/hers)

Director, EH and EMH Occupational Health Services

■ Sharon.Moore@EEHealth.org

(331) 221-6148 work

155 E Brush Hill Rd., Elmhurst, IL 60126



endeavorhealth.org

From: Rogers, Sara <Sara.Rogers@dupagecounty.gov>

Sent: Thursday, June 5, 2025 8:18 AM

To: Moore, Sharon <Sharon.Moore@EEHealth.org>

Subject: RE: [EXTERNAL]DuPage County PO# 7184-SERV and Bid# 24-055-HR contract renewal

Good morning Sharon.



Finance Requisition \$30,000 and Over

421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: FI-P-0007-25 Agenda Date: 7/8/2025 Agenda #: 10.F.

AWARDING RESOLUTION ISSUED TO MAIL SERVICES, LLC TO PROVIDE ASSESSMENT MAILERS FOR THE SUPERVISOR OF ASSESSMENTS (CONTRACT TOTAL AMOUNT \$130,000)

WHEREAS, proposals have been taken and evaluated in accordance with County Board policy; and

WHEREAS, the Finance Committee recommends County Board approval for the issuance of a contract to Mail Services, LLC, to provide assessment mailers to DuPage County taxpayers, for the period of June 1, 2025 through August 7, 2026, for the Supervisor of Assessments

NOW, THEREFORE BE IT RESOLVED, that said contract to provide assessment mailers to DuPage County taxpayers, for the period of June 1, 2025 through August 7, 2026, for the Supervisor of Assessments per renewal of Bid 23-077-TRES, be, and it is hereby approved for the issuance of a contract purchase order by the Procurement Division to Mail Services, LLC, 4100 121st St., Urbandale, IA 50323, for a contract total amount of \$130,000.00.

Enacted	and	approved	this	8th	dav	of July.	2025	at V	Vheaton.	Illing	ois.

	DEBORAH A. CONROY, CHAIR
	DU PAGE COUNTY BOARD
Attest:	
	JEAN KACZMAREK, COUNTY CLERK



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:	INITIAL TERM TOTAL COST:	
FI-P-0007-25	23-077-TRES	1 YR + 3 X 1 YR TERM PERIODS	\$187,750.00	
COMMITTEE:	TARGET COMMITTEE DATE:	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS:	
FINANCE	07/08/2025	3 MONTHS	\$759,000.00	
	CURRENT TERM TOTAL COST:	MAX LENGTH WITH ALL RENEWALS:	CURRENT TERM PERIOD:	
	\$130,000.00	FOUR YEARS	FIRST RENEWAL	
Vendor Information		Department Information		
VENDOR:	VENDOR #:	DEPT:	DEPT CONTACT NAME:	
MAIL SERVICES, LLC	13258	SUPERVISOR OF ASSESSMENTS	AARON CROKER	
VENDOR CONTACT:	VENDOR CONTACT PHONE:	DEPT CONTACT PHONE #:	DEPT CONTACT EMAIL:	
MARGARET FREUND	515-727-7706	630-407-5850	AARON.CROKER@DUPAGECOUNTY.	
VENDOR CONTACT EMAIL:	VENDOR WEBSITE:	DEPT REQ #:		
MFREUND@MAILSERVICESLC.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 ASSESSMENT MAILERS TO DUPAGE COUNTY TAXPAYERS. PER RENEWAL OF BID #23-077-TRES.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished PER IL PROPERTY TAX CODE, COUNTIES ARE REQUIRED TO SEND OUT NOTIFICATIONS OF ASSESSED VALUE.

	SECTION 2: DECISION MEMO REQUIREMENTS
DECISION MEMO NOT REQUIRED RENEWAL	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.

	SECTION 3: DECISION MEMO						
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).						

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	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 I	Requisition Information	on		
Send	Purchase Order To:	Send Invoices To:			
		Dept: SUPERVISOR OF ASSESSMENTS	Division:		
Attn: MARGARET FREUND	Email: MFREUND@MAILSERVICESLC.COM	Attn: AARON CROKER	Email: AARON.CROKER@DUPAGECOUNTY. GOV		
Address: 4100 121ST ST	City: URBANDALE	Address: 421 N. COUNTY FARM RD	City: WHEATON		
State: IOWA	Zip: 50323	State: ILLINOIS	Zip: 60187		
Phone: 515-727-7706	Fax:	Phone: Fax: 630-407-5850			
Se	end Payments To:	Ship to:			
Vendor: MAIL SERVICES, LLC	Vendor#: 13258	Dept: SUPERVISOR OF ASSESSMENTS	Division:		
Attn: MARGARET FREUND	Email: MFREUND@MAILSERVICESLC.COM	Attn: AARON CROKER	Email: AARON.CROKER@DUPAGECOUNTY. GOV		
Address: 4100 121ST ST	City: URBANDALE	Address: 421 N. COUNTY FARM RD	City: WHEATON		
State: IOWA	Zip: 50323	State: ILLINOIS	Zip: 60187		
Phone: 515-727-7706	Fax:	Phone: 630-407-5850	Fax:		
Shipping		Contract Dates			
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Jun 1, 2025	Contract End Date (PO25): Aug 7, 2026		

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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		MAILING SERVICES	FY25	1000	1800	53830		10,000.00	10,000.00
2	1	EA		POSTAGE	FY25	1000	1800	53804		50,000.00	50,000.00
3	1	EA		MAILING SERVICES	FY26	1000	1800	53830		15,000.00	15,000.00
4	1	EA		POSTAGE	FY26	1000	1800	53804		55,000.00	55,000.00
FY is	FY is required, ensure the correct FY is selected. Requisition Total							\$ 130,000.00			

	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.					

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The County of DuPage Finance Department Procurement Division, Room 3-400 421 North County Farm Road Wheaton, Illinois 60187

CONTRACT RENEWAL AGREEMENT

This contract, made and entered into by The County of DuPage, 421 North County Farm Road, Wheaton, Illinois, 60187, hereinafter called the "COUNTY" and Mail Services, LLC located at 4100 121st Street, Urbandale, Iowa 50323, hereinafter called the "CONTRACTOR", witnesseth;

The COUNTY and the CONTRACTOR have previously entered into a Contract, pursuant to Bid #23-077-TRES which became effective on 8/8/2023 and which will expire 5/31/2025. The contract is subject to the first of two options to renew for a twelve (12) month period.

The contract renewal shall be effective on the date of last signature and shall terminate on 8/7/2026.

The parties now agree to renew said agreement, upon the same terms as previously agreed to, as specified in the original contract.

THE COUNTY OF DUPAGE	CONTRACTOR	
SIGNATURE	SIGNATURE	
Brian Rovik	Jerry Porter	
PRINTED NAME	PRINTED NAME	
Buyer I	President/ GM	
PRINTED TITLE	PRINTED TITLE	
	07/01/2025	
DATE	DATE	



THE COUNTY OF DUPAGE FINANCE - PROCUREMENT ASSESSMENT NOTICE MAILING 23-077-TRES BID TABULATION

				MAIL SER	VICES LLC	SE	BIS	BER	KONE	D4 SOL	LUTIONS	MICRODYNA	MICS GROUP	PLE	ERUS
NO.	ITEM	UOM	QTY	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE
1	Auto Sort letters, Data Transfer, Presort List, Print Document, Form Layout, Envelope Cost, Mail Preperation	EA	330,000	\$ 0.10400	\$ 34,320.00	\$ 0.10500	\$ 34,650.00	\$ 0.14900	\$ 49,170.00	\$ 0.09000	\$ 29,700.00	\$ 0.15500	\$ 51,150.00	\$ 0.12283	\$ 40,533.90
2	Percentage Cost and Rate	EA	330,000	\$ 0.47100	\$ 155,430.00	\$ 0.47100	\$ 155,430.00	\$ 0.49800	\$ 164,340.00	\$ 0.56400	\$ 186,120.00	\$ 0.50500	\$ 166,650.00	\$ 0.55200	\$ 182,160.00
				GRAND TOTAL	\$ 189,750.00		\$ 190,080.00		\$ 213,510.00		\$ 215,820.00		\$ 217,800.00		\$ 222,693.90

NOTES

1. There is two (2) change for Plerus bid tab:
a. The Extended Price calcualted for Item 2 (Percentage Cost and Rate) has been corrected to \$182,160.00 = (330,000 x \$.55200).
b. Resulting adjusted Grand Total with a increase of \$944.00 from \$221,749.90 to \$222,693.90.
2. Titan Image Group notified the County that they will not fulfill the contract.

Bid Opening 06/16/2023	NE, NF
Invitations Sent	18
Total Vendors Requesting Documents	3
Total Bid Responses	7

SECTION 7 - BID FORM PRICING

NO	ITEM	UOM	QTY	PRICE	PRICE PRICE
1	Auto Sort letters, Data Transfer, Presort List, Print Document Form Layout, Envelope Cost, Mail Preparation	EA	330,000	.104	\$34,320.00
2	Postage Cost and Rate (Any and all Postage Rate Increases are to be included in the mailing data range)	EA	330,000	.471*	\$155,430.00 *
		1	- d Fisht Nine The	GRAND TOTAL	\$189,750.00 d Fifty Dollars
GR/	AND TOTAL IN WORDS	One Hund	red Eight Nine Tho	usand Seven Hundre	u rnty Donais

^{*} This is an estimated postage. Postage will be charged based on sorting of the job through USPS approved software. This will allow postage discounts to be applied at a per piece level. Postage is billed via postage statement and is a direct pass through cost. Postage is subject to change in accordance with USPS rates.

SECTION 8 - BID FORM SIGNATURE PAGE

The Contractor agrees to provide the service, and/or supplies as described in this solicitation and subject, without limitation, to all specifications, terms, and conditions herein contained. Bidder shall acknowledge receipt of each addendum issued in the space provided on the bid form.

X_	President I GM
	(Signature and Title)

CORPORATE SEAL (If available)

BID MUST BE SIGNED AND NOTARIZED (WITH SEAL) FOR CONSIDERATION

Subscribed and sworn to before me this	day of	AD, 20
(Notary Public)	My Commission Expires:	
	SEAL	

SECTION 9 - MANDATORY FORM ASSESSMENT NOTICE MAILING 23-077-TRES (PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION)

1	Full Name of Bidder	Mail Services LLC)	
	Main Business Address			
		4100 121 st Street	-	
	City, State, Zip Code	Urbandale, IA 503	323	
1	Telephone Number		nail	
1	D:10 / 10	(515)727-7706 Ad	dress infreundamails	ervices la com
	Bid Contact Person	Margaret Freund		
The	undersigned soffice that	J		~···
1116	e undersigned certifies that	ne is:		
	the Owner/Sole Proprietor	a Member authorized to sign on behalf of the Partnership	an Officer of the Corporation	a Member of the Joint Venture
Her	rein after called the Bidder a	and that the members of the Partne	ership or Officers of the Corporation	on are as follows:
	Terry Porter			
	(President or Part	iner)	(Vice-Presider	nt or Partner)
1				
	(Secretary or Part	ner)	(Treasurer or	Partner)
forn of t	t this bid is made without co ns of agreement and the co the Procurement Officer, I	res that the only person or parties in collusion with any other person, firm contract specifications for the above DuPage County, 421 North Cour ioned in the contract documents, s	n or corporation; that he has fully endesignated purchase, all of which ty Farm Road, Wheaton, Illinois	examined the proposed are on file in the office 6 60187, and all other
	lenda No. <u>l.,</u> ,			Control to an administration of the
and	other means of constructi	oses and agrees, if this bid is accep on, including transportation servic ontract documents in the manner a	es necessary to furnish all the ma	ninery, tools, apparatus, aterials and equipment
the	Bidder and in accordance	ies and warrants that he is duly au with the Partnership Agreement or n is binding upon the Bidder and is	by-laws of the Corporation, and t	on/affidavit on behalf of the laws of the State of
eith	ther, the undersigned certifi er 720 Illinois Compiled Sta S 130/1 et seq., the Illinois	es that the Bidder is not barred from tutes 5/33 E-3 or 5/33 E-4, bid rig Prevailing Wage Act.	m bidding on this contract as a res ging or bid-rotating, or as a result	sult of a violation of of a violation of 820
The sub	undersigned certifies that I mitting this bid, and that the	ne has examined and carefully pre e statements contained herein are t	oared this bid and has checked the	e same in detail before

Further, the Bidder certifies that he has provided equipment, supplies, or services comparable to the items specified in this contract to the parties listed in the reference section below and authorizes the County to verify references of business and credit at its option.

If a Corporation, the undersigned, further certifies that the recitals and resolutions attached hereto and made a part hereof were properly adopted by the Board of Directors of the Corporation at a meeting of said Board of Directors duly called and held and have not been repealed nor modified, and that the same remain in full force and effect. (Bidder may be requested to provide a copy of the corporate resolution granting the individual executing the contract documents authority to do so.)



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	23-077-TRES
COMPANY NAME:	Mail Services LLC
CONTACT PERSON:	Nicole Weaver
CONTACT EMAIL:	nweaver@mailserviceslc.com

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

Has	the	e Bidder	made	contribution	ons as	described	above?	
		Yes						

2 No

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

Rev. 1-2025

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

☑ No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL
IVAIVIE	THORE	

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sconer;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- · With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

Ethics | DuPage Co. IL

The full text of the County's Procurement Ordinance is available at:

ARTICLE VI. - PROCUREMENT | Code of Ordinances | DuPage County, IL | Municode Library

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Printed Name: Jerry Porter	Signature:
Title: President/ GM	Date: 07/01/2025

Rev. 4-2025

Change Order



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: 25-1645 Agenda Date: 7/1/2025 Agenda #: 15.F.

HS-P-0009A-25

AMENDMENT TO RESOLUTION HHS-P-0009-25 ISSUED TO DU PAGE HOME OWNERSHIP CENTER DBA H.O.M.E. DU PAGE TO PROVIDE FINANCIAL COUNSELING AND WORKSHOPS TO LOW INCOME RESIDENTS IN DU PAGE COUNTY (INCREASE ENCUMBRANCE \$40,000.00)

WHEREAS, Resolution HS-P-0009-25 was approved and adopted by the County Board on February 11, 2025; and

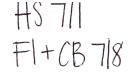
WHEREAS, the Human Services Committee recommends changes as stated in the Change Order Notice to increase contract 7541-0001-SERV in the amount of \$40,000, to the original contract amount of \$46,888 issued to H.O.M.E. DuPage to provide financial counseling and workshops to low-income residents in DuPage County with additional funding to Community Services from the Illinois Department of Commerce and Economic Opportunity (ILDCEO).

NOW, THEREFORE BE IT RESOLVED, that the County Board adopts the Change Order Notice, dated June 23, 2025 to County Contract 7541-0001-SERV, issued to H.O.M.E. DuPage, to increase the encumbrance in the amount of \$40,000 resulting in an amended contract total of \$86,888, an increase of 85.31%.

Enacted and approved this 8th day of July, 2025 at Wheaton, Illinois.

	DEBORAH A. CONROY, CHAIR
	DU PAGE COUNTY BOARD
Attest: _	

JEAN KACZMAREK, COUNTY CLERK





Request for Change Order

Procurement Services Division

Attach copies of all prior Change Orders

Date:	Jun 23, 2025
MinuteTraq (IQM2) ID #:_	

Purchase Order #: 7541	Original Purcha Order Date:	se Jan 1, 2025	Change Order #: 1	Department: Community Services
Vendor Name: DuPage Homeownership Center			Vendor #: 32752	Dept Contact: Mary Keating
Background and/or Reason for Change Order Request:	00 to line 1 (5000 1650) 53820 25-231	028). The new contract tot	al is now increased to \$86,888.
	IN A	CCORDANCE	WITH 720 ILCS 5/33E-9	
(A) Were not reasonably fo	reseeable at the time the	e contract was si	gned.	
(B) The change is germane				
\bigcirc (C) Is in the best interest fo	r the County of DuPage	and authorized b	y law.	
		INCREAS	E/DECREASE	
A Starting contract value				\$46,888.00
B Net \$ change for previou	is Change Orders			\$0.00
C Current contract amount	t (A + B)			\$46,888.00
D Amount of this Change (Order		Decrease	\$40,000.00
E New contract amount (C	+ D)			\$86,888.00
F Percent of current contra	ct value this Change Ord	der represents (D	/ C)	85.31%
G Cumulative percent of al	Change Orders (B+D/A);	(60% maximum o	n construction contracts)	85.31%
		DECISION MEN	10 NOT REQUIRED	
Change budget code from: Increase/Decrease quantity Price shows: Decrease remaining encurrand close contract	from: to	:ould be:encumbrance	to:to:	nbrance
		DECISION M	EMO REQUIRED	
Increase (greater than 29 da	ays) contract expiration f	rom:	to:	
✓ Increase ≥ \$2,500.00, or ≥ 1 OTHER - explain below:	0%, of current contract a	mount Fun	ding Source	
Lan Prepared By (Initials)		Jun 23, 2025 Date	Recommended for Approva	6457 (1/24/25 Phone Ext Date
		REVIEWED B	Y (Initials Only)	
Buyer	Date		Procurement Officer	6/26/2025 Date
Chief Financial Officer (Decision Memos Over \$25,000)	Date		Chairman's Office (Decision Memos Over \$25	6,000) Date

AMENDMENT TO AGREEMENT BETWEEN THE COUNTY OF DUPAGE AND H.O.M.E. DUPAGE, INC. FOR COMMUNITY SERVICE BLOCK GRANT FUNDS

The following amendments are attached and made a part of the contract between the COUNTY OF DUPAGE, ILLINOIS ("COUNTY") and H.O.M.E. DUPAGE, INC. (the "SUBGRANTEE") and shall be considered a part of a certain Agreement entitled "AGREEMENT BETWEEN THE COUNTY OF DUPAGE AND H.O.M.E. DUPAGE, INC. FOR COMMUNITY SERVICE BLOCK GRANT FUNDS," and with the amendments included herein, shall constitute the entire Agreement between the parties.

A. In lieu of Section I of the Agreement, titled "Statement of Purpose," it is agreed that the following paragraph is hereby substituted:

The COUNTY has applied for and received federal Community Service Block Grant ("CSBG"). Funds as provided by the Community Services Block Grant Program Act (42 U.S.C.A. § 9901, et. seq.) and administered by the Illinois Department of Commerce and Economic Opportunity ("DCEO"), pursuant to Illinois Economic Opportunity Act (20 ILCS 625/1 et. seq.). SUBGRANTEE desires and hereby elects to participate as a SUBGRANTEE of the aforesaid CSBG Funds allocated to COUNTY. COUNTY has considered and approved the application of the SUBGRANTEE and hereby agrees to distribute to SUBGRANTEE funding in the amount and under the conditions hereafter provided.

B. In lieu of Section II of the Agreement, titled "Statement of Purpose," it is agreed that the following is hereby substituted:

In consideration of receiving CSBG funds from the COUNTY, the SUBGRANTEE shall perform the following activities for the benefit of the COUNTY in a timely fashion:

- 1. Conduct outreach to notify the community of programs.
- 2. Accept referred clients from DuPage County Department of Community Services, CSBG Sub-grantees, and community agencies to provide financial fitness workshops, budgeting seminars, and credit repair services to DuPage County residents.
- 3. Counselors will develop goals, prescribe workshops, establish a budget, and develop an action plan with clients.
- 4. Counselors will meet with clients regularly to monitor progress and provide guidance.
- 5. Provide workshops and/or training on financial literacy, credit repair, and income management.
- 6. Provide individual financial counseling and income management counseling to referred clients.
- 7. Provide new credit repair program: obtain credit reports, create credit action plan, assist with disputing inaccuracies, and negotiate with creditors.
- 8. Maintain CSBG files with 30-day income, proof of household members, self-sufficiency scale, and proof of DuPage County residency.
- 9. Provide DuPage County Department of Community Services with intake sheets within 30 days of enrollment and recertify clients at 1-year anniversary date of enrollment if still active in program.
- 10. Provide DuPage County Department of Community Services quarterly updates on client milestones and outcomes.

- 11. Provide DuPage County Department of Community Services with the Agency's Annual audit and provide proof of Unique Entity ID generated by SAMS.gov.
- 12. Participate in the DuPage County Department of Community Service's CSBG Needs Assessment via client surveys, focus groups, client data and agency/board surveys.
- 13. Invoice DuPage County Department of Community Services, at least, quarterly for services, invoice must provide details of costs.
- 14. Sign Sub-grantee agreement with DuPage County Department of Community Services to provide CSBG services.
- 15. Update 211dupage.gov annually with agency referral information by 4/1/25.
- C. In lieu of Section III of the Agreement, titled "Amount of Grant," it is agreed that the following paragraph is hereby substituted:

The COUNTY shall grant to SUBGRANTEE, as full payment for all activities to be performed by SUBGRANTEE pursuant to this AGREEMENT, a maximum compensation of \$86,888.00 for program support and direct client assistance. Invoices must be submitted at least quarterly, by April 15th, July 15th, October 15th, and must include supporting documentation for expenses billed. Final invoice must be submitted by January 16, 2026.

IN THE WITNESS, WHEREOF, each party to this Amendment has caused it to be executed on the date(s) indicated below.

H.O.M.E. DUPAGE, INC. ("SUBGRANTEE")
Signature on File
SIGNED:
BY: * Maria Luengas
TITLE: Executive Director
DATE: 6/18/25

HOME 2025 MOD Amendment.doc



CONTACT EMAIL:

Section I: Contact Information

DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Please complete the contact information below. BID NUMBER: COMPANY NAME: Dulage Hancownevship Contact Dulage Contact PERSON: And O'Day

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

Has the Bidder made contributions as	described above?
--------------------------------------	------------------

	Yes
6	No

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE
				M.

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

No (CD)

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL
		1

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

http://www.dupagecounty.gov/government/county_board/ethics_at_the_county/

The full text of the County's Procurement Ordinance is available at:

https://www.dupagecounty.gov/government/departments/finance/procurement/procurement ordinance and guiding principles.php

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Signature on File

Printed Name:

Signature.

Title:

Date:

Change Order





File #: 25-1646 Agenda Date: 7/1/2025 Agenda #: 15.G.

HS-P-0005A-25

AMENDMENT TO RESOLUTION HS-P-0005-25 ISSUED TO GARDENWORKS PROJECT TO PLAN, BUILD, PROMOTE, AND SUSTAIN COMMUNITY GARDENS IN DUPAGE COUNTY (INCREASE ENCUMBRANCE \$4,992.00)

WHEREAS, Resolution HS-P-0005-25 was approved and adopted by the County Board on February 11, 2025; and

WHEREAS, the Human Services Committee recommends changes as stated in the Change Order Notice to increase contract 7531-0001-SERV in the amount of \$4,992, to the original contract amount of \$70,000 issued to Gardenworks Project, to plan, promote, and sustain community gardens in DuPage County with additional funding to Community Services from the Illinois Department of Commerce and Economic Opportunity (ILDCEO).

NOW, THEREFORE BE IT RESOLVED, that the County Board adopts the Change Order Notice, dated June 23, 2025 to County Contract 7531-0001-SERV, issued to Gardenworks Project, to increase the encumbrance in the amount of \$4,992 resulting in an amended contract total of \$74,992, an increase of 7.13%.

Enacted and approved this 8 th day of July, 2025 at Wheaton, Illinois.
DEBORAH A. CONROY, CHAIR DU PAGE COUNTY BOARD
Attest:

JEAN KACZMAREK, COUNTY CLERK



Request for Change Order

Procurement Services Division

Attach copies of all prior Change Orders

HS 711	5
FI+ CB	7/8

Date: 06/23/255
MinuteTraq (IQM2) ID #:

	Origina	I Dunch a c			
Purchase Order #: 7531 Original Purchase Jan 1, 202		Jan 1, 2025	Change Order #: 2	Department: Commu	unity Service
Vendor Name: Gardenworks Project			Vendor #: 42556	Dept Contact: Mary K	eating
Background and/or Reason for Change Order Request:	Add \$4,992 to line 1 (500 budget is attached with		28). The new contract tota	l is now increased to S	574,992. Revised
		IN ACCORDANCE	WITH 720 ILCS 5/33E-9		
(A) Were not i	easonably foreseeable at the	e time the contract was sig	gned.		
(B) The chang	e is germane to the original	contract as signed.			
(C) Is in the be	est interest for the County of	DuPage and authorized b	y law.		
		INCREAS	E/DECREASE	***************************************	
A Starting cor	ntract value				\$70,000.00
B Net \$ chang	je for previous Change Orde	rs			\$0.00
C Current cor	tract amount (A + B)				\$70,000.00
D Amount of	this Change Order		Decrease		\$4,992.00
E New contra	ct amount (C + D)				\$74,992.00
F Percent of c	urrent contract value this Ch	nange Order represents (D) / C)		7.13%
G Cumulative	percent of all Change Order	s (B+D/A); (60% maximum or	n construction contracts)		7.13%
		DECISION MEM	10 NOT REQUIRED		
Cancel entire	order	Close Contract	Contract Extension	(29 days) (29 days)	
Change budg	et code from:		to:		
	ease quantity from:			The second secon	
Price shows:		should be:			
Decrease remaining encumbrance and close contract Increase encumbrance and close contract Decrease encumbrance Increase Encumbrance I					se encumbrance
		DECISION M	EMO REQUIRED		
Increase (grea	ter than 29 days) contract ex	piration from:	to:		
Increase ≥ \$2,	500.00 , or $\geq 10\%$, of current of	contract amount Fun	ding Source		
OTHER - expla	n below:	_			
			Management of the second of th	_	
			1	-	
			a BX	50.50	11.1
Lan Nguyen Prepared By (Initia	ls) 6131 Phone Ext	Jun 23, 2025	- XIDIT	6457	
	is) Prione ext		Recommended for Approv	al (Initials) Phone Ext	Date
		REVIEWED B	Y (Initials Only)		
			×		6/26/2020
Buyer		Date	Procurement Officer		Date
Chief Financial Off	icer		Chairman's Office		
(Decision Memos Over \$25,000) Date			(Decision Memos Over \$2	5,000)	Date

AMENDMENT TO AGREEMENT BETWEEN THE COUNTY OF DUPAGE AND GARDENWORKS PROJECT FOR COMMUNITY SERVICE BLOCK GRANT FUNDS

The following amendments are attached and made a part of the contract between the COUNTY OF DUPAGE, ILLINOIS ("COUNTY") and GARDENWORKS PROJECT (the "SUBGRANTEE") and shall be considered a part of a certain Agreement entitled "AGREEMENT BETWEEN THE COUNTY OF DUPAGE AND GARDENWORKS PROJECT FOR COMMUNITY SERVICE BLOCK GRANT FUNDS," and with the amendments included herein, shall constitute the entire Agreement between the parties.

A. In lieu of Section I of the Agreement, titled "Statement of Purpose," it is agreed that the following paragraph is hereby substituted:

The COUNTY has applied for and received federal Community Service Block Grant ("CSBG") Funds as provided by the Community Services Block Grant Program Act (42 U.S.C.A. § 9901, et. seq.) and administered by the Illinois Department of Commerce and Economic Opportunity ("DCEO"), pursuant to Illinois Economic Opportunity Act (20 ILCS 625/1 et. seq.). SUBGRANTEE desires and hereby elects to participate as a SUBGRANTEE of the aforesaid CSBG Funds allocated to COUNTY. COUNTY has considered and approved the application of the SUBGRANTEE and hereby agrees to distribute to SUBGRANTEE funding in the amount and under the conditions hereafter provided.

B. In lieu of Section II of the Agreement, titled "Statement of Purpose," it is agreed that the following is hereby substituted:

In consideration of receiving CSBG funds from the COUNTY, the SUBGRANTEE shall perform the following activities for the benefit of the COUNTY in a timely fashion:

- 1. SUBGRANTEE will conduct outreach to notify community of program.
- SUBGRANTEE will purchase supplies and materials needed to install 2 Community Gardens.
- 3. SUBGRANTEE will install 2 Community Gardens in identified Communities.
- 4. SUBGRANTEE will oversee management of the gardens with the aim for self-sufficiency by year 3 through leadership and volunteer development.
- 5. SUBGRANTEE will create a plan for distribution of food from the 2 Community Gardens.
- 6. SUBGRANTEE will create educational material and establish the "Grown a Row" Program to spread awareness.
- 7. SUBGRANTEE will promote awareness of Fresh Food Connect App connecting local gardeners to hunger relief organizations.
- 8. SUBGRANTEE will ensure partners continue to meet quarterly to plan for the next 2 Community Gardens.
- SUBGRANTEE will submit quarterly progress reports to COUNTY on progress of the program.
- SUBGRANTEE will invoice COUNTY quarterly for services, invoice must provide details of costs incurred.

- 11. SUBGRANTEE will provide COUNTY SUBGRANTEE's annual audit and proof of enrollment with SAM.gov/Unique Entity ID.
- 12. SUBGRANTEE will participate in the DuPage County Department of Community Service's CSBG Needs Assessment via client surveys, focus groups, client data and agency/board surveys.
- 13. SUBGRANTEE will update 211dupage.gov annually with agency referral information by 12/31/2025.
- 14. SUBGRANTEE will comply with all assurances as further detailed in Exhibit "A," attached hereto and incorporated herein as part of this Agreement.
- C. In lieu of Section III of the Agreement, titled "Amount of Grant," it is agreed that the following paragraph is hereby substituted:

The COUNTY shall grant to SUBGRANTEE, as full payment for all activities to be performed by SUBGRANTEE pursuant to this AGREEMENT, a maximum compensation of \$74,992.00 for program support. Invoices must be submitted at least quarterly, by April 15th, July 15th, October 15th, and must include supporting documentation for expenses billed. Final invoice must be submitted by January 16, 2026.

IN THE WITNESS, WHEREOF, each party to this Amendment has caused it to be executed on the date(s) indicated below.

GARDENWORKS PROJECT ("SUBGRANTEE")	
Signature on File	
SIGNED:	
BY: Teri Wood	
TITLE: Executive Director	
DATE: 6/18/25	

GWP 2025 MOD Amendment.doc



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

BID NUMBER:	PO#7531
COMPANY NAME:	The GardenWorks Project
CONTACT PERSON:	Teri Wood
CONTACT EMAIL:	teri@gardenworksproject.org

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

Has the	Ridder ma	de contribution	s as described	above?



If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

Rev. 1-2025

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and

contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts.

Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
 30 days prior to the optional renewal of any contract;
- · Annual disclosure for multi-year contracts on the anniversary of said contract
- · With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

http://www.dupagecounty.gov/government/county_board/ethics_at_the_county/

The full text of the County's Procurement Ordinance is available at:

https://www.dupagecounty.gov/government/departments/finance/procurement/procurement ordinance and guiding principles.php

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Printed Name: TCN WOOD	Signature:
Title: Executive Director	Date: 6/18/2025

Change Order



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: 25-1647 Agenda Date: 7/1/2025 Agenda #: 15.H.

HS-P-0008A-25

AMENDMENT TO RESOLUTION HS-P-0008-25 ISSUED TO OUTREACH COMMUNITY SERVICES TO PROVIDE JOB SKILL TRAINING TO LOW INCOME YOUTH RESIDING IN DUPAGE COUNTY (INCREASE ENCUMBRANCE \$15,000.00)

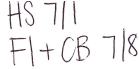
WHEREAS, Resolution HS-P-0008-25 was approved and adopted by the County Board on February 11, 2025; and

WHEREAS, the Human Services Committee recommends changes as stated in the Change Order Notice to increase contract 7522-0001-SERV in the amount of \$15,000, to the original contract amount of \$100,000 issued to Outreach Community Services, to provide job skill training to low-income youth residing in DuPage County with additional funding to Community Services from the Illinois Department of Commerce and Economic Opportunity (ILDCEO).

NOW, THEREFORE BE IT RESOLVED, that the County Board adopts the Change Order Notice, dated June 23, 2025 to County Contract 7522-0001-SERV, issued to Outreach Community Services, to increase the encumbrance in the amount of \$15,000, resulting in an amended contract total of \$115,000, an increase of 15%.

Enacted and approved this 8th day of July, 2025 at Wheaton, Illinois.

	DEBORAH A. CONROY, CHAIR DU PAGE COUNTY BOARD
Attest:	
	IEAN KACZMAREK COUNTY CLERK



MinuteTraq (IQM2) ID #:

Jun 23, 2025



Request for Change Order

Purchase Order #	: 7522 Original F	Purchase Jan 1, 2025	Change Order #: 1	Department: Com	munity Service
	0.00.00	te:			,
Vendor Name: O	JTREACH COMMUNITY		Vendor #: 10224	Dept Contact: Mar	y Keating
Background and/or Reason for Change Order Request:	Add \$15,000 to line 1 (500	0 1650 53820 25-2310	028). The contract is now i	ncreased to \$115,00	00.
		IN ACCORDANCE V	WITH 720 ILCS 5/33E-9		
(A) Were not re	easonably foreseeable at the t	ime the contract was sig	gned.		
(B) The change	e is germane to the original co	ntract as signed.			
\bigcirc (C) Is in the be	st interest for the County of D	uPage and authorized b	y law.		
<u>.</u>		INCREAS	E/DECREASE		
A Starting con	tract value				\$100,000.00
B Net \$ chang	e for previous Change Orders				\$0.00
C Current conf	tract amount (A + B)				\$100,000.00
D Amount of t	his Change Order		Decrease		\$15,000.00
E New contrac	t amount (C + D)				\$115,000.00
F Percent of co	urrent contract value this Chai	nge Order represents (D	/ C)		15.00%
G Cumulative	percent of all Change Orders (B+D/A); (60% maximum on	construction contracts)		15.00%
		DECISION MEM	IO NOT REQUIRED		
Cancel entire of	order Cl	ose Contract	Contract Extension	(29 days)	Consent Only
Change budge	et code from:		to:		
Increase/Decre	ease quantity from:	to:			
Price shows:		should be:			
Decrease rema		crease encumbrance d close contract	Decrease encu	mbrance	rease encumbrance
		DECISION MI	EMO REQUIRED		
Increase (great	er than 29 days) contract expi	ration from:	to:		
 Increase ≥ \$2,5	00.00, or ≥ 10%, of current co	ntract amount Fund	ding Source		
OTHER - explain					
		X1100000			
			0/180		3 / 1
Lan Nguyen Prepared By (Initial	6131 s) Phone Ext	Jun 23, 2025	Possessed of the Assessed	6457	6/24/25
riepared by (illitial	5) PHONE EXC	Date	Recommended for Approv	ral (Initials) Phone Ex	d Date
		REVIEWED B	Y (Initials Only)		
			×	* _	6/26/2020
Buyer		Date	Procurement Officer		Date
Chief Financial Offi	cer		Chairman's Office		
(Decision Memos C		Date	(Decision Memos Over \$2	5,000)	Date

AMENDMENT TO AGREEMENT BETWEEN THE COUNTY OF DUPAGE AND OUTREACH COMMUNITY SERVICES FOR COMMUNITY SERVICE BLOCK GRANT FUNDS

The following amendments are attached and made a part of the contract between the COUNTY OF DUPAGE, ILLINOIS ("COUNTY") and OUTREACH COMMUNITY SERVICES (the "SUBGRANTEE"), and shall be considered a part of a certain Agreement entitled "AGREEMENT BETWEEN THE COUNTY OF DUPAGE AND OUTREACH COMMUNITY SERVICES FOR COMMUNITY SERVICE BLOCK GRANT FUNDS," and with the amendments included herein, shall constitute the entire Agreement between the parties.

A. In lieu of Section I of the Agreement, titled "Statement of Purpose," it is agreed that the following paragraph is hereby substituted:

The COUNTY has applied for and received federal Community Service Block Grant ("CSBG") Funds as provided by the Community Services Block Grant Program Act (42 U.S.C.A. § 9901, et. seq.) and administered by the Illinois Department of Commerce and Economic Opportunity ("DCEO"), pursuant to Illinois Economic Opportunity Act (20 ILCS 625/1 et. seq.). SUBGRANTEE desires and hereby elects to participate as a SUBGRANTEE of the aforesaid CSBG Funds allocated to COUNTY. COUNTY has considered and approved the application of the SUBGRANTEE and hereby agrees to distribute to SUBGRANTEE funding in the amount and under the conditions hereafter provided.

B. In lieu of Section II of the Agreement, titled "Statement of Purpose," it is agreed that the following is hereby substituted:

In consideration of receiving CSBG funds from the COUNTY, the SUBGRANTEE shall perform the following activities for the benefit of the COUNTY in a timely fashion:

- 1. SUBGRANTEE will conduct outreach to notify community of program.
- SUBGRANTEE determines eligibility and enroll 22 participants in program.
- 3. SUBGRANTEE will provide supportive services, counseling, job skill training, work readiness training, work experience and other referrals as needed.
- 4. SUBGRANTEE will follow progress of participant for up to 48 months.
- 5. SUBGRANTEE will maintain client file which will contain 30-day income, proof of DuPage County residency, proof of household members, documentation of trainings, self-sufficiency scale, and outcomes.
- 6. SUBGRANTEE will provide COUNTY with intake sheets as clients are enrolled and recertify clients at 1-year anniversary date of enrollment, if still in program.
- 7. SUBGRANTEE will partner with H.O.M.E. DuPage to provide financial literacy to clients enrolled in program.
- 8. SUBGRANTEE will provide COUNTY quarterly updates on client milestones and outcomes.
- 9. SUBGRANTEE will invoice COUNTY, at least, quarterly for services, invoice must provide details of costs.
- 10. SUBGRANTEE participates in the COUNTY CSBG Community Needs Assessment via client surveys, focus groups, client data and agency/board surveys.

- 11. SUBGRANTEE will complete annual 211dupage.gov update by 10/1/2025.
- 12. SUBGRANTEE will provide DuPage County Department of Community Services with the Agency's Annual audit and provide proof of Unique Entity ID generated by SAMS.gov.
- 13. SUBGRANTEE will comply with all assurances as further detailed in Exhibit "A," attached hereto and incorporated herein as part of this Agreement.
- C. In lieu of Section III of the Agreement, titled "Amount of Grant," it is agreed that the following paragraph is hereby substituted:

The COUNTY shall grant SUBGRANTEE, as full payment for all activities to be performed by SUBGRANTEE pursuant to this AGREEMENT, a maximum compensation of \$115,000.00. Invoices must be submitted at least quarterly, by April 15th, July 15th, October 15th, and must include supporting documentation for expenses billed. All 22 clients must be documented to be paid in full. The final invoice must be submitted no later than January 16, 2026.

IN THE WITNESS, WHEREOF, each party to this Amendment has caused it to be executed on the date(s) indicated below.

County of DuPage ("COUNTY")	Outreach Community Services ("SUBGRANTEE")
SIGNED:	Signature on File SIGNED:
BY: Mary A. Keating	BY: Vanessa Roth
TITLE: Director of Community Services	TITLE: Chief Operating Officer
DATE:	DATE: <u>6/23/2025</u>

OCS 2025 MOD Amendment.doc



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	
COMPANY NAME:	Outreach Community Services
CONTACT PERSON:	Vanessa Roth
CONTACT EMAIL:	Vroth@weareoutreach.org

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

	Has	the	Bidder	made	contributions	as	described	above?
--	-----	-----	--------	------	---------------	----	-----------	--------

Yes

■ No

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE
			9	

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

■ No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

http://www.dupagecounty.gov/government/county board/ethics at the county/

The full text of the County's Procurement Ordinance is available at:

https://www.dupagecounty.gov/government/departments/finance/procurement/procurement ordinance and guiding principles.php

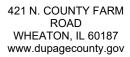
Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Signature on File

Printed Name: Vanessa Roth	Signature:	
Title: Chief Operating Officer	Date: 6/23/25	

HS Requisition \$30,000 and Over





File #: HS-P-0028-25 Agenda Date: 7/1/2025 Agenda #: 15.B.

AWARDING RESOLUTION ISSUED TO ARCOS ENVIRONMENTAL SERVICES, INC., TO PROVIDE MECHANICAL (HVAC) AND ARCHITECTURAL WEATHERIZATION LABOR AND MATERIALS FOR THE COMMUNITY SERVICES WEATHERIZATION PROGRAM (CONTRACT TOTAL AMOUNT: \$135,000)

WHEREAS, proposals have been taken and processed in accordance with County Board policy; and

WHEREAS, Contractor and COUNTY have agreed on terms for the second and final year of a maximum of one renewal to the original agreement; and

WHEREAS, the Human Services Committee recommends County Board approval for the issuance of a contract purchase order to provide mechanical (HVAC) and architectural weatherization labor and materials for Community Services, for the period July 1, 2025 through June 30, 2026, under the PY25/26 Weatherization Program Grants.

NOW, THEREFORE, BE IT RESOLVED that covering said contract to provide mechanical (HVAC) and architectural weatherization labor and materials, for the period July 1, 2025 through June 30, 2026, for Community Services, under the PY25/26 Weatherization Program Grants, per RFP #24-099-WEX, be, and it is hereby approved for the issuance of a contract purchase order by the Procurement Division to Arcos Environmental Services, Inc., Attn: Aaron Villegas, 18500 Spring Creek Drive, Tinley Park, Illinois, 60477, for a contract total not to exceed \$135,000.

Enacted and approved this 8th day of July, 2025	5 at Wheaton, Illinois.
	DEBORAH A. CONROY, CHAIR
	DU PAGE COUNTY BOARD
A	Attest: JEAN KACZMAREK, COUNTY CLERK



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 #: 24-099-WEX	INITIAL TERM WITH RENEWALS: 1 YR + 1 X 1 YR TERM PERIOD	INITIAL TERM TOTAL COST: \$866,434.00
COMMITTEE: HUMAN SERVICES	TARGET COMMITTEE DATE: 07/01/2025	PROMPT FOR RENEWAL: 6 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$1,001,434.00
	CURRENT TERM TOTAL COST: \$135,000.00	MAX LENGTH WITH ALL RENEWALS: TWO YEARS	CURRENT TERM PERIOD: FIRST RENEWAL
Vendor Information		Department Information	
VENDOR: ARCOS ENVIRONMENTAL SERVICES, INC	VENDOR #: 12953	DEPT: COMMUNITY SERVICES	DEPT CONTACT NAME: GINA STRAFFORD-AHMED
VENDOR CONTACT: AARON VILLEGAS	VENDOR CONTACT PHONE: 708-444-0500	DEPT CONTACT PHONE #: 630-407-6444	DEPT CONTACT EMAIL: GINA.STRAFFORD@DUPAGECOUNT Y.GOV
VENDOR CONTACT EMAIL: AARON.ARCOSENVIRONMENTAL.C OM	VENDOR WEBSITE:	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.).

Architectural & Mechanical services for Weatherization Program (grant funded). RFP with predetermined prices from State Market Analysis.

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

Weatherization program provides energy efficiency upgrades and health and safety measures to eligible low-income households.

SECTION 2: DECISION MEMO REQUIREMENTS			
DECISION MEMO NOT REQUIRED RENEWAL	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.		

SECTION 3: DECISION MEMO		
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).	

Form under revision control 05/17/2024 71

	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 F	Requisition Informatio	n
Send Purchase Order To:		Send Invoices To:	
Vendor: ARCOS ENVIRONMENTAL SERVICES, INC	Vendor#: 12953	Dept: COMMUNITY SERVICES	Division: INTAKE & REFERRAL
Attn: AARON VILLEGAS	Email: AARON@ARCOSENVIRONMENTAL.C OM	Attn: GINA STRAFFORD-AHMED	Email: GINA.STRAFFORD@DUPAGECOUNT Y.GOV
Address: 18500 SPRING CREEK DRIVE	City: TINLEY PARK	Address: 421 N COUNTY FARM ROAD	City: WHEATON
State: IL	Zip: 60477	State:	Zip: 60187
Phone: 708-444-0500	Fax:	Phone: 630-407-6444	Fax:
Send Pay	ments To:	Ship to:	
Vendor: SAA	Vendor#:	Dept: SAA	Division:
Attn:	Email:	Attn:	Email:
Address:	City:	Address:	City:
State:	Zip:	State:	Zip:
Phone:	Fax:	Phone:	Fax:
Shipping		Contract Dates	
Payment Terms:	FOB:	Contract Start Date (PO25):	Contract End Date (PO25):
PER 50 ILCS 505/1	Destination	Jul 1, 2025	Jun 30, 2026

Form under revision control 05/17/2024 72

	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		ARCH & MECH 23-461028		5000	1400	53090	23-461028	31,000.00	31,000.00
2	1	EA		ARCH & MECH 25-221028		5000	1430	53090	25-221028	51,000.00	51,000.00
3	1	EA		ARCH & MECH 26-251028		5000	1490	53090	26-251028	30,000.00	30,000.00
4	1	EA		ARCH & MECH RETROFITS25		5000	1555	53090	RETROFITS 25	23,000.00	23,000.00
FY is	FY is required, ensure the correct FY is selected. Requisition Total						\$ 135,000.00				

	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 County of DuPage Finance Department Procurement Division, Room 3-400 421 North County Farm Road Wheaton, Illinois 60187

CONTRACT RENEWAL AGREEMENT

This contract, made and entered into by The County of DuPage, 421 North County Farm Road, Wheaton, Illinois, 60187, hereinafter called the "COUNTY" and Arcos Environmental Services, Inc. located at 18500 Spring Creek Drive, Tinley Park, IL 60477, hereinafter called the "CONTRACTOR", witnesseth;

The COUNTY and the CONTRACTOR have previously entered into a Contract, pursuant to Bid #24-099-WEX which became effective on 10/22/2024 and which will expire 6/30/2025. The contract is subject to the first and final option to renew for a twelve (12) month period.

The contract renewal shall be effective on the date of last signature and shall terminate on 6/30/2026.

The parties now agree to renew said agreement, upon the same terms as previously agreed to, as specified in the original contract.

THE COUNTY OF DUPAGE	CONTRACTOR
	Signature on File
SIGNATURE	SIGNATURE
Sara Rogers PRINTED NAME	Aaron A Villegas PRINTED NAME
Buyer I	President
PRINTED TITLE	PRINTED TITLE
	5/20/2025
DATE	DATE



THE COUNTY OF DUPAGE FINANCE - PROCUREMENT WEATHERIZATION SERVICES (ARCHITECTURAL AND MECHANICAL) FOR SINGLE FAMILY HOMES 24-099-WEX **BID TABULATION**

✓	✓	✓	✓
▼	▼	▼	•

Criteria	Available Points	My Green House HVAC, LLC	Arcos Environmental Services Inc.	Healthy Air Heating & Air, Inc.	Comfort 1st Insulation & Energy Solutions Inc.	Nortek Environmental Inc.
Firm Qualifications	20	19	18	17	15	11
Key Qualifications	50	45	43	43	41	34
Project Understanding	30	30	30	29	29	23
Total	100	94	91	89	85	68

NOTES

- NM Enterprise Inc. has been deemed non-responsive due to not providing required documentation.
 Parliament Builders Inc. has been deemed non-responsive due to not providing required documentation.

RFP Posted on 08/15/2024 Bid Opened On 09/11/2024, 2:30 PM by	DW,BR
Invitations Sent	77
Total Requesting Documents	1
Total Bid Responses Received	7

PROPOSAL FORM WEATHERIZATION SERVICES (ARCHITECTURAL & MECHANICAL) FOR SINGLE FAMILY HOMES 24-099-WEX

Full Name of Offeror	Arcos Environmental Serv	vices, Inc.		
Main Business Address	18500 Spring Creek Drive	9		
City, State, Zip Code	Tinley Park, IL 60477			
Telephone Number	(708) 444-0500			
Fax Number	(708) 444-0502			
Proposal Contact Person	Steve Howard			
Email Address	steve@arcosenvironment	al.com		
are as follows: Aaron A Villegas	e Offeror and that the member	Aaron A Villegas		
		Aaron A Villegas		
(President or Part Partner)	tner)		Vice-President	t or
Aaron A Villegas		Aaron A Villegas		
(Secretary or Par	tner)	(Treasurer or P	'artner)
Further, the undersigned decla herein; that this Proposal is mathe proposed forms of agreeme in the office of the Procurement other documents referred to a Addenda No,	ade without collusion with any ent and the contract specification t Manager, DuPage Center, 42 or mentioned in the contract	other person, firm or corp ons for the above designa 21 North County Farm Ro documents, specification	ooration; that ho ted purchase, a ad, Wheaton, I	e has fully examir all of which are on Ilinois 60187, and
Further, the undersigned propo apparatus and other means of equipment specified or referred Further, the undersigned certifithe Offeror and in accordance to Illinois and that this Certification	f construction, including transp I to in the contract documents it ies and warrants that he is duly with the Partnership Agreeme	portation services necess in the manner and time th y authorized to execute the or by-laws of the Corpe	ary to furnish a erein prescribe his certification/	all the materials a ed. /affidavit on behal
Further, the undersigned certificeither 720 Illinois Compiled Sta of 820 ILCS 130/1 et seq., the I	atutes 5/33 E-3 or 5/33E-4, pro	ed from proposing on this posal rigging or proposal	contract as a r -rotating or as	esult of a violation a result of a viola

THE COUNTY OF DUPAGE
WEATHERIZATION SERVICES (ARCHITECTURAL & MECHANICAL) FOR SINGLE FAMILY HOMES 24-099-WEX Page 45 of 53

The undersigned certifies that he has examined and carefully prepared this proposal and has checked the same in detail before submitting this proposal, and that the statements contained herein are true and correct.

If a Corporation, the undersigned further certifies that the recitals and resolutions attached hereto and made a part hereof were properly adopted by the Board of Directors of the Corporation at a meeting of said Board of Directors duly called and held and have not been repealed, nor modified and that the same remain in full force and effect. (Offeror may be requested to provide a copy of the corporate resolution granting the individual executing the contract documents authority to do so.) Further, the offeror certifies that he has provided services comparable to the items specified in this contract to the parties listed in the reference section below and authorizes the County to verify references of business and credit at its option.

Finally, the offeror, if awarded the contract, agrees to do all other things required by the contract documents, and that he will take in full payment therefore the sums set forth in the cost schedule.

PROPOSAL AWARD CRITERIA

This proposal will be awarded to the most responsive, responsible vendor meeting specifications based upon the highest score compiled during evaluation of the proposals outlined in the selection process.

The Contractor agrees to provide the service described above and in the contract specifications under the conditions outlined in attached documents for the amount stated.

Signature on File

President

CORPORATE SEAL (If available)

PROPOSAL MUST BE SIGNED FOR CONSIDERATION

Subscribed and sworn to before me this 23rd day of AD, 2024

Signature on File

My Commission Expires: 12 24 24 (Notary Public)

OFFICIAL SEAL ALICIA A RYBCZYK NOTARY PUBLIC, STATE OF ILLINOIS My Commission Expires 1/2/8/74

DUPAGE COUNTY DEPARTMENT OF COMMUNITY SERVICES WEATHERIZATION PROGRAM AGREEMENT TO WORK FOR BID PRICES

I, Arcos Environmental Services, Inc. upon by the DuPage County Community Services Weather catalog of the prices and have submitted all of the required	_(contractor) agree to work for the prices that have been agreed prization Program and current contractors. I have been given a paperwork.
Energy Coordinator, DCCSWP Signature on File Contr	Date 8/23/2-/
	Date



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	24-099-WEX	
COMPANY NAME:	Arcos Environmental Services, Inc.	
CONTACT PERSON:	Aaron A Villegas	
CONTACT EMAIL:	aaron@arcosenvironmental.com	

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the es ts, n,

term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purpose
of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultant
bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting perso and political action committees to which the contracting person has made contributions.
Has the Bidder made contributions as described above?

☐ Yes ☑ No

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

☑ No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL	

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

http://www.dupagecounty.gov/government/county_board/ethics_at_the_county/

The full text of the County's Procurement Ordinance is available at:

https://www.dupagecounty.gov/government/departments/finance/procurement/procurement ordinance and guiding principles.php

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Signature on File

Printed Name: Aaron A Villegas	Signature:
Title: President	Date: 5/20/2025

Rev. 1-2025

HS Requisition \$30,000 and Over



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: HS-P-0029-25 Agenda Date: 7/1/2025 Agenda #: 15.C.

AWARDING RESOLUTION ISSUED TO CHICAGO UNITED INDUSTRIES, LTD. TO FURNISH, DELIVER, AND INSTALL ENERGY STAR APPLIANCES FOR THE WEATHERIZATION PROGRAM IN COMMUNITY SERVICES (CONTRACT TOTAL AMOUNT: \$238,000)

WHEREAS, proposals have been taken and processed in accordance with County Board policy; and

WHEREAS, Contractor and COUNTY have agreed on terms for the third and final renewal of a maximum of three renewals to the original agreement; and

WHEREAS, the Human Services Committee recommends County Board approval for the issuance of a contract purchase order to furnish, deliver, and install Energy Star appliances for Community Services, for the period July 1, 2025 through June 30, 2026, under the PY25/26 Weatherization Program Grants.

NOW, THEREFORE, BE IT RESOLVED that covering said contract to furnish, deliver, and install Energy Star appliances, for the period July 1, 2025 through June 30, 2026, for Community Services, under the PY25/26 Weatherization Program Grants, per RFP #22-065-CS be, and it is hereby approved for the issuance of a contract purchase order by the Procurement Division to Chicago United Industries, Ltd., Attn: Gabriela Jaime 505 N. Lake Shore Dr Suite 205, Chicago, Illinois 60611, for a contract total not to exceed \$238,000.

Enacted and approved this 8th day of July, 2025 at V	Wheaton, Illinois.
	DEBORAH A. CONROY, CHAI DU PAGE COUNTY BOAR
Attori	4.
Attest	JEAN KACZMAREK, COUNTY CLER



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 #: 22-065-CS	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: \$67,367.00			
COMMITTEE: HUMAN SERVICES	TARGET COMMITTEE DATE: PROMPT FOR RENEWAL: 6 MONTHS		CONTRACT TOTAL COST WITH ALL RENEWALS: \$440,101.00			
	CURRENT TERM TOTAL COST: \$238,000.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: THIRD RENEWAL			
Vendor Information		Department Information				
VENDOR: CHICAGO UNITED INDUSTRIES, LTD.	VENDOR #: 32599	DEPT: COMMUNITY SERVICES	DEPT CONTACT NAME: GINA STRAFFORD-AHMED			
VENDOR CONTACT: GABRIELA JAIME	VENDOR CONTACT PHONE: 312-786-1471	DEPT CONTACT PHONE #: 630-407-6444	DEPT CONTACT EMAIL: GINA.STRAFFORD@DUPAGECOUNT Y.GOV			
VENDOR CONTACT EMAIL: GJAIME@CUILTD.COM	VENDOR WEBSITE:	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.). Furnish, deliver, and install Energy Star rated appliances with proper disposal for the grant funded Weatherization program.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Weatherization program provides energy efficiency upgrades to eligible low-income households.

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 RENEWAL OF RFP	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 #22-065-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). Approve the change order increase as requested. Do not approve the change order and reduce the ability to assist clients in need. Award the funding to a different vendor without the same qualifications					

	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	se Requisition Informat	ion				
Send Purcha	nse Order To:	Send Invoices To:					
Vendor:	Vendor#:	Dept:	Division:				
CHICAGO UNITED INDUSTRIES, LTD	32599	COMMUNITY SERVICES	INTAKE & REFERRAL				
Attn:	Email:	Attn:	Email:				
GABRIELA JAIME	GJAIME@CUILTD.COM	GINA STRAFFORD-AHMED	GINA.STRAFFORD@DUPAGECOUNT Y.GOV				
Address:	City:	Address:	City:				
505 N LAKE SHORE DRIVE, SUITE 205	CHICAGO	421 N COUNTY FARM ROAD	WHEATON				
State:	Zip:	State:	Zip:				
IL	60611	IL	60187				
Phone:	Fax:	Phone:	Fax:				
312-786-1471		630-407-6444					
Send Pay	ments To:		Ship to:				
Vendor:	Vendor#:	Dept:	Division:				
SAA		SAA					
Attn:	Email:	Attn:	Email:				
Address:	City:	Address:	City:				
State:	Zip:	State:	Zip:				
Phone:	Fax:	Phone:	Fax:				
Ship	pping	Contract Dates					
Payment Terms:	FOB:	Contract Start Date (PO25):	Contract End Date (PO25):				
PER 50 ILCS 505/1	Destination	Jul 1, 2025	Sep 30, 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		APPLIANCES		5000	1430	53090	25-221028	149,000.00	149,000.00
2	1	EA		APPLIANCES		5000	1490	53090	26-251028	89,000.00	89,000.00
FY is	FY is required, ensure the correct FY is selected. Requisition Total						\$ 238,000.00				

	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.					



AMENDMENT FOR CONTRACT RENEWAL

This contract, made and entered into by The County of DuPage, 421 North County Farm Road, Wheaton, Illinois, 60187, hereinafter called the "COUNTY" and Chicago United Industries, Ltd. located at 505 N. Lake Shore Drive, Suite 205, Chicago, IL 60611, hereinafter called the "CONTRACTOR", witnesseth;

The COUNTY and the CONTRACTOR have previously entered into a Contract, pursuant to Bid #22-065-CS which became effective on 7/12/2022 and which will expire 6/30/2025. The contract is subject to a third and final of three options to renew for a twelve (12) month period.

The contract renewal shall be effective on the date of last signature and shall terminate on 6/30/2026.

The parties now agree to renew said agreement, upon the same terms as previously agreed to, as specified in the original contract.

CONTRACTOR Signature on File	THE COUNTY OF DUPAGE
SIGNATURE	SIGNATURE
GABRIELA JAIME	Sara Rogers
PRINTED NAME	PRINTED NAME
CENERAL HANAGER	Buyer I
PRINTED TITLE	PRINTED TITLE
5/22/2025	
DATE	DATE



THE COUNTY OF DUPAGE FINANCE - PROCUREMENT APPLIANCES FOR ILLINOIS HOME WEATHERIZATION ASSISTANCE PROGRAM 22-065-CS BID TABULATION

						Y		
					С	hicago Unit Lt	ed td.	Industries
NO.	ITEM	UOM	QTY	MODEL#		PRICE	E	XTENDED PRICE
Refrige	erator (Energy Star Rated)							
1	15.0 - 15.9 cubic foot (White/Black, Top Freezer)	EA	4	GTE17GT NRWH	\$	1,349.00	\$	5,396.00
2	16.0 - 16.9 cubic foot (White/Black, Top Freezer)	EA	6	GTE17GT NRWH	\$	1,349.00	\$	8,094.00
3	18.0 - 18.9 cubic foot (White/Black, Top Freezer)	EA	10	Frigidaire FFHT1814WB	\$	1,298.00	\$	12,980.00
4	20.0 - 20.9 cubic foot (White/Black, Top Freezer)	EA	14	Frigidaire FFHT2045WV	\$	1,581.00	\$	22,134.00
Jprigh	t Freezer (Energy Star Rated)							
5	17.0 - 17.9 cubic foot (White, upright)	EA	3	GE 17.3 cu ft FUF17DLRWW	\$	1,382.00	\$	4,146.00
6	20.0 - 20.9 cubic foot (White, Upright)	EA	3	GE 21.3 cu ft FUF21DLRWW	\$	1,613.00	\$	4,839.00
Chest	Freezer (Energy Star Rated)							
7	10.0 - 10.9 cubic foot (White)	EA	3	Frigidaire FFCS0922AW	\$	727.00	\$	2,181.00
Gas R	ange							
8	30" Freestanding (White/Black)	EA	5	GE JGBS60DEKWW	\$	1,055.00	\$	5,275.00
Electri	c Range							
9	30" Freestanding (White/Black)	EA	2	GE JB645DKWW	\$	1,161.00	\$	2,322.00
		•	•		GR/	AND TOTAL	\$	67,367.00

- 1. Chicago United Industries Ltd advises that Item 2 as specified is not available, and the proposed substitute is the same as Item
- 2. Chicago United Industries Ltd. advises that Item 7 is not Energy Star Rated.

Bid Opening 06/03/2022 @ 2:30 PM	DW,NE
Invitations Sent	78
Total Vendors Requesting Documents	1
Total Bid Responses	1

SECTION 9 - REQUIRED FORMS TO BE SUBMITTED BID FORM

APPLIANCES FOR ILLINOIS HOME WEATHERIZATION ASSISTANCE PROGRAM 22-065-CS

	(PLEASE TYPE OR PRINT THE FOL	LLOWING INFORMATION)
Full Name of Bidder	CHICAGO UNITED	INDUSTRIES, LTD.
Main Business Addres	505 N. JAKE SHORE	Delue, suitaos
City, State, Zip Code	CHICAGO, KULNO.	
Telephone Number	312-786-1471 Ema	giess giameQuittd.com
Bid Contact Person	WICK MASSAREI	I/A
The undersigned certifies (hat he is:	
the Owner/Sole Proprietor	a Member authorized to sign on behalf of the Partnership	an Officer of the a Member of the Joint Venture
Herein, after called the Bid Signature on File	ier and that the members of the Partner	rship or Officers of the Corporation are as follows:
Signature on File	Partner) 7	(Vice-President or Partner)
(Secretary or	Partner)	(Treasurer or Partner)
of the Procurement Office documents referred to or re-	er, DuPage County, 421 North County	designated purchase, all of which are on file in the office ty Farm Road, Wheaton, Illinois 60187, and all other pecifications and attached exhibits, including
Further, the undersigned pand other means of cons	proposes and agrees, if this bid is accept	ted, to provide all necessary machinery, tools, apparatus, es necessary to furnish all the materials and equipment and time therein prescribed.
Further, the undersigned of the Bidder and in accorda	certifies and warrants that he is duly au	thorized to execute this certification/affidavit on behalf of by-laws of the Corporation, and the laws of the State of
either 720 Illinois Compile ILCS 130/1 et seq., the Illi	d Statutes 5/33 E-3 or 5/33 E-4, bid rig nois Prevailing Wage Act.	m bidding on this contract as a result of a violation of ging or bid-rotating, or as a result of a violation of 820
submitting this bid, and th	at the statements contained herein are t	
were properly adopted by	the Board of Directors of the Corporation	and resolutions attached hereto and made a part hereof on at a meeting of said Board of Directors duly called and remain in full force and effect. (Bidder may be requested at executing the contract documents authority to do so.)

Further, the Bidder certifies that he has provided equipment, supplies, or services comparable to the items specified in this contract to the parties listed in the reference section below and authorizes the County to verify references of business and credit at its option.

Finally, the Bidder, if awarded the contract, agrees to do all other things required by the contract documents, and that he will take in full payment therefore the sums set forth in the bidding schedule (subject to unit quantity adjustments based upon actual usage).

CONTRACT ADMINISTRATION INFORMATION:

CORRESPONDENCE TO CONTRACTOR:		REMIT TO CONTRACTOR:		
NAME	ahicagn United Industries	NAME	Chicago United Industries, et	
CONTACT	NICK MASSARENA	CONTACT	NECK MASSARELIA	
ADDRESS	SOSN. LOKE Shore Dr., Suite 205	ADDRESS	505 N. Lake Shore Dr. SUK205	
CITY ST ZIP	CHICAGOIL 60611	CITY ST ZIP	CHICAGO, 11 60611	
TX		TX		
FX		FX		
EMAIL	nim@cuiHd.com	EMAIL	nmewilld.com	
COUNTY BILL TO INFORMATION:		COUNTY SHI	P TO INFORMATION:	
DuPage County Community Service 421 North County Farm Road Wheaton, IL 60187 TX: (630) 407-6193		DuPage County 421 North County Farm Road Wheaton, IL 60187 TX: (630) 407-6469 EMAIL: david.watkins@dupageco.org		

ALL MATERIALS MUST BE BID AND SHIPPED F.O.B. DELIVERED (FREIGHT INCLUDED IN PRICE)

SECTION 7 - BID FORM PRICING

NO	ITEM	UOM	QTY	MODEL#	PRICE	EXTENDED PRICE
Refrige	Refrigerator (Energy Star Rated)					
1	15.0 - 15.9 cubic foot (White/Black, Top Freezer)	EA	4	BTEI7GT NRWH	\$ 1,349,00	\$ 5,396.00
2	16.0 - 16.9 cubic foot (White/Black, Top Freezer)	EA	6	GTE ITGT NRWH	\$ 1,349.00	\$ 8,094.00
3	18.0 - 18.9 cubic foot (White/Black, Top Freezer)	EA	10	Frigidaire FFHT1814	\$ 1,298.00	\$ 12,980.00
4	20.0 - 20.9 cubic foot (White/Black, Top Freezer)	EA	14	Frigidaire FFHT2045 VW	\$ 1,581.00	\$ 22,134,00
Upright	Freezer (Energy Star Rated)				<u> </u>
5	17.0 - 17.9 cubic foot (White, upright)	EA	3	GE IT3 cuft FUF 17DLR NN	* 11 OCE.CO	\$ 4,146.00
6	20.0 - 20.9 cubic foot (White, Upright)	EA	3	GE 21.3 CUFT FUFQIDLR WW	\$ 1,613.00	\$ 4,839.00
Chest F	reezer (Energy Star Rated)					
7	10.0 - 10.9 cubic foot (White)	EA	3	FFCSO922AW	\$ 727.00	\$ 2,181.00
Gas Ra	ange				·	
8	30" Freestanding (White/Black)	EA	5	JEBSLODEKNA	\$ 1,055,00	\$ 5,275.00
Electric	Electric Range					
9	30" Freestanding (White/Black)	EA	2	JB642DKNW	\$ 1,161.00	\$ 2,322.00
					GRAND TOTAL	\$67,367.00
GRAND TOTAL SIXTY SEVEN THOUSAND THREE HUNDRED SIXTY SEVEN (In words) 00/100 -						

NOTES: ITEM #1 - NOT AVAILABLE INTHIS SIZE. WE ARE OVOTING SAME AS ITEM #2.

MEM #7 - THIS MEM IS NOT E-STAR

SECTION 8 - BID FORM SIGNATURE PAGE

The Contractor agrees to provide the service, and/or supplies as described in this solicitation and subject, without limitation, to all specifications, terms, and conditions herein contained. Bidder shall acknowledge receipt of each addendum issued in the space provided on the bid form.

Signature on File (Signature and Tit	General Ma	Mage
		CORPORATE SEAL (If available)
BID MUST BE SIG	NED AND NOTARIZED (WITH SEAL) F	OR CONSIDERATION
Subscribed and sworn to before me this Signature on File	is 2nd day of June	AD, 20 <u>22</u>
	My Commission Expires:	2/15/2026
(Notary Public)	"OFFICIAL SEAL" MICHELLE POWER Notary Public, State of Illinois My Commission Expires 02/15/2026 SEAL	



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	22-065-CS
COMPANY NAME:	CHICAGO UNITED INDUSTRIES, LTD)
CONTACT PERSON:	GABRIELA JAIME
CONTACT EMAIL:	gizime @cuiltd.com

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

?

Yes
No

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

Rev. 1-2025

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

No.

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

	PHONE	EMAIL
NAME	PHONE	
1		İ
		ļ

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

http://www.dupagecounty.gov/government/county_board/ethics_at_the_county/

The full text of the County's Procurement Ordinance is available at:

https://www.dupagecounty.gov/government/departments/finance/procurement/procurement_ordinance_and_guiding_ principles.php

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge. Signature on File

GABRIELA JAIME Signatur DENERAL JANAGER Date:

5/22/2025

HS Requisition \$30,000 and Over





File #: HS-P-0030-25 Agenda Date: 7/1/2025 Agenda #: 15.D.

AWARDING RESOLUTION ISSUED TO HEALTHY AIR HEATING & AIR, INC. TO PROVIDE MECHANICAL (HVAC) AND ARCHITECTURAL WEATHERIZATION LABOR AND MATERIALS FOR THE COMMUNITY SERVICES WEATHERIZATION PROGRAM (CONTRACT TOTAL AMOUNT: \$135,000)

WHEREAS, proposals have been taken and processed in accordance with County Board policy; and

WHEREAS, Contractor and COUNTY have agreed on terms for the second and final year of a maximum of one renewal to the original agreement; and

WHEREAS, the Human Services Committee recommends County Board approval for the issuance of a contract purchase order to provide mechanical (HVAC) and architectural weatherization labor and materials for Community Services, for the period July 1, 2025 through June 30, 2026, under the PY25/26 Weatherization Program Grants.

NOW, THEREFORE, BE IT RESOLVED that covering said contract to provide mechanical (HVAC) and architectural weatherization labor and materials, for the period July 1, 2025 through June 30, 2026, for Community Services under the PY25/26 Weatherization Program Grants, per RFP renewal #24-099-WEX, be, and it is hereby approved for the issuance of a contract purchase order by the Procurement Division to Healthy Air Heating & Air, Inc., Attn: Piotr Blaszczyk, 124 N. Bloomingdale Road, Bloomingdale, Illinois 60108, for a contract total not to exceed \$135,000.

Enacted and appr	oved this 8 th da	y of July, 202	25 at W	heaton, Illinois.
				DEBORAH A. CONROY, CHAII DU PAGE COUNTY BOARI
			Attest:	
				JEAN KACZMAREK, COUNTY CLERK



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 #: 24-099-WEX	INITIAL TERM WITH RENEWALS: 1 YR + 1 X 1 YR TERM PERIOD	INITIAL TERM TOTAL COST: \$866,434.00		
COMMITTEE: HUMAN SERVICES	TARGET COMMITTEE DATE: 07/01/2025	PROMPT FOR RENEWAL: 6 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$1,001,434.00		
	CURRENT TERM TOTAL COST: \$135,000.00	MAX LENGTH WITH ALL RENEWALS: TWO YEARS	CURRENT TERM PERIOD: FIRST RENEWAL		
Vendor Information		Department Information			
VENDOR: HEALTHY AIR HEATING & AIR INC	VENDOR #: 14166	DEPT: COMMUNITY SERVICES	DEPT CONTACT NAME: GINA STRAFFORD-AHMED		
VENDOR CONTACT: PIOTR BLASZCZYK	VENDOR CONTACT PHONE: 630-980-4575	DEPT CONTACT PHONE #: 630-407-6444	DEPT CONTACT EMAIL: GINA.STRAFFORD@DUPAGECOUNT Y.GOV		
VENDOR CONTACT EMAIL: HEALTHYAIRHEATINGANDAIR@GM AIL.COM	VENDOR WEBSITE:	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.).

Architectural & Mechanical services for Weatherization Program (grant funded). RFP with predetermined prices from State Market Analysis.

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

Weatherization program provides energy efficiency upgrades and health and safety measures to eligible low-income households.

	SECTION 2: DECISION MEMO REQUIREMENTS
DECISION MEMO NOT REQUIRED RENEWAL	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.

	SECTION 3: DECISION MEMO					
SOURCE SELECTION	Describe method used to select source.					
4410	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.				

SECTION 5: Purchase Requisition Information					
Send Purch	ase Order To:	Send Invoices To:			
Vendor: HEALTHY AIR HEATING & AIR, INC	Vendor#: 14166	Dept: COMMUNITY SERVICES	Division: INTAKE & REFERRAL		
Attn: PIOTR BLASZCZYK	Email: HEALTHYAIRHEATINGANDAIR@GM AIL.COM	Attn: GINA STRAFFORD-AHMED	Email: GINA.STRAFFORD@DUPAGECOUNT Y.GOV		
Address: 124 N BLOOMINGDALE ROAD	City: BLOOMINGDALE	Address: 421 N COUNTY FARM ROAD	City: WHEATON		
State:	Zip: 60108	State:	Zip: 60187		
Phone: 630-980-4575	Fax: 630-980-5577	Phone: 630-407-6444	Fax:		
Send Pa	yments To:	Ship to:			
Vendor: SAA	Vendor#:	Dept: SAA	Division:		
Attn:	Email:	Attn:	Email:		
Address:	City:	Address:	City:		
State:	Zip:	State:	Zip:		
Phone: Fax:		Phone:	Fax:		
Shi	_ pping	Contra	 act Dates		
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Jul 1, 2025 Contract End Date (PO25): Jun 30, 2026			

					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		ARCH & MECH 23-461028		5000	1400	53090	23-461028	31,000.00	31,000.00
2	1	EA		ARCH & MECH 25-221028		5000	1430	53090	25-221028	51,000.00	51,000.00
3	1	EA		ARCH & MECH 26-251028		5000	1490	53090	26-251028	30,000.00	30,000.00
4	4 1 EA ARCH & MECH RETROFITS25 5000 1555 53090 RETROFITS 23,000.00 23,000.00										
FY is	require	d, ensure	the correct FY i	s selected.						Requisition Total	\$ 135,000.00

	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 County of DuPage Finance Department Procurement Division, Room 3-400 421 North County Farm Road Wheaton, Illinois 60187

CONTRACT RENEWAL AGREEMENT

This contract, made and entered into by The County of DuPage, 421 North County Farm Road, Wheaton, Illinois, 60187, hereinafter called the "COUNTY" and Healthy Air Heating & Air, Inc., located at 124 N. Bloomingdale Rd., Bloomingdale, IL 60108 hereinafter called the "CONTRACTOR", witnesseth:

The COUNTY and the CONTRACTOR have previously entered into a Contract, pursuant to Bid #24-099-WEX which became effective on 10/22/2024 and which will expire 6/30/2025. The contract is subject to the first and final option to renew for a twelve (12) month period.

The contract renewal shall be effective on the date of last signature and shall terminate on 6/30/2026.

The parties now agree to renew said agreement, upon the same terms as previously agreed to, as specified in the original contract.

THE COUNTY OF DUPAGE	CONTRACTOR Signature on File
SIGNATURE	SIGNATURE
Sara Rogers	Piotr Blaszczyk
PRINTED NAME	PRINTED NAME
Buyer I	President
PRINTED TITLE	PRINTED TITLE
DATE	6/13/2025
Cir C C	



THE COUNTY OF DUPAGE **FINANCE - PROCUREMENT** WEATHERIZATION SERVICES (ARCHITECTURAL AND MECHANICAL) FOR SINGLE FAMILY HOMES 24-099-WEX **BID TABULATION**

	/		
\checkmark	✓	✓	✓

Criteria	Available Points	My Green House HVAC, LLC	Arcos Environmental Services Inc.	Healthy Air Heating & Air, Inc.	Comfort 1st Insulation & Energy Solutions Inc.	Nortek Environmental Inc.
Firm Qualifications	20	19	18	17	15	11
Key Qualifications	50	45	43	43	41	34
Project Understanding	30	30	30	29	29	23
Total	100	94	91	89	85	68

NOTES

- NM Enterprise Inc. has been deemed non-responsive due to not providing required documentation.
 Parliament Builders Inc. has been deemed non-responsive due to not providing required documentation.

RFP Posted on 08/15/2024	
Bid Opened On 09/11/2024, 2:30 PM	DW,BR
by	
Invitations Sent	77
Total Requesting Documents	1
Total Bid Responses Received	7

PROPOSAL FORM WEATHERIZATION SERVICES (ARCHITECTURAL & MECHANICAL) FOR SINGLE FAMILY HOMES 24-099-WEX

Fuil Name of Offeror	Healthy Air Heating	& Air, Inc.		
Main Business Address	124 N Bloomingdale	e Rd		
City, State, Zip Code	BLOOMINGDALE, II	L 60108		
Telephone Number 630-980-4575				
Fax Number	630-980-5577			
Proposal Contact Person	PIOTR BLASZCZYK			
Email Address	healthyairheatingan	dair@gmail.com		
PIOTR BLASZCZYK (President or Part Partner)	ner)	(Vice-F	President or	
(Secretary or Part	ner)	(Treas	urer or Partner)	
Further, the undersigned declar herein; that this Proposal is mad the proposed forms of agreemer in the office of the Procurement other documents referred to of Addenda No.	de without collusion with any of nt and the contract specification Manager, DuPage Center, 421 r mentioned in the contract d	ther person, firm or corporations for the above designated pure North County Farm Road, Wooduments, Epecifications and	n; that he has fully examine rchase, all of which are on fi heaton, Illinois 60187, and a	
Further, the undersigned propo apparatus and other means of equipment specified or referred Further, the undersigned certifie the Offeror and in accordance willinois and that this Certification	construction, including transpo to in the contract documents in es and warrants that he is duly vith the Partnership Agreement	ortation services necessary to the manner and time therein pauthorized to execute this cert or by-laws of the Corporation	furnish all the materials ar prescribed. tification/affidavit on behalf	
Further, the undersigned certific either 720 Illinois Compiled Stat of 820 ILCS 130/1 et seq., the II	tutes 5/33 E-3 or 5/33E-4, prop	from proposing on this contra osal rigging or proposal-rotatin	ct as a result of a violation ng or as a result of a violatio	

THE COUNTY OF DUPAGE
WEATHERIZATION SERVICES (ARCHITECTURAL & MECHANICAL) FOR SINGLE FAMILY HOMES 24-099-WEX
Page 45 of 53

The undersigned certifies that he has examined and carefully prepared this proposal and has checked the same in detail before submitting this proposal, and that the statements contained herein are true and correct.

If a Corporation, the undersigned further certifies that the recitals and resolutions attached hereto and made a part hereof were properly adopted by the Board of Directors of the Corporation at a meeting of said Board of Directors duly called and held and have not been repealed, nor modified and that the same remain in full force and effect. (Offeror may be requested to provide a copy of the corporate resolution granting the individual executing the contract documents authority to do so.) Further, the offeror certifies that he has provided services comparable to the items specified in this contract to the parties listed in the reference section below and authorizes the County to verify references of business and credit at its option.

Finally, the offeror, if awarded the contract, agrees to do all other things required by the contract documents, and that he will take in full payment therefore the sums set forth in the cost schedule.

PROPOSAL AWARD CRITERIA

This proposal will be awarded to the most responsive, responsible vendor meeting specifications based upon the highest score compiled during evaluation of the proposals outlined in the selection process.

The Contractor agrees to provide the service described above and in the contract specifications under the conditions outlined in attached documents for the amount stated.

DOCCIDENT

(Signature and Title)	RESIDENT		CORPORATE SEAL (If available)	
PROPO	SAL MUST BE SIG	ENED FOR CONSIDER	ATION	
Subscribed and sworn to before me this	_ <u>21</u> day of	Aver ST	AD, 2024	
My Commission Expires:(Notary Public)				

DUPAGE COUNTY DEPARTMENT OF COMMUNITY SERVICES WEATHERIZATION PROGRAM AGREEMENT TO WORK FOR BID PRICES

atalog of the prices and have sui	bmitted all of the i	required paperwo	rk.	nt contractors. I have been g
	v			
inergy Coordinator, DCC8WP ignature on File				Date 8/21/24
Contractor		*		
				Date



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	24-099-WEX
COMPANY NAME:	Healthy Air Heating & Air, Inc.
CONTACT PERSON:	Piotr Blaszczyk
CONTACT EMAIL:	healthyairheatingandair@gmail.com

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

بطغ مملا	a Diddor mada	contributions	as described	lahove?

	Yes
--	-----

2 No

If "Yes", complete the required information in the table below.

· RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

Rev. 1-2025

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

Q No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL
		A

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- . With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at: http://www.dupagecounty.gov/government/county_board/ethics_at_the_county/

The full text of the County's Procurement Ordinance is available at:

https://www.dupagecounty.gov/government/departments/finance/procurement/procurement ordinance and guiding principles.php

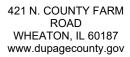
Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these require	∍ments, and
certifies that the information submitted on this form is true and correct to the best of its knowledge Signature on File	

Printed Name: Piotr Blaszczyk	Signature:	v	1/	
Title: President	Date: 6/13/2025			



HS Requisition \$30,000 and Over





File #: HS-P-0031-25 Agenda Date: 7/1/2025 Agenda #: 15.E.

AWARDING RESOLUTION ISSUED TO MY GREEN HOUSE HVAC, LLC. TO PROVIDE MECHANICAL (HVAC) AND ARCHITECTURAL WEATHERIZATION LABOR AND MATERIALS FOR THE WEATHERIZATION PROGRAM IN COMMUNITY SERVICES (CONTRACT TOTAL AMOUNT: \$135,000)

WHEREAS, proposals have been taken and processed in accordance with County Board policy; and

WHEREAS, Contractor and COUNTY have agreed on terms for the second and final year of a maximum of one renewal to the original agreement; and

WHEREAS, the Human Services Committee recommends County Board approval for the issuance of a contract purchase order to provide mechanical (HVAC) and architectural weatherization labor and materials for Community Services, for the period July 1, 2025 through June 30, 2026, under the PY25/26 Weatherization Program Grants.

NOW, THEREFORE, BE IT RESOLVED that covering said contract to provide mechanical (HVAC) and architectural weatherization labor and materials, for the period July 1, 2025 through June 30, 2026, for Community Services, under the PY25/26 Weatherization Program Grants, per RFP renewal #24-099-WEX, be, and it is hereby approved for the issuance of a contract purchase order by the Procurement Division to My Green House HVAC, LLC, Attn: Jose Perez, 5145 S. Archer Avenue, Chicago, IL 60632, for a contract total not to exceed \$135,000.

Enacted and approved this 8th day of July, 2025 at W	heaton, Illinois.
	DEBORAH A. CONROY, CHAIR DU PAGE COUNTY BOARD
Attest:	JEAN KACZMAREK, COUNTY CLERK



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 #: 24-099-WEX	INITIAL TERM WITH RENEWALS: 1 YR + 1 X 1 YR TERM PERIOD	INITIAL TERM TOTAL COST: \$866,434.00
COMMITTEE: HUMAN SERVICES	TARGET COMMITTEE DATE: 07/01/2025	PROMPT FOR RENEWAL: 6 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$1,001,434.00
	CURRENT TERM TOTAL COST: \$135,000.00	MAX LENGTH WITH ALL RENEWALS: TWO YEARS	CURRENT TERM PERIOD: FIRST RENEWAL
Vendor Information		Department Information	
VENDOR: MY GREEN HOUSE HVAC, LLC	VENDOR #: 45320	DEPT: COMMUNITY SERVICES	DEPT CONTACT NAME: GINA STRAFFORD-AHMED
VENDOR CONTACT: JOSE PEREZ	VENDOR CONTACT PHONE: 708-577-9510	DEPT CONTACT PHONE #: 630-407-6444	DEPT CONTACT EMAIL: GINA.STRAFFORD@DUPAGECOUNT Y.GOV
VENDOR CONTACT EMAIL: MYGREENHOUSEHVAC@GMAIL.CO M	VENDOR WEBSITE:	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.).

Architectural & Mechanical services for Weatherization Program (grant funded). RFP with predetermined prices from State Market Analysis.

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

Weatherization program provides energy efficiency upgrades and health and safety measures to eligible low-income households.

	SECTION 2: DECISION MEMO REQUIREMENTS
DECISION MEMO NOT REQUIRED RENEWAL	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.

	SECTION 3: DECISION MEMO
SOURCE SELECTION	Describe method used to select source.
4410	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.

	SECTION 5: Purchase	Requisition Informat	ion		
Send Pur	chase Order To:	Send Invoices To:			
Vendor: MY GREEN HOUSE HVAC, LLC	Vendor#: 45320	Dept: COMMUNITY SERVICES	Division: INTAKE & REFERRAL		
Attn: JOSE PEREZ	Email: mygreenhousehvac@gmail.com	Attn: GINA STRAFFORD-AHMED	Email: GINA.STRAFFORD@DUPAGECOUNT Y.GOV		
Address: 5145 S. ARCHER AVE	City: CHICAGO	Address: City: 421 N COUNTY FARM ROAD WHEATON			
State: IL	Zip: 60632	State: Zip: 60187			
Phone: 708-577-9510	Fax:	Phone: 630-407-6444	Fax:		
Send I	Payments To:	Ship to:			
Vendor: SAA	Vendor#:	Dept: SAA	Division:		
Attn:	Email:	Attn: Email:			
Address:	City:	Address:	City:		
tate: Zip:		State:	Zip:		
Phone:	Fax:	Phone:	Fax:		
 Shipping		Contract Dates			
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Jul 1, 2025	Contract End Date (PO25): Jun 30, 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		ARCH & MECH 23-461028		5000	1400	53090	23-461028	31,000.00	31,000.00
2	1	EA		ARCH & MECH 25-221028		5000	1430	53090	25-221028	51,000.00	51,000.00
3	1	EA		ARCH & MECH 26-251028		5000	1490	53090	26-251028	30,000.00	30,000.00
4	1	EA		ARCH & MECH RETROFITS25		5000	1555	53090	RETROFITS 25	23,000.00	23,000.00
FY is required, ensure the correct FY is selected. Requisition Total \$					\$ 135,000.00						

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 County of DuPage
Finance Department
Procurement Division, Room 3-400
421 North County Farm Road
Wheaton, Illinois 60187

CONTRACT RENEWAL AGREEMENT

This contract, made and entered into by The County of DuPage, 421 North County Farm Road, Wheaton, Illinois, 60187, hereinafter called the "COUNTY" and My Green House HVAC, LLC located at 5145 S Archer Avenue, Chicago, IL 60632 hereinafter called the "CONTRACTOR", witnesseth:

The COUNTY and the CONTRACTOR have previously entered into a Contract, pursuant to Bid #24-099-WEX which became effective on 10/22/2024 and which will expire 6/30/2025. The contract is subject to the first and final option to renew for a twelve (12) month period.

The contract renewal shall be effective on the date of last signature and shall terminate on 6/30/2026.

The parties now agree to renew said agreement, upon the same terms as previously agreed to, as specified in the original contract.

THE COUNTY OF DUPAGE	Signature on File		
SIGNATURE			
Sara Rogers PRINTED NAME	PRINTED NAME		
Buyer I	OFFICE MANAGER		
DATE	5.21-25		



THE COUNTY OF DUPAGE FINANCE - PROCUREMENT WEATHERIZATION SERVICES (ARCHITECTURAL AND MECHANICAL) FOR SINGLE FAMILY HOMES 24-099-WEX BID TABULATION

		\checkmark	✓	✓	✓	
Criteria	Available Points	My Green House HVAC, LLC	Arcos Environmental Services Inc.	Healthy Air Heating & Air, Inc.	Comfort 1st Insulation & Energy Solutions Inc.	Nortek Environmental Inc.
Firm Qualifications	20	19	18	17	15	11
Key Qualifications	50	45	43	43	41	34
Project Understanding	30	30	30	29	29	23
Total	100	94	91	89	85	68

NOTES

- 1. NM Enterprise Inc. has been deemed non-responsive due to not providing required documentation.
- 2. Parliament Builders Inc. has been deemed non-responsive due to not providing required documentation.

RFP Posted on 08/15/2024 Bid Opened On 09/11/2024, 2:30 PM by	DW,BR
Invitations Sent	77
Total Requesting Documents	1
Total Bid Responses Received	7

PROPOSAL FORM WEATHERIZATION SERVICES (ARCHITECTURAL & MECHANICAL) FOR SINGLE FAMILY HOMES 24-099-WEX

				, ,,,,, ,				
	Full Name of Offeror	1005	e Porer					
	Main Business Address	Mi	1 Green H	abl	HVAC.	LLC.		
ļ .			5145 6	s. Ar	chet A	ve.		
	City, State, Zip Code	(Micual.	Il.	10(1032			
	Telephone Number	7	18-547-	9510)			
	Fax Number	Ù	IA					
	Proposal Contact Person)(ISE Pere	2				
	Email Address	LM	greenho	usehi	JACE C	imail	.CO	M
Th€	undersigned certifies that I	he is:						
X	the Owner/Sole Proprietor		a Member of the Partnership		an Officer of Corporation	the [Member of the Joint Venture
Ž	(President or Part tner)	ner)				(Vice-Presi	dent	or
	(Secretary or Part	ner)				(Treasurer	or Par	tner)
nere the p n th othe Addo Furti appa equi Furti	ner, the undersigned declar in; that this Proposal is man proposed forms of agreement of documents referred to openda No,	de withount and the Manage r mention, and oses and constructo in the es and war and war and war and without and without and without and war an	at collusion with any contract specification, DuPage Center, 4 ned in the contract discussion in the contract discussion including transcontract documents arrants that he is du	other persons for the 21 North (document of the ed thereto osal is acportation so in the marity authorized	son, firm or co above design County Farm R ts, specification; cepted, to pro- services neces oner and time to ed to execute	rporation: the ated purchast to ad, Wheat to and atta wide all necessary to furnitherein presonant in scertifica	at he	nas fully examine of which are on file to the second of the second of the second of the machinery, tools the materials and the materials and the second of t
Illino	is and that this Certification	is bindin	g upon the Offeror a	ind is true	and accurate.			
eithe	her, the undersigned certifier Fr 720 Illinois Compiled Sta 20 ILCS 130/1 et seq., the l	tutes 5/30	3 E-3 or 5/33E-4, pr evailing Wage Act.	oposal rigg	ing or proposa	s contract as al-rotating or	a res	ult of a violation of result of a violation
	WEATHERIZATION S	SERVICES	THE COUNT (ARCHITECTURAL & M Page	OF DUPACECHANICAL 15 of 53	SE) FOR SINGLE FA	AMILY HOMES	24-099-	WEX

The undersigned certifies that he has examined and carefully prepared this proposal and has checked the same in detail before submitting this proposal, and that the statements contained herein are true and correct.

If a Corporation, the undersigned further certifies that the recitals and resolutions attached hereto and made a part hereof were properly adopted by the Board of Directors of the Corporation at a meeting of said Board of Directors duly called and held and have not been repealed, nor modified and that the same remain in full force and effect. (Offeror may be requested to provide a copy of the corporate resolution granting the individual executing the contract documents authority to do so.) Further, the offeror certifies that he has provided services comparable to the items specified in this contract to the parties listed in the reference section below and authorizes the County to verify references of business and credit at its option.

Finally, the offeror, if awarded the contract, agrees to do all other things required by the contract documents, and that he will take in full payment therefore the sums set forth in the cost schedule.

PROPOSAL AWARD CRITERIA

This proposal will be awarded to the most responsive, responsible vendor meeting specifications based upon the highest score compiled during evaluation of the proposals outlined in the selection process.

The Contractor agrees to provide the service described above and in the contract specifications under the conditions outlined in attached documents for the amount stated.

Signature on File CORPORATE SEAL (If available) (Signature and Title)

PROPOSAL MUST BE SIGNED FOR CONSIDERATION

Subscribed and swom to before me this // Signature on File

My Commission Expires:

(Notary Public)

MARIA O DIAZ Official Seal Notary Public - State of Illinois My Commission Expires Dec 1, 2026

DUPAGE COUNTY DEPARTMENT OF COMMUNITY SERVICES WEATHERIZATION PROGRAM AGREEMENT TO WORK FOR BID PRICES

I. USAPOTAL - March 1988 Weather catalog of the prices and have submitted all of the required	Idontractor) agree to work for the prices that have been agreed rization Program and current contractors. I have been given a paperwork.
Energy Coordinator DCCSWP Signature on File	Date Q.24-2U
Contractor	Date

THE COUNTY OF DUPAGE
WEATHERIZATION SERVICES (ARCHITECTURAL & MECHANICAL) FOR SINGLE FAMILY HOMES 24-099-WEX
Page 43 of 53



Section I: Contact Information

DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Please complete the con	tact information below.
BID NUMBER:	24-099-WEX
COMPANY NAME:	My Fareen House MVAC. C.C.
CONTACT PERSON:	Just Perez or Maria O. Diaz
CONTACT EMAIL:	mugreenhousehvace amail. Com or
	Ju mygreenhousehvace out wok. com

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

Has the E	Bidder made	contributions a	ıs described	above?
-----------	-------------	-----------------	--------------	--------

	Yes	
A	Nο	

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

Rev. 1-2025

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

Yes

X No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sconer;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

http://www.dupagecounty.gov/government/county_board/ethics_at_the_county-

The full text of the County's Procurement Ordinance is available at:

https://www.gupagecounty.gov/government/departments/finance/procurement/procurement_ordinance_and_guiding_ principles.php

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge. Signature on File

Printed Name: Maria O. Diaz Signature:

Title: Maria Manager Date: 5-19-25

Facilities Management Resolution

421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov



File #: FM-R-0005-25 Agenda Date: 7/8/2025 Agenda #: 18.G.

RESCISSION OF REQUISITION P.O. #7678-0001 SERV ISSUED TO SANDERS DISTRIBUTING LLC D/B/A AIR CARE SERVICES TO PROVIDE SEMI-ANNUAL CLEANING OF KITCHEN DUCTS, HOODS, AND FANS FOR FACILITIES MANAGEMENT (CONTRACT TOTAL AMOUNT OF \$20,840)

WHEREAS, on May 6, 2025, the DuPage County Public Works Committee approved contract purchase order #7678-0001 SERV to Sanders Distributing LLC d/b/a Air Care Services, to provide semi-annual cleaning of the kitchen ducts, hoods, and fans, for the period May 26, 2025 through May 25, 2027, for Facilities Management; and

WHEREAS, the awarded vendor is unable to meet all of the qualifications on the original Bid #25-043-FM.

NOW, THEREFORE, BE IT RESOLVED, by the DuPage County Board that Requisition 25-1186 (P.O. #7678-0001 SERV), approved by the DuPage County Public Works Committee on May 6, 2025, shall be and is hereby repealed and rescinded in its entirety effective immediately.

Enacted and approved this 8th day of July, 2025 at Wheaton, Illinois.

	DEBORAH A. CONROY, CHAIR
	DU PAGE COUNTY BOARD
Attest:	
	JEAN KACZMAREK, COUNTY CLERK

COUNTY OF DUIVAGE

Facilities Management Change Order with Resolution

421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: FM-CO-0001-25 Agenda Date: 7/1/2025 Agenda #: 18.F.

AMENDMENT TO PURCHASE ORDER 6937-0001 SERV ISSUED TO
A&P GREASE TRAPPERS, INC.
FOR SANITARY, GREASE TRAP AND STORM BASIN PUMPING, JETTING AND CLEANING
FOR FACILITIES MANAGEMENT
(INCREASE CONTRACT IN THE AMOUNT OF \$15,000.00)

WHEREAS, Purchase Order 6937-0001 SERV was approved and adopted by the Public Works Committee on March 5, 2024; and

WHEREAS, the Public Works Committee recommends changes as stated in the Request for Change Order to Purchase Order 6937-0001 SERV, issued to A&P Grease Trappers, Inc., for sanitary, grease trap and storm basin pumping, jetting and cleaning, for a change order to increase the contract in the amount of \$15,000.00, for Facilities Management.

NOW, THEREFORE BE IT RESOLVED, that the County Board adopts the Request for Change Order to Purchase Order 6937-0001 SERV, issued to A&P Grease Trappers, Inc., for sanitary, grease trap and storm basin pumping, jetting and cleaning, for a change order to increase the contract in the amount of \$15,000.00, for Facilities Management, taking the contract amount of \$87,750.00 and resulting in an amended contract amount not to exceed \$102,750.00, an increase of 17.09%.

Enacted and approved this 8th day of July, 2025 at Wheaton, Illinois.

	DEBORAH A. CONROY, CHAIR DU PAGE COUNTY BOARD
Attest:	
	JEAN KACZMAREK, COUNTY CLERK

PW 7/1 FI+CB 7/8



Date.	Jun 18, 202
MinuteTrag (IOM2) ID #:	

Purchase Order #	:6937-0001 SERV Original I	Purchase Apr 14, 2024	Change Order #: 5	Department: Fa	acilities Management
Vendor Name: Pl	&P Grease Trappers Inc DBA Alumbing & Sewer, LLC	oility Septic, A&P	Vendor #: 12241	Dept Contact: N	Aary Ventrella
Background and/or Reason for Change Order Request:	Increase contract from \$87	7,750.00 to \$102,750.0	0; Line #4 1000-1100-53	300 \$15,000.00	
		IN ACCORDANCE V	VITH 720 ILCS 5/33E-9		
(A) Were not re	easonably foreseeable at the t	ime the contract was sig	ned.		,
(B) The change	e is germane to the original co	ntract as signed.			
(C) Is in the be	st interest for the County of D				
		INCREASI	/DECREASE		
A Starting con					\$82,750.00
B Net \$ chang	e for previous Change Orders				\$5,000.00
	tract amount (A + B)				\$87,750.00
	his Change Order		Decrease		\$15,000.00
	t amount (C + D)				\$102,750.00
	urrent contract value this Char				17.09%
G Cumulative	percent of all Change Orders (24.17%
		DECISION MEM	O NOT REQUIRED	Happy cope and a state of the s	
Cancel entire of	order 🔲 🔾	ose Contract	Contract Extensio	n (29 days)	Consent Only
Change budge	+		to:		
Increase/Decre	ease quantity from:	to:			
Price shows:		should be:			
Decrease remained and close cont		crease encumbrance d close contract	Decrease enc	umbrance [Increase encumbrance
		DECISION ME	MO REQUIRED		
Increase (great	er than 29 days) contract expi	ration from:	to:		141.75.0F
	00.00, or ≥ 10%, of current co	ntract amount 🔀 Fund	ding Source 1000-1100-53	3300	
OTHER - explain	n below:		7.	-	
		and the second s	er e e e e e e e e e e e e e e e e e e	THE RESIDENCE OF THE PARTY OF T	
			Cional		·
MV	5705	Jun 18, 2025	Signature o	on File	10/19/10=
Prepared By (Initial		Date	Recommended for Appro	oval (Initials) Phon	E Ext Date
· · · · · · · · · · · · · · · · · · ·		REVIEWED B	Y (initials Only)		
			Q		6/20/
Buyer	, , , , , , , , , , , , , , , , , , ,	Data	<u> </u>		2508/020/2
ьсуе		Date	Procurement Officer		Date /
					į
Chief Financial Offi (Decision Memos C		Date	Chairman's Office (Decision Memos Over 9	525 000)	Date
(= address in the though		Jul	(Secision Memos Over)	123,000)	Date



Decision Memo

Procurement Services Division

This form is required for all Professional Service Contracts over \$25,000 and as otherwise required by the Procurement Review Checklist.

	Date:	Jun 18, 2025
MinuteTraq (IQ	M2) ID #:_	
Department Requisitio	n #:	

Requesting Department: Facilities Management	Department Contact: Mary Ventrella
Contact Email: mary.ventrella@dupagecounty.gov	Contact Phone: 630-407-5705
Vendor Name: A&P Grease Trappers, Inc.	Vendor #: 12241

	ount from \$87,750.00 to \$102,750.00 to allow for Procurement to re-bid these services.
increase contract am	ount from \$67,750.00 to \$102,750.00 to allow for Procurement to re-pid these services.
C	
Summary Explanati	on/Background - Provide an executive summary of the action. Explain why it is necessary and what is to be accomplished.
	SERV is for sanitary, grease trap and storm basin pumping, jetting and cleaning, as needed for the County will be issuing a new bid due to previous unsuccessful bids.
Strategic Impact	_
Quality of Life	Select one of the six strategic imperatives in the County's Strategic Plan this action will most impact and provide a brief explanation.
	y, grease trap and storm basin pumping, jetting and cleaning is needed to prevent odorous backup, expensive any potential health issues.

Source Selection/Vetting Information - Describe method used to select source.

Lowest responsible bid #21-017-FM.

Recommendations/Alternatives - Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request.

- 1. Procurement to re-bid these services.
- 2. Do not increase contact value and pay for services not protected by a contract.
- 3. Do not perform necessary services and risk odorous backup, expensive repairs, and potential health issues.

Fiscal Impact/Cost Summary - Include projected cost for each fiscal year, approved budget amount and account number, source of funds, and any future funding requirements along with any narrative.

Increase funds for Facilities Management portion in the amount of \$15,000; 1000-1100-53300, FY25.



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	21-017-FM	
COMPANY NAME:	ARP Grease Trappers Inc.	
CONTACT PERSON:	Maritza Tellez	
CONTACT EMAIL:	inpocapareasetrappers.com	

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

	E-Sell A-					
Laa tha	Diddor	mada	contribu	tione oc	described	ahawa?
DAS INE	DICICIE	made		mons as	DESCHOOL	abover

☐ Yes

No No

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE
			,	

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

No No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- . With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

Ethics | DuPage Co, IL

The full text of the County's Procurement Ordinance is available at:

ARTICLE VI. - PROCUREMENT | Code of Ordinances | DuPage County, IL | Municode Library

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Printed Name: Patrick Sliger	Signature on File Signature	
Title: President .	Date: 6/17/25	

CUNTY OF DUBAGE

Facilities Management Resolution

421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: FM-R-0006-25 Agenda Date: 7/1/2025 Agenda #: 18.H.

AMENDMENT TO CONTRACT 21-017-FM
ISSUED TO A&P GREASE TRAPPERS, INC.
FOR SANITARY, GREASE TRAP AND STORM BASIN PUMPING, JETTING AND CLEANING FOR
FACILITIES MANAGEMENT
(CONTRACT EXTENSION)

WHEREAS, Contract 21-017-FM was approved and adopted by the County Board on April 13, 2021; and

WHEREAS, the Public Works Committee recommends County Board approval to extend the expiration date of the contract term from June 12, 2025 to August 31, 2025. This County Contract was issued to A&P Grease Trappers, Inc., for sanitary, grease trap and storm basin pumping, jetting and cleaning, for Facilities Management.

NOW, THEREFORE, BE IT RESOLVED, that the County Board adopts the request to extend the expiration date of the contract term from June 12, 2025 to August 31, 2025, issued to A&P Grease Trappers, Inc., for sanitary, grease trap and storm basin pumping, jetting and cleaning, for Facilities Management.

Enacted and approved this 8th day of July, 2025 at Wheaton, Illinois.

	DEBORAH A. CONROY, CHAIR DU PAGE COUNTY BOARD
	DO TAGE COUNTY BOARD
Attest:	
	JEAN KACZMAREK, COUNTY CLERK

Page 1 of 1



FINANCE DEPARTMENT

630-407-6100

www.dupagecounty.gov/finance

A&P GREASE TRAPPERS INC.

CONTRACT AMENDMENT

DuPage County - Procurement Division

Contract Number: 21-017-FM
Contract Amendment No. 1
Effective June 12, 2025

This Contract is Amended to include the following specifications:

Contract Number: 21-017-FM

THE COUNTY OF DUPAGE, ILLINOIS

Contract Name: Sanitary, Grease Trap and Storm Basin Pumping, Jetting and Cleaning

 Amendment to extend the expiration date of the contract term from June 12, 2025, to August 31, 2025.

All other provisions of the contract not expressly changed herein shall remain the same in their entirety.

The parties represent and warrant to each other that each party has full power, authority and legal right to execute, deliver and perform this Amendment and the execution, delivery & performance hereof have been duly authorized by all necessary actions.

IN WITNESS, WHEREOF the undersigned duly authorized representative of the parties has executed this Amendment as of the date below written.

Ву:		_{By:} Signature on File
	SIGNATURE	SIGNATURE U
	Valerie Calvente	Maritza Tellez
	PRINTED NAME	PRINTED NAME
	Chief Procurement Officer	Saler lead
	PRINTED TITLE	PRINTED TITLE
		6/16/25
	DATE	DATE



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	21-017-FM	
COMPANY NAME:	ARP Grease Trappers Inc.	
CONTACT PERSON:	Maritza Tellez	
CONTACT EMAIL:	inpocapareasetrappers.com	

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

	m		A	Minne ha	4	
Has the	Blader	mage	CONTRIDL	itions as	described	above

☐ Yes

No No

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE
			,	

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

No No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL	

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- · Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

Ethics | DuPage Co, IL

The full text of the County's Procurement Ordinance is available at:

ARTICLE VI. - PROCUREMENT | Code of Ordinances | DuPage County, IL | Municode Library

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Printed Name: Patrick Sliger Signature on File

Signature on File

Signature on File

Signature on File

Signature on File

THE COUNTY OF OUNDAGE

Facilities Management Requisition Over \$30K

421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: FM-P-0033-25 Agenda Date: 7/1/2025 Agenda #: 18.D.

AWARDING RESOLUTION ISSUED TO AIRWAYS SYSTEMS, INC. FOR SEMI-ANNUAL CLEANING OF THE KITCHEN DUCTS, HOODS AND FANS FOR THE JUDICIAL OFFICE FACILITY, JTK ADMINISTRATION BUILDING, JAIL AND CARE CENTER FOR FACILITIES MANAGEMENT (CONTRACT TOTAL NOT TO EXCEED \$37,525.00)

WHEREAS, bids have been taken and processed in accordance with County Board policy; and

WHEREAS, the Public Works Committee recommends County Board approval for the issuance of a contract to Airways Systems, Inc., for semi-annual cleaning of the kitchen ducts, hoods and fans, for the Judicial Office Facility, JTK Administration Building, Jail and Care Center, for the two-year period July 9, 2025 through July 8, 2027, for Facilities Management.

NOW, THEREFORE BE IT RESOLVED, that County Contract, covering said for semi-annual cleaning of the kitchen ducts, hoods and fans, for the Judicial Office Facility, JTK Administration Building, Jail and Care Center, for the two year period July 9, 2025 through July 8, 2027, for Facilities Management, be, and it is hereby approved for issuance of a contract by the Procurement Division to, Airways Systems, Inc., 1100 Tower Lane, Bensenville, IL 60106, for a contract total amount not to exceed \$37,525.00, per lowest responsible bid #25-043-FM.

Enacted and approved this 8th day of July, 2025 at Wh	neaton, Illinois.
	DEBORAH A. CONROY, CHAIR DU PAGE COUNTY BOARD
Attest:	
	IEAN KACZMAREK COUNTY CLERK



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:	INITIAL TERM TOTAL COST:				
25-1533	25-043-FM	2 YRS + 1 X 2 YR TERM PERIOD	\$37,525.00				
COMMITTEE:	TARGET COMMITTEE DATE:	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS: \$75,050.00				
PUBLIC WORKS	07/01/2025	3 MONTHS					
	CURRENT TERM TOTAL COST:	MAX LENGTH WITH ALL RENEWALS:	CURRENT TERM PERIOD:				
	\$37,525.00	FOUR YEARS	INITIAL TERM				
Vendor Information		Department Information	L				
VENDOR:	VENDOR #:	DEPT:	DEPT CONTACT NAME:				
Airways Systems, inc.	25611	Facilities Management	Mary Ventrella				
VENDOR CONTACT:	VENDOR CONTACT PHONE:	DEPT CONTACT PHONE #:	DEPT CONTACT EMAIL:				
Diane Helfgot	847-845-8113	630-407-5705	mary.ventrella@dupagecounty.gov				
VENDOR CONTACT EMAIL:	VENDOR WEBSITE:	DEPT REQ #:	1				
diane@airwayssystems.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.). Recommendation for the approval of a contract to Airways Systems, Inc., for semi-annual cleaning of the kitchen ducts, hoods, and fans for the Judicial Office Facility, JTK Administration Building, Jail, and Care Center, for Facilities Management, for the two-year period July 9, 2025 through July 8, 2027, for a total contract amount not to exceed \$37,525.00, per lowest responsible bid #25-043-FM.

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

The semi-annual cleaning of the kitchen ducts, hoods and fans, is required per the National Fire Protection Association, and is necessary to eliminate odors and grease buildup which is a fire hazard.

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.							
LOWEST RESPONSIBLE QUOTE/BID	LOWEST RESPONSIBLE QUOTE/BID (QUOTE < \$25,000, BID ≥ \$25,000; ATTACH TABULATION)						
DECISION MEMO REQUIRED	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							
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	Purchase Order To:	Seno	I Invoices To:		
Vendor:	Vendor#:	Dept:	Division:		
Airways Systems, Inc.	25611	Facilities Management	DIVISION.		
Attn:	Email:	Attn:	Email:		
Diane Helfgot	diane@airwayssystems.com		FMAccountsPayable @dupagecounty.gov		
Address:	City:	Address:	City:		
1100 Tower Lane	Bensenville	421 N. County Farm Road	Wheaton		
State:	Zip:	State:	Zip:		
IL	60106	IL	60187		
Phone:	Fax:	Phone:	Fax:		
847-845-8113		630-407-5700	630-407-5701		
Send Payments To:		Ship to:			
Vendor:	Vendor#:	Dept:	Division:		
Airways Systems, Inc.	25611	Facilities Management			
Attn:	Email:	Attn:	Email:		
Address:	City:	Address:	City:		
1100 Tower Lane	Bensenville	various locations	Wheaton		
State:	Zip:	State:	Zip:		
IL	60106	IL	60187		
Phone:	Fax:	Phone:	Fax:		
	Shipping	Con	tract Dates		
Payment Terms:	FOB:	Contract Start Date (PO25):	Contract End Date (PO25):		
PER 50 ILCS 505/1	Destination	Jul 9, 2025	Jul 8, 2027		

	Purchase Requisition Line Details											
L	N	Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
	1	1	LO		Semi-Annual Cleaning of Kitchen Ducts, Hoods and Fans	FY25	1000	1100	53810		9,150.00	9,150.00
	2	1	LO		Semi-Annual Cleaning of Kitchen Ducts, Hoods and Fans	FY26	1000	1100	53810		17,600.00	17,600.00
	3	1	LO		Semi-Annual Cleaning of Kitchen Ducts, Hoods and Fans	FY27	1000	1100	53810		10,775.00	10,775.00
F	FY is required, ensure the correct FY is selected. Requisition Total \$							\$ 37,525.00				

	Comments						
Provide comments for P020 and P025. Provide Semi-Annual cleaning of the kitchen ducts, hoods, and fans for the Judicial Office Facility, JTK Admir Building, Jail, and Care Center.							
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. Send PO to Vendor, Mary Ventrella, Cathie Figlewski, and Clara Gomez.						
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO. Public Works Committee: 07/01/25 County Board: 07/08/25						
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB.						



THE COUNTY OF DUPAGE FINANCE - PROCUREMENT SEMI-ANNUAL CLEANING OF DUCTS, HOODS AND FANS 25-043-FM BID TABULATION

					٧			
					Airways Sy	ys Systems, Inc.		
NO.	ITEM	UOM	QTY		PRICE	E	XTENDED PRICE	
1	Building 501 – Jail	EA	4	\$	1,300.00	\$	5,200.00	
2	Building 505 – Judicial Office Facility	EA	4	\$	3,250.00	\$	13,000.00	
3	Building 400 – Care Center	EA	4	\$	2,600.00	\$	10,400.00	
4	Building 421 – Administration	EA	4	\$	1,300.00	\$	5,200.00	
5	Labor as needed Monday – Thursday after 9:00 p.m.	HR	20	\$	81.25	\$	1,625.00	
6	Baffle Exhaust Filters – Stainless Steel (approx. 19.5" x 19.5" x 2")	EA	20	\$	80.00	\$	1,600.00	
7	Baffle Exhaust Filters – Stainless Steel (approx. 12" x 18")	EA	4	\$	125.00	\$	500.00	
	•	•		GR/	AND TOTAL	\$	37,525.00	

NOTES

- 1. Air Care Services has been deemed non-responsive due to being unable to provide required services.
- 2. RamPro Facilities Services Corporation did not meet requirements and has been deemed non-responsive.

Bid Opening 4/9/2025 @ 2:30 PM	HK, BR
Invitations Sent	9
Total Vendors Requesting Documents	2
Total Bid Responses	3

BID PRICING FORM

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	25-043-FM
COMPANY NAME:	Airways Systems, Inc.
CONTACT PERSON:	Diane G. Helfgot
CONTACT EMAIL:	dhelfgot@airwayssystems.com

Section II: Pricing

Quantities listed are estimate only and are provided for canvassing purposes. All goods shall be shipped F.O.B. Destination, delivered, and installed.

NO.	ITEM	MOU	QTY	PRICE	EXTENDED PRICE
SECT	ION 1 – CLEANING SERVICES				
1	Building 501 – Jail	EA	4	\$1300.00	\$ 5200.00
2	Building 505 – Judicial Office Facility	EA	4	\$ 3250.00	\$13,000.00
3	Building 400 – Care Center	EA	4	\$ 2600.00	\$ 10,400.00
4	Building 421 – Administration	EA	4	\$ 1300.00	\$ 5200,00
5	Labor as needed Monday – Thursday after 9:00 p.m.	HR	20	\$ 81.25	\$ 1625.00
SECT	ION 2 - EXHAUST FILTERS REPLACEME	NT IF RE	QUIRE	D	
6	Baffle Exhaust Filters – Stainless Steel (approx. 19.5" x 19.5" x 2")	EA	20	\$ 80.00	\$ 1600.00
7	Baffle Exhaust Filters – Stainless Steel (approx. 12" x 18")	EA	4	\$ 125.00	\$ 500.00
				GRAND TOTAL	\$ 37,525.00

Section III: Certification

By signing below, the Bidder agrees to prospecifications for the prices quoted on this	rovide the required goods and/or services described in the Bid Bid Pricing Form.
	Signature on File
Printed Name: Abraham Nunez	Signature
Title: President/Owner	Date: 04/08/2025 /



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

MANDATORY FORM

Section I: Contact Information

Complete the contact information below.

BID NUMBER:	25-043-FM
COMPANY NAME:	Airways Systems, Inc.
MAIN ADDRESS:	62 N Lively Blvd
CITY, STATE, ZIP CODE:	Elk Grove Village, IL 60007
TELPHONE NO.:	630.595.4242
BID CONTACT PERSON:	Diane G. Helfgot
CONTACT EMAIL:	dhelfgot@airwayssystems.com

Section II: Contract Administration Information

Complete the contract administration information below.

CORRESPONDENCE TO CONTRACTOR:		REMIT TO CONTRACTOR:		
NAME:	Airways Systems, Inc.	NAME:	Airways Systems, Inc.	
CONTACT:	Diane G. Helfgot	CONTACT:	Cherry A. Devin	
ADDRESS:	62 N Lively Blvd	ADDRESS:	62 N Lively Blvd	
CITY, ST., ZIP:	Elk Grove Village, IL 60007	CITY, ST., ZIP:	Elk Grove Village, IL 60007	
PHONE NO.:	630.595,4242	PHONE NO.:	630,595,8375	
EMAIL:	dhelfgot@airwayssystems.com	EMAIL:	cdevin@airwayssystems.com	

Section III: Certification The undersigned certifies that they are: M The Owner or Sole A Member authorized to An Officer of the A Member of the Joint Proprietor sign on behalf of the Corporation Venture Partnership Herein after called the Bidder and that the members of the Partnership or Officers of the Corporation are as follows: Abraham Nunez (President or Partner) (Vice-President or Partner) (Secretary or Partner) (Treasurer or Partner) Further, the undersigned declares that the only person or parties interested in this bid as principals are those named herein; that this bid is made without collusion with any other person, firm or corporation; that he has fully examined the proposed forms of agreement and the contract specifications for the above designated purchase, all of which are on file in the office of the Procurement Officer, DuPage County, 421 North County Farm Road, Wheaton, Illinois 60187, and all other documents referred to or mentioned in the contract documents, specifications and attached exhibits, including Addenda No. , and issued thereto. Further, the undersigned proposes and agrees, if this bid is accepted, to provide all necessary machinery, tools, apparatus, and other means of construction, including transportation services necessary to furnish all the materials and equipment specified or referred to in the contract documents in the manner and time and at the price therein prescribed. Further, the undersigned certifies and warrants that they are duly authorized to execute this certification/affidavit on behalf of the Bidder and in accordance with the Partnership Agreement or by-laws of the Corporation, and the laws of the State of Illinois and that this Certification is binding upon the Bidder and is true and accurate. Further, the undersigned certifies that the Bidder is not barred from bidding on this contract as a result of a violation of either Chapter 720 Illinois Compiled Statutes 5/33 E-3 or 5/33 E-4, bid rigging or bid-rotating, or as a result of a violation of 820 ILCS 130/1 et seg., the Illinois Prevailing Wage Act. The undersigned certifies that they have examined and carefully prepared this bid and have checked the same in detail before submitting this bid, and that the statements contained herein are true and correct. If a Corporation, the undersigned, further certifies that the recitals and resolutions attached hereto and made a part hereof were properly adopted by the Board of Directors of the Corporation at a meeting of said Board of Directors duly called and held and have not been repealed nor modified, and that the same remain in full force and effect. (Bidder may be requested to provide a copy of the corporate resolution granting the individual executing the contract documents authority to do so.) Further, the Bidder certifies that it has provided equipment, supplies, or services comparable to the items specified in this contract to the parties listed in the reference section below and authorizes the County to verify references of business and credit at its option. Finally, the Bidder, if awarded the contract, agrees to do all other things required by the contract documents, and that it will take in full payment therefore the sums set forth in the bidding schedule (subject to unit quantity adjustments based upon actual usage). By signing below, the Bidder agrees to the terms of this Mandatory Form and pertifies that the information on this form is true and correct to the best of its knowledge. Signature on File Abraham Nunez Printed Name: Signatu

04/08/2025

Date:

President/Owner

Title:

Rev. 1-2025



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	25-043-FM	
COMPANY NAME:	Airways Systems, Inc.	
CONTACT PERSON:	Abraham Nunez	
CONTACT EMAIL:	anunez@airwayssystems.com	

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

Has	the	Ridder	made	contribu	itions :	as desc	ribed	ahove?
1 100	UIC	DIGGE	HILLIAGO	COLLING	1110112	35 4556	IIDGU	abuve

☐ Yes

X No

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE
N/A				
				135 1112

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

No No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL
N/A		

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- · Annual disclosure for multi-year contracts on the anniversary of said contract
- · With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

Ethics | DuPage Co, IL

The full text of the County's Procurement Ordinance is available at:

ARTICLE VI. - PROCUREMENT | Code of Ordinances | DuPage County, IL | Municode Library

Section IV: Certification	
	dges that it has received, read, and understands these requirements, and form is true and correct to the best of its knowledge.
Printed Name: Abraham Nunez	Signature on File
Title: President	Date: 6/11/2025

Facilities Management Requisition Over \$30K





File #: FM-P-0034-25 Agenda Date: 7/1/2025 Agenda #: 18.E.

AWARDING RESOLUTION
ISSUED TO FOX VALLEY FIRE & SAFETY COMPANY
FOR PREVENTATIVE MAINTENANCE, TESTING AND REPAIR
OF THE NON-EDWARDS SYSTEM TECHNOLOGY FIRE ALARM &
LIFE SAFETY SYSTEMS FOR COUNTY FACILITIES
FOR FACILITIES MANAGEMENT
(CONTRACT TOTAL NOT TO EXCEED \$117,250.00)

WHEREAS, bids have been taken and processed in accordance with County Board policy; and

WHEREAS, the Public Works Committee recommends County Board approval for the issuance of a contract to Fox Valley Fire & Safety Company, Inc., for preventative maintenance, testing and repair of the Non-Edwards System Technology Fire Alarm and Life Safety Systems for County facilities, for the period August 28, 2025 through August 27, 2026, for Facilities Management.

NOW, THEREFORE BE IT RESOLVED, that County Contract, covering said, for preventative maintenance, testing and repair of the Non-Edwards System Technology Fire Alarm and Life Safety Systems for County facilities, for the period August 28, 2025 through August 27, 2026, for Facilities Management, be, and it is hereby approved for issuance of a contract by the Procurement Division to, Fox Valley Fire & Safety Company, Inc., 2730 Pinnacle Drive, Elgin, IL 60124, for a total contract amount not to exceed \$117,250.00, per renewal option under bid award bid #22-080-FM, third and final option to renew. (\$95,000 for Facilities Management, \$1,250 for Animal Services, \$10,000 for Division of Transportation, and \$11,000 for Public Works)

Enacted and approved this 8th day of July, 2025 at Wheaton, Illinois.

	DEBORAH A. CONROY, CHAIR DU PAGE COUNTY BOARD
Attest:	IEAN KACZMAREK COUNTY CLERK

JEAN KACZMAREK, COUNTY CLERN



Procurement Review Comprehensive Checklist Procurement Services Division

This form must accompany all Purchase Order Requisitions

	SECTION 1:	DESCRIPTION				
General Tracking		Contract Terms				
FILE ID#: 25-1534	RFP, BID, QUOTE OR RENEWAL #: 22-080-FM	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: \$158,945.00			
COMMITTEE: PUBLIC WORKS	TARGET COMMITTEE DATE: 07/15/2025	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$466,945.00			
CURRENT TERM TOTAL COST: \$117,250.00		MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: THIRD RENEWAL			
Vendor Information		Department Information				
VENDOR: Fox Valley Fire & Safety Company	VENDOR #: 11067	DEPT: Facilities Management	DEPT CONTACT NAME: Mary Ventrella			
VENDOR CONTACT: Jon Ofenloch	VENDOR CONTACT PHONE: 847-695-5990	DEPT CONTACT PHONE #: 630-407-5705	DEPT CONTACT EMAIL: mary.ventrella@dupagecounty.gov			
VENDOR CONTACT EMAIL: JonOfenloch@foxvalley.com	VENDOR WEBSITE:	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.). Recommendation for the approval of a contract to Fox Valley Fire & Safety Company, for preventative maintenance, testing and repair of the Non-Edwards System Technology Fire Alarm and Life Safety Systems for County facilities, for the period August 28, 2025 through August 27, 2026, for a total contract amount not to exceed \$117,250.00, per renewal option under bid award #22-080-FM, third and final option to renew. (\$95,000 for Facilities Management, \$1,250 for Animal Services, \$10,000 for Division of Transportation, \$11,000 for Public Works)

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished The City of Wheaton Ordinance fire prevention code, BOCA 1990, NFPA requires quarterly and semi-annual life safety testing and inspection of the County facilities fire alarms and sprinkler systems.

	SECTION 2: DECISION MEMO REQUIREMENTS
DECISION MEMO NOT REQUIRED RENEWAL	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.

	SECTION 3: DECISION MEMO
SOURCE SELECTION	Describe method used to select source.
ANID	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.

	SECTION 5: Purchase	e Requisition Informat	ion			
Send Purch	ase Order To:	Seno	l Invoices To:			
Vendor: Fox Valley Fire & Safety Company	Vendor#: 11067	Dept: Facilities Management	Division:			
Attn: Jon Ofenloch	Email: JonOfenloch@foxvalley.com	Attn:	Email: FMAccountsPayable @dupagecounty.gov			
Address: 2730 Pinnacle Drive	City: Elgin	Address: 421 N. County Farm Road	City: Wheaton			
State:	Zip: 60124	State:	Zip: 60187			
Phone: 847-695-5990	Fax: Phone: Fax: 847-695-3699 630-407-5700 630-407-5701					
Send Pay	yments To:	Ship to:				
Vendor: Fox Valley Fire & Safety Company	Vendor#: 11067	Dept: Facilities Management	Division:			
Attn:	Email:	Attn:	Email:			
Address: 2730 Pinnacle Drive	City: Elgin	Address: various locations	City: Wheaton			
State:	Zip: 60124	State:	Zip: 60187			
Phone:	Fax:	Phone:	Fax:			
Shi	 pping	Con	ntract Dates			
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Aug 28, 2025	Contract End Date (PO25): Aug 27, 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	LO		Facilities Management	FY25	1000	1100	53300		45,000.00	45,000.00
2	1	LO		Animal Services	FY25	1100	1300	53300		500.00	500.00
3	1	LO		Division of Transportation	FY25	1500	3510	53300		5,000.00	5,000.00
4	1	LO		Public Works - Woodridge & Knollwood	FY25	2000	2555	53300		2,500.00	2,500.00
5	1	LO		Public Works - Marionbrook	FY25	2000	2665	53300		4,500.00	4,500.00
6	1	LO		Facilities Management	FY26	1000	1100	53300		50,000.00	50,000.00
7	1	LO		Animal Services	FY26	1100	1300	53300		750.00	750.00
8	1	LO		Division of Transportation	FY26	1500	3510	53300		5,000.00	5,000.00
9	1	LO		Public Works - Woodridge & Knollwood	FY26	2000	2555	53300		2,500.00	2,500.00
10	1	LO		Public Works - Marionbrook	FY26	2000	2665	53300		1,500.00	1,500.00
FY is	require	d, ensure	the correct FY i	is selected.						Requisition Total	\$ 117,250.00

	Comments
HEADER COMMENTS	Provide comments for P020 and P025. Provide preventative maintenance, testing and repair of the Non-Edwards System Technology Fire Alarm and Life Safety Systems for County facilities.
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. Send PO to Vendor, Mary Ventrella, Cathie Figlewski, Clara Gomez, Kristie Lecaros, Kathy (Black) Curcio, and Drew Cormican.
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO. Public Works Committee: 07/01/25 County Board: 07/08/25
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB.



THE COUNTY OF DUPAGE
FINANCE - PROCUREMENT
PREVENTATIVE MAINTENANCE, TEST & REPAIR - NON-EDWARDS FIRE
ALARM / LIFE SAFETY SYSTEM 22-080-FM
BID TABULATION

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				FOX VALLEY	FIRE & SAFETY		ANT FIRE ECTION
NO.	ITEM	UOM	QTY	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE
SECTI	ON 1			•	•		_
1	Group 1 - County Jail	LS	1	\$ 16,150.00	\$ 16,150.00	\$ 58,740.00	\$ 58,740.00
2	Group 2 - JOF	LS	1	\$ 5,700.00	\$ 5,700.00	\$ 20,800.00	\$ 20,800.00
3	Group 3 - JTK Administration Building	LS	1	\$ 7,650.00	\$ 7,650.00	\$ 29,760.00	\$ 29,760.00
4	Group 4 - Care Center	LS	1	\$ 4,450.00	\$ 4,450.00	\$ 4,800.00	\$ 4,800.00
5	Group 5 - Coroner's Office	LS	1	\$ 2,000.00	\$ 2,000.00	\$ 5,120.00	\$ 5,120.00
6	Group 6 - Office of Emergency Management	LS	1	\$ 7,250.00	\$ 7,250.00	\$ 16,320.00	\$ 16,320.00
7	Group 7 - Sheriff's Work Alternative Program, SWAP	LS	1	\$ 700.00	\$ 700.00	\$ 2,560.00	\$ 2,560.00
8	Group 8 - Station #1 (OEM Storage)	LS	1	\$ 800.00	\$ 800.00	\$ 1,280.00	\$ 1,280.00
9	Group 9 - Animal Services	LS	1	\$ 1,770.00	\$ 1,770.00	\$ 2,560.00	\$ 2,560.00
10	Group 10 - DOT Garage	LS	1	\$ 2,450.00	\$ 2,450.00	\$ 3,840.00	\$ 3,840.00
11	Group 11 - Children's Center (CANEC)	LS	1	\$ 1,450.00	\$ 1,450.00	\$ 2,560.00	\$ 2,560.00
12	Group 12 - Standby Power Facility	LS	1	\$ 2,900.00	\$ 2,900.00	\$ 5,120.00	\$ 5,120.00
13	Group 13 - PW, Marionbrook	LS	1	\$ 1,250.00	\$ 1,250.00	\$ 8,960.00	\$ 8,960.00
14	Group 14 - PW, Woodridge	LS	1	\$ 800.00	\$ 800.00	\$ 3,200.00	\$ 3,200.00
15	Group 15 - PW, Knollwood	LS	1	\$ 225.00	\$ 225.00	\$ 1,280.00	\$ 1,280.00
16	Group 16 - Alternates	LS	1	\$ 21,300.00	\$ 21,300.00	\$ 50,560.00	\$ 50,560.00



THE COUNTY OF DUPAGE
FINANCE - PROCUREMENT
PREVENTATIVE MAINTENANCE, TEST & REPAIR - NON-EDWARDS FIRE
ALARM / LIFE SAFETY SYSTEM 22-080-FM
BID TABULATION

\$ 158,945.00

			FOX	(VALLEY F	IRE	& SAFETY		ASSURA PROTE		
NO.	ITEM	HOURS		RATE	E	XTENDED PRICE		RATE	E	XTENDED PRICE
SECTION 2 Labor allowance of estimated work ordered by owner										
17	Hourly Rate - Normal Hours: M-F, 7:00 am - 4:30pm	120	\$	130.00	\$	15,600.00	\$	160.00	\$	19,200.0
18	Premium Rate – after Normal Hours: after 4:30 p.m. (Monday-Friday) and Saturdays	40	\$	175.00	\$	7,000.00	\$	240.00	\$	9,600.0
19	Premium Rate – Sundays and Holidays	20	\$	175.00	\$	3,500.00	\$	320.00	\$	6,400.0
SECTION 2 Labor allowance of estimated work ordered by owner										
_apor	allowance of estimated work ordered by owner									
_abor 20	Hourly Rate - Normal Hours: M-F, 7:00 am - 4:30pm	100	\$	130.00	\$	13,000.00	\$	160.00	\$	16,000.0
		100	\$	130.00 175.00	\$	13,000.00	\$	160.00	·	16,000.0 4,800.0
20	Hourly Rate - Normal Hours: M-F, 7:00 am - 4:30pm Premium Rate – after Normal Hours: after 4:30 p.m.		+			·	·		·	
20	Hourly Rate - Normal Hours: M-F, 7:00 am - 4:30pm Premium Rate – after Normal Hours: after 4:30 p.m. (Monday-Friday) and Saturdays	20	\$	175.00	\$	3,500.00	\$	240.00	\$	4,800.0

NOTES

GRAND TOTAL

Bid Opening 07/21/22 @ 2:30 PM	SJ, VC
Invitations Sent	19
Total Vendors Requesting Documents	4
Total Bid Responses	2

\$ 313,760.00

^{1.} Miscalculations - FOX VALLEY FIRE & SAFETY Extended Price and Grand Total do not match and are highlighted to note error(s). Grand Total sum corrected to \$158,945.00 from \$158,745.00.

^{2.} Miscalculations - ASSURANT FIRE PROTECTION Extended Price and Grand Total do not match and are highlighted to note error(s). Grand Total sum corrected to \$313,760.00 from \$312,800.00.



AMENDMENT FOR CONTRACT RENEWAL

This contract made and entered into by The County of DuPage, 421 North County Farm Road, Wheaton, Illinois, 60187, hereinafter called the "COUNTY" and Fox Valley Fire & Safety Company. located at 2730 Pinnacle Drive, Elgin, IL, 60124, hereinafter called the "CONTRACTOR", witnesseth;

The COUNTY and the CONTRACTOR have previously entered into a Contract, pursuant to Bid #22-080-FM which became effective on 08/28/2022 and which will expire 08/27/2025. The contract is subject to a third of three options to renew for a twelve (12) month period.

The contract renewal shall be effective on the date of last signature and shall terminate on 08/27/2026.

The parties now agree to renew said agreement, upon the same terms as previously agreed to, as specified in the original contract.

CONTRACTOR	THE COUNTY OF DUPAGE
Signature on File	
SIGNATURE	SIGNATURE
Jon Ofenloch	Sara Rogers
PRINTED NAME	PRINTED NAME
Sales	Buyer I
PRINTED TITLE	PRINTED TITLE
5/29/2025	_
DATE	DATE

SECTION 7 - BID FORM PRICING

Contractor shall provide pricing for services listed below.

The County has provided an Excel spreadsheet to assist with pricing tables. Complete Appendix A – Bid for Pricing 22-080-FM. To open the file, click on paperclip and save Excel spreadsheet to computer.

SECTION 1

GROUP 1 - SECTION A - BUILDING #29

JAIL "A" BUILDING *to include 4 dry pipe inspections per visit

SEMI-ANNUAL 1	SEMI-ANNUAL 2
FIRE ALARM (A)	FIRE ALARM (A)
\$ 4,500.00	\$ 4,500.00

 QUARTER 1		QUARTER 2	QUARTER 3	QUARTER 4
June/July/Aug		Sept/Oct/Nov	Dec/Jan/Feb	Mar/Apr/May
*SPRINKLER (A)	*8	PRINKLER (A)	*SPRINKLER (A)	*SPRINKLER (A)
\$ 500.00	\$	500.00	\$ 500.00	\$ 500.00

GROUP 1 - SECTION B - COMPUTER ROOM (JAIL "A")

Semi-Annual Fire Suppression System Service and Inspection

	SEMI-ANNUAL 1		SEMI-ANNUAL 2
NOVEC		NOVEC	
\$	500.00	\$	500.00

GROUP 1 - SECTION C - JAIL "A" BUILDING

Annu	al Fire Pump Flow				
	Test				
\$	600.00				

QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
		TWO INCLUDES	
June/July/Aug	Sept/Oct/Nov	Dec/Jan/Feb	Mar/Apr/May
SPRINKLER (B)	SPRINKLER (B)	SPRINKLER (B)	SPRINKLER (B)
\$ 600.00	\$ 600.00	\$ 600.00	\$ 600.00

QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
June/July/Aug	Sept/Oct/Nov	Dec/Jan/Feb	Mar/Apr/May
SPRINKLER	SPRINKLER	SPRINKLER	SPRINKLER
\$ 250.00	\$ 250.00	\$ 250.00	\$ 250.00

GROUP 1 - SECTION F - SHERIFF'S KITCHEN

Semi-Annual Fire Suppression System Service and Inspection

SEMI-ANNUAL 1		SEMI-ANNUAL 2	
ANSUL		ANSUL	
\$ 75.00	\$	75.00	

TOTAL FOR GROUP 1	\$ 16,150.00
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GROUP 2, SECTION A - BUILDING #33

JUDICIAL OFFICE FACILITY *to include 1 dry pipe inspection per visit

Testing and inspection work shall be scheduled during "off hours" (Typically Saturdays)

QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
June/July/Aug	Sept/Oct/Nov	Dec/Jan/Feb	Mar/Apr/May
*SPRINKLER	*SPRINKLER	*SPRINKLER	*SPRINKLER
\$ 500.00	\$ 500.00	\$ 500.00	\$ 500.00

GROUP 2, SECTION B - JOF PRE-ACTION

Testing and inspection work will be scheduled during "off hours" (Typically Saturdays)

	SEMI-ANNUAL 1	SEMI-ANNUAL 2 PRE-ACTION	
1.5	PRE-ACTION		
\$	300.00	\$ 300.00	

GROUP 2, SECTION C - JOF KITCHEN

SEMI-ANNUAL KITCHEN FIRE SUPPRESSION SYSTEM SERVICE AND INSPECTION

Note: Work on the kitchen will be scheduled off hours.

SEMI-ANNUAL 1		SEMI-ANNUAL 2
ANSUL		ANSUL
\$ 150.00	\$	150.00

GROUP 2, SECTION D - BUILDING #47

JOF ANNEX

Testing and inspection work shall be scheduled during "off hours" (Typically Saturdays)

QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
June/July/Aug	Sept/Oct/Nov	Dec/Jan/Feb	Mar/Apr/May
SPRINKLER	SPRINKLER	SPRINKLER	SPRINKLER
\$ 400.00	\$ 400.00	\$ 400.00	\$ 400.00

GROUP 2, SECTION E - JOF ANNEX

Annual Fire Pump Flow Test			
\$	600.00		

GROUP 2, SECTION F - JOF 509 PARKING GARAGE

Testing and inspection work shall be scheduled during "off hours" (Typically Saturdays)

SEMI-ANNUAL 1 FIRE ALARM			SEMI-ANNUAL 2 FIRE ALARM		

	TOTAL FOR GROUP 2	\$ 5,700.00		

GROUP 3, SECTION A - JTK ADMINISTRATION BUILDING

Testing and inspection work shall be scheduled during "off hours" (Typically Saturdays)

SEMI-ANNUAL 1	SEMI-ANNUAL 2	
FIRE ALARM	FIRE ALARM	
\$ 1,900.00	\$ 1,900.00	

QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
June/July/Aug	Sept/Oct/Nov	Dec/Jan/Feb	Mar/Apr/May
SPRINKLER	SPRINKLER	SPRINKLER	SPRINKLER
\$ 300.00	\$ 300.00	\$ 300.00	\$ 300.00

GROUP 3, SECTION B - JTK ADMIN KITCHEN

SEMI-ANNUAL KITCHEN FIRE SUPPRESSION SYSTEM SERVICE & INSPECTION

Note: Work on the kitchen will be scheduled off hours.

SEMI-ANNUAL 1		SEMI-ANNUAL 2	
	KITCHEN	KITCHEN	
\$	175.00	\$ 175.00	

GROUP 3, SECTION C - JTK ADMIN/ANNEX TUNNEL

QUARTER 1			QUARTER 2		QUARTER 3		QUARTER 4	
	June/July/Aug	,	Sept/Oct/Nov		Dec/Jan/Feb		Mar/Apr/May	
SPR	INKLER/FLOW TEST	SPRIN	KLER/FLOW TEST	SPR	INKLER/FLOW TEST	SPR	INKLER/FLOW TEST	
\$	250.00	\$	250.00	\$	250.00	\$	250.00	

GROUP 3, SECTION D - INFORMATION TECHNOLOGY

SEMI-ANNUAL NOVEC 1230

	SEMI-ANNUAL 1	SEMI-ANNUAL 2		
CLE	EAN AGENT SYSTEM	CLEAN AGENT SYSTI		
\$	300.00	\$	300.00	

GROUP 3, SECTION E - ADMINISTRATION BUILDING 479 PARKING GARAGE

Testing and inspection work shall be scheduled during "off hours" (Typically Saturdays)

SEMI-ANNUAL 1		SEMI-ANNUAL 2
FIRE ALARM		FIRE ALARM
\$ 350.00	\$	350.00

TOTAL FOR GROUP 3	\$ 7 6EO 00
TOTAL FOR GROUP 3	\$ 7,650.00

QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
	QUARTER 2	QUARTERS	QUARTER 4
June/July/Aug	Sept/Oct/Nov	Dec/Jan/Feb	Mar/Apr/May
SPRINKLER	SPRINKLER	SPRINKLER	SPRINKLER
\$ 800.00	\$ 800.00	\$ 800.00	\$ 800.00

GROUP 4, SECTION B

Annual Sprinkler / Fire Pump Flow Test

\$ 600.00

GROUP 4, SECTION C

Annual Fire Suppression Service & Inspection

\$ 250.00

GROUP 4, SECTION D KITCHEN & CAFETERIA

Note: Work on the kitchen will be scheduled off hours.

SEMI-ANNUAL 1		SEMI-ANNUAL 2	
	ANSUL		ANSUL
\$	200.00	\$	200.00

TOTAL FOR GROUP 4 \$ 4,450.00

GROUP 5 - CORONER

Note: To include 1 dry pipe inspection per visit

SEMI-ANNUAL 1		SEMI-ANNUAL 2	
	FIRE ALARM		FIRE ALARM
\$	500.00	\$	500.00

QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
June/July/Aug	Sept/Oct/Nov	Dec/Jan/Feb	Mar/Apr/May
*SPRINKLER	*SPRINKLER	*SPRINKLER	*SPRINKLER
\$ 250.00	\$ 250.00	\$ 250.00	\$ 250.00

TOTAL FOR GROUP 5 \$ 2,000.00

GROUP 6, SECTION A - BUILDING #57

OEM 418 County Farm Road

SEMI-ANNUAL 1			SEMI-ANNUAL 2	
	FIRE ALARM	FIRE ALARM		
\$	250.00	\$	250.00	

QUARTER 1	QUARTER 2	QUARTER 3		QUARTER 4
June/July/Aug	Sept/Oct/Nov	Dec/Jan/Feb		Mar/Apr/May
SPRINKLER	SPRINKLER	SPRINKLER	11/10	SPRINKLER
\$ 250.00	\$ 250.00	\$ 250.00	\$	250.00

GROUP 6, SECTION B - BUILDING #60

DUCOMM ADMINISTRATION 420 County Farm Road

 SEMI-ANNUAL 1	SEMI-ANNUAL 2
FIRE ALARM	FIRE ALARM
\$ 150.00	\$ 150.00

QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
June/July/Aug	Sept/Oct/Nov	Dec/Jan/Feb	Mar/Apr/May
 SPRINKLER	SPRINKLER	SPRINKLER	SPRINKLER
\$ 250.00	\$ 250.00	\$ 250.00	\$ 250.00

GROUP 6, SECTION C - BUILDING #60 DUCOMM ADMINISTRATION 420 County Farm Road SEMI-ANNUAL 1 SEMI-ANNUAL 2

KITCHEN FIRE SUPPRESSION SYSTEM ANSUL
\$ 150.00 \$ \$ 150.00 \$

GROUP 6, SECTION C - BUILDING #60

DUCOMM ECC 420 County Farm Road

SEMI-ANNUAL 1 FIRE ALARM		SEMI-ANNUAL 2
		FIRE ALARM
\$	350.00	\$ 350.00

GROUP 6, SECTION E - BUILDING #60, DUCOMM ECC - 2 SYSTEMS (1 Panel)

420 County Farm Road

SEMI-ANNUAL 1	SEMI-ANNUAL 2
PRE-ACTION	PRE-ACTION
\$ 450.00	\$ 450.00

GROUP 6, SECTION F - BUILDING #60, DUCOMM ECC NOVEC 1230 - 3 SYSTEMS (1 Panel)

420 County Farm Road

SEMI-ANNUAL 1	SEMI-ANNUAL 2
NOVEC	NOVEC
\$ 375.00	\$ 375.00

GRO	DUP 6, SECTION G - E	BUILDING #2, WORK RELEAS	E 424 County Farm Road
124.	SEMI-ANNUAL 1	SEMI-ANNUAL 2	
	FIRE ALARM	FIRE ALARM	
\$	400.00	\$ 400.00	-1

QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
June/July/Aug	Sept/Oct/Nov	Dec/Jan/Feb	Mar/Apr/May
*SPRINKLER	*SPRINKLER	*SPRINKLER	*SPRINKLER
\$ 250.00	\$ 250.00	\$ 250.00	\$ 250.00

TOTAL FOR GROUP 6 \$ 7,650.00

-	OI 7 - OIILIMIT O	NORK ALTERNATIVE PROGE	(AIVI (S.VV.A.F.)	
	QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
1	SECURITY	SECURITY	SECURITY	SECURITY
\$	175.00	\$ 175.00	\$ 175.00	\$ 175.00

TOTAL FOR GROUP 7 \$ 700.00

| SEMI-ANNUAL 1 | SEMI-ANNUAL 2 | | FIRE ALARM | FIRE ALARM | | \$ 400.00 | \$ 400.00

TOTAL FOR GROUP 8 \$ 800.00

GROUP 9 - ANIMAL SERVICES - BUILDING #18

SECTION A - BUILDING #18

SEMI-ANNUAL 1	SEMI-ANNUAL 2	
FIRE ALARM	FIRE ALARM	
\$ 385.00	\$ 385.00	

QUARTER 1	QUARTER 2	QUARTER 3		QUARTER 4
June/July/Aug	Sept/Oct/Nov	Dec/Jan/Feb		Mar/Apr/May
SPRINKLER	SPRINKLER	SPRINKLER	11.8	SPRINKLER
\$ 250.00	\$ 250.00	\$ 250.00	\$	250.00

TOTAL FOR GROUP 9 \$ 1,770.00

GROUP 10 - DOT HIGHWAY GARAGE - BUILDING #14

SECTION A

	SEMI-ANNUAL 1		SEMI-ANNUAL 2	
FIRE ALARM		FIRE ALARM		
\$	225.00	\$	225.00	

	QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
	June/July/Aug	Sept/Oct/Nov	Dec/Jan/Feb	 Mar/Apr/May
-	SPRINKLER	SPRINKLER	SPRINKLER	SPRINKLER
\$	250.00	\$ 250.00	\$ 250.00	\$ 250.00

ROUP 10 - DOT FLEET ECTION B	GARAGE - BUILDING #28		
QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
June/July/Aug	Sept/Oct/Nov	Dec/Jan/Feb	Mar/Apr/May
SPRINKLER	SPRINKLER	SPRINKLER	SPRINKLER
\$ 250.00	\$ 250.00	\$ 250.00	\$ 250.00

the first of the Department with property for the first of the Property of the First of the Firs	
TOTAL FOR GROUP 10	\$ 2,450.00

GROUP 11 - CHILDREN'S CENTER (CANEC) - BUILDING #55 SECTION A

SEMI-ANNUAL 1		SEMI-ANNUAL 2	
	FIRE ALARM		FIRE ALARM
\$	225.00	\$	225.00

QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
June/July/Aug	Sept/Oct/Nov	Dec/Jan/Feb	Mar/Apr/May
SPRINKLER	SPRINKLER	SPRINKLER	SPRINKLER
\$ 250.00	\$ 250.00	\$ 250.00	\$ 250.00

TOTAL FOR GROUP 11 \$1,450.00

GROUP 12 - STANDBY POWER FACILITY - BUILDING #58

SECTION A (MUST INCLUDE TESTING OF DEVICES ABOVE GENERATORS)

SEMI-ANNUAL 1	SEMI-ANNUAL 2	
FIRE ALARM		FIRE ALARM
\$ 300.00	\$	300.00

QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
June/July/Aug	Sept/Oct/Nov	Dec/Jan/Feb	Mar/Apr/May
SPRINKLER	SPRINKLER	SPRINKLER	SPRINKLER
\$ 250.00	\$ 250.00	\$ 250.00	\$ 250.00

GROUP 12 - STANDBY POWER FACILITY - BUILDING #58 SECTION B

SEMI-ANNUAL 1	SEMI-ANNUAL 2
Fike HFC-227EA	Fike HFC-227EA
\$ 300.00	\$ 300.00

SEMI-ANNUAL 1	SEMI-ANNUAL 2	
Pre-Action		Pre-Action
\$ 350.00	\$	350.00

TOTAL FOR GROUP 12	\$ 2,300.00
	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7

GROUP 13 - MARIONBRO	оок		
QUARTER 1	QUARTER 2	QUARTER 3	QUARTER 4
June/July/Aug	Sept/Oct/Nov	Dec/Jan/Feb	Mar/Apr/May
SPRINKLER	SPRINKLER	SPRINKLER	SPRINKLER
\$ 250.00	\$ 250.00	\$ 250.00	\$ 250.00

Annual Fire Alarm 100% \$ 250.00

GROUP 14 - WOODRIDGE
Annual 100%
\$ 800.00

GROUP 15 - KNOLLWOOD
Annual 100%
\$ 225.00

TOTAL FOR GROUP 13 - 15 \$ 2,275.00

 GROUP 16, ALTERNATE #1

 ITEM
 QTY
 PRICE
 EXTENDED PRICE

 5-Year Hydrostatic Test of Standpipe
 20
 \$ 500.00
 \$ 10,000.00

 GROUP 16, ALTERNATE #2

 ITEM
 QTY
 PRICE
 EXTENDED PRICE

 5-Year Roof Standby Pipe Test Buildings
 4
 \$ 200.00
 \$ 800.00

GROUP 16, ALTERNATE #3

ITEM QTY PRICE EXTENDED PRICE

5-Year Internal Obstruction for Sprinkler System and 15 \$ 500.00 \$ 7,500.00

5-Year Internal Inspection @ FD Check Valve

GROUP 16, ALTERNATE #4 ITEM QTY PRICE EXTENDED PRICE 3-Year Pre-Action Air Test 4 \$ 350.00 1,400.00 & Full Trip Test 3-Year Pre-Action Internal 4 400.00 \$ 1,600.00 Inspections

TOTAL FOR GROUP 16 \$ 21,300.00

TOTAL FOR SECTION 1	\$ 76,
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645.00

SECTION 2

Allowance for estimated items (Hourly Rates and Parts) to be ordered by owner (for work specified as additional work during regular and after hours) when required.

NOTE: All work previously specified as "off hour" work does NOT qualify for any additional labor allowance under Section 2.

Labor allowance of estimated work ordered by owner (other than for Section 1 work) Normal hours

ITEM	HOURS	RATE	EXTENDED PRICE
Hourly Rate - Normal Hours: M-F, 7:00 am - 4:30pm	120	\$ 130.00	\$ 15,600.00
Premium Rate – after Normal Hours: after 4:30 p.m. (Monday-Friday) and Saturdays	40	\$ 175.00	\$ 7,000.00
Premium Rate – Sundays and Holidays	20	\$ 175.00	\$ 3,500.00

Sprinkler System Work outside the scope of maintenance/testing/repair (Changes ordered by owner, valve replacement, pipe replacement, sprinkler head replacement, etc.) Subcontractors may be used for sprinkler work at your following Sprinkler System work rates.

HOURS	RATE	EXTENDED PRICE
100	\$ 130.00	\$ 13,000.00
20	\$ 175.00	\$ 3,500.00
40	\$ 175.00	\$ 7,000.00
% of Markup = pplier invoices for verific	cation.	\$ 32,500.00
	TOTAL FOR SECTION 2	\$82,100.00
	100 20 40 Cost % of Markup =	100 \$ 130.00 20 \$ 175.00 40 \$ 175.00 Cost % of Markup = ipplier invoices for verification. rkup = \$27,500.00

					(SEC	13-2-07-11-0 D UFF07	RAND TOTAL & SECTION 2	S 1E0	,745.	00
GRAND To (In words)	One	hundred zero ce		eight	thousand,	seven	hundred	fourty	five	dollars
Delivery Warranty:	10	year	lays after r	receipt of	order.					
Extended \	Varran	ty Options: _		dditional	information when	e availabl	e with bid sub	omission.		

SECTION 8 - BID FORM SIGNATURE PAGE

The Contractor agrees to provide the service, and/or supplies as described in this solicitation and subject, without limitation, to all specifications, terms, and conditions herein contained. Bidder shall acknowledge receipt of each addendum issued in the space provided on the bid form.



CORPORATE SEAL (If available)

BID MUST BE SIGNED AND NOTARIZED (WITH SEAL) FOR CONSIDERATION

Subscribed and sworn to before me this 20TH day of TUTY AD, 20 23

My Commission Expires: 10 16 2023

Motary Public - State of Illinois My Commission Expires Oct 16, 2023

SEAL



☑ No

DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	22-080-FM
COMPANY NAME:	Fox Velley Fire & Safety
CONTACT PERSON:	Jon Ofenloch
CONTACT EMAIL:	Jonofenloch@foxvalleyfire.com

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, co
bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contractin
and political action committees to which the contracting person has made contributions.
Has the Bidder made contributions as described above?
☐ Yes

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- · With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

Ethics | DuPage Co, IL

The full text of the County's Procurement Ordinance is available at:

ARTICLE VI. - PROCUREMENT | Code of Ordinances | DuPage County, IL | Municode Library

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Printed Name: Jon Ofenloch	Signature: Signature on File
Title: Sales	Date: 5/29/2025

Public Works Requisition \$30,000 and Over



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

AWARDING RESOLUTION ISSUED TO DYNAMIC INDUSTRIAL SERVICES, INC. FOR REHABILITATION OF A 250,000 GALLON ELEVATED WATER STORAGE TANK (GREENE ROAD WATER TOWER) FOR PUBLIC WORKS (CONTRACT TOTAL AMOUNT \$390,600)

WHEREAS, bids have been taken and processed in accordance with County Board policy; and

WHEREAS, the Public Works Committee recommends County Board approval for the issuance of a contract to Dynamic Industrial Services, Inc., for rehabilitation of a 250,000 gallon elevated water storage tank (Greene Road Water Tower), for the period of July 8, 2025 through November 30, 2026, for Public Works.

NOW, THEREFORE BE IT RESOLVED, that said contract is for rehabilitation of a 250,000 gallon elevated water storage tank (Greene Road Water Tower), for the period of July 8, 2025 through November 30, 2026, for Public Works, be, and it is hereby approved for issuance of a contract by the Procurement Division to Dynamic Industrial Services, Inc., 722 W. Exchange Street, Suite 3B, Crete, Illinois, 60417, for a contract total amount not to exceed \$390,600, per lowest responsible bid #25-069-PW.

Enacted and approved this 8th day of July, 2025 at Wheaton, Illinois.

	DEBORAH A. CONROY, CHAIR
	DU PAGE COUNTY BOARD
Attest:	
	JEAN KACZMAREK, COUNTY CLERK



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 #: 25-069-PW	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$390,600.00		
COMMITTEE: PUBLIC WORKS	TARGET COMMITTEE DATE: 07/01/2025	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS: \$390,600.00		
	CURRENT TERM TOTAL COST: \$390,600.00	MAX LENGTH WITH ALL RENEWALS: ONE YEAR	CURRENT TERM PERIOD: INITIAL TERM		
Vendor Information		Department Information			
VENDOR: Dynamic Industrial Services, Inc	VENDOR #:	DEPT: Public Works	DEPT CONTACT NAME: Sean Reese		
VENDOR CONTACT: Afrodite Bairaktaris	VENDOR CONTACT PHONE: 708-665-4415	DEPT CONTACT PHONE #: 630.985.7400	DEPT CONTACT EMAIL: sean.reese@dupagecounty.gov		
VENDOR CONTACT EMAIL: info@dynamicind.net	VENDOR WEBSITE:	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.). Request for approval for rehabilitation of the 250,000 gallon elevated water storage tank (Greene Road Water Tower). The rehabilitation includes pressure washing, power tool cleaning, and applying an overcoat system to the exterior.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Exterior rehabilititation of the Greene Road water tower is needed at this time. The tower is located within the DuPage County water system that provides potable drinking water to DuPage County customers.

	SECTION 2: DECISION MEMO REQUIREMENTS
DECISION MEMO NOT REQUIRED LOWEST RESPONSIBLE QUOTE/BID	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required. • (QUOTE < \$25,000, BID ≥ \$25,000; ATTACH TABULATION)
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 Purcl	hase Order To:	Sena	l Invoices To:				
Vendor: Dynamic Industrial Services, Inc.	Vendor#:	Dept: Public Works	Division: Public Works				
Attn: Afrodite Bairaktaris			Email: pwaccountspayable@dupagecoun y.gov				
Address: 722 W. Exchange Street Suite 3B	City: Crete	Address: 7900 S. Rt. 53	City: Woodridge				
State: Illinois	Zip: 60417	State: Illinois	Zip: 60517				
Phone:	hone: Fax:		Fax:				
Send Pa	nyments To:		Ship to:				
Vendor:	Vendor#:	Dept:	Division:				
Same as Above	Same as Above	Same as Above	Same as Above				
Attn:	Email:	Attn:	Email:				
Address:	City:	Address:	City:				
State:	Zip:	State:	Zip:				
Phone:	Fax:	Phone:	Fax:				
Shi	_ ipping	Con	tract Dates				
Payment Terms:	FOB:	Contract Start Date (PO25):	Contract End Date (PO25):				
PER 50 ILCS 505/1	Destination	Jul 8, 2025	Nov 30, 2026				

Purchase Requisition Line Details											
LN	Qty	UOM	ltem Detai l (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	EA		Greene Road Water Tower Rehabilitation	FY25	2000	2640	54080		10,000.00	10,000.00
2	1	EA		Greene Road Water Tower Rehabilitation	FY26	2000	2640	54080		362,000.00	362,000.00
3	1	EA		Contingency 5%	FY26	2000	2640	54080		18,600.00	18,600.00
FYi	s require	d, assure	the correct FY i	s selected.						Requisition Total	\$ 390,600.00

Comments
Provide comments for P020 and P025.
Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO.
Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO.
Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB.

BID PRICING FORM

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	25-069-PW
COMPANY NAME:	DYNAMIC INDUSTRIAL Services Inc.
CONTACT PERSON:	ANTONIOS BAILAKTANS
CONTACT EMAIL:	infoedynamic inp. NET

Section II: Pricing

All goods are to be shipped F.O.B. Destination, delivered, and installed.

NO.	ITEM	UOM	QTY	PRICE	EXTENDED PRICE
1	Exterior Pressure Wash	LS	1	\$ 30,000.00	\$ 30,000.00
2	Exterior Touch-Ups and Overcoat	LS	1	\$ 157,550.0	\$ 157.550.
3	Weld Seal Access Tube Vent	LS	1	\$ 8,000.00	\$ 8,000.00
4	Frost-Free Roof Vent and Appurtenances	LS	1	\$ 10,000.00	\$ 10,000.00
5	Interior Wet Pressure Washing and Sediment Removal	LS	1	\$ 10,000,00	\$ 10,000.00
6	Interior Wet Touch Ups	LS	1	\$ 79,450,00	\$ 79,450.00
7	Fill Pipe Insulation and Jacket	LS	1	\$ 7,000.00	\$ 7,000.00
8	Interior Dry Repaint	LS	1	\$ 30,000,00	\$ 30,000.00
9	Tank Mixer and Appurtenances	LS	1	\$ 17,000,00	\$ 17,000.00
10	Tank Lettering (Logo)	LS	1	\$ 9,000.00	\$ 9,000.00
11	Concrete Foundation Repair	LS	1	\$ 3000.00	\$ 3000.00
12	Concrete Foundation Coating Application	LS	1	\$ 3000.00	\$ 3000,00
13	Fall Prevention Devices (Interior & Exterior)	LS	1	\$ 8,000.00	\$ 8,000.00
				GRAND TOTAL	\$372 000.

(In words) HARE Flundres Deventy

The County of DuPage WATER TOWER REHABILITATION 25-069-PW Page 22 of 26



Exhibit A-001

June 10,2025

The County of DuPage Illinois 421 N. County Farm Road Wheaton, IL 60187

Contracts-25-069-PW

Dynamic Industrial Services Inc. proposes the following construction schedule for the completion of Water Tower Rehabilitation

Completion Schedule: 10-01-25 thru 7-15-2026

It would be our intention to complete this project within the proposed schedule above

Thank You for the Opportunity,

Afrodite K. Bairaktaris

President

708-665-4415 Mobile Info@Dynamicind.net DIS, INC. 3546 Ridge Rd. Lansing, IL 60438

Section III: Certification

By signing below, the Bidder agrees to provide the required goods and/or services described in the Bid Specifications for the prices quoted on this Bid Pricing Form.

Printed Name: ATONIOS Signature:

Title: Vice President

Date: 6-11-2025



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

MANDATORY FORM

Section I: Contact Information

Complete the contact information below.

BID NUMBER:	25-069-PW
COMPANY NAME:	DYNAMIC INDUSTRIAL Services Inc.
MAIN ADDRESS:	722 W. Exchange STREET Suite 3-15
CITY, STATE, ZIP CODE:	Crere IL 60417
TELPHONE NO.:	708-665-4415
BID CONTACT PERSON:	DeDe BAICATIONIS
CONTACT EMAIL:	INFOCO & MAMICIND. NET

Section II: Contract Administration Information

Complete the contract administration information below.

CORRES	PONDENCE TO CONTRACTOR:	REMIT TO CONTRACTOR:					
NAME:	SYNAMIC INDUSTRIAL FOR	NAME:	DYNAMIK INDUSTRIAL SENVICE I				
CONTACT:	De De Baintians	CONTACT:	Afrenite (DeDe) BAINKTANS				
ADDRESS:	722 W. Exchange ST.	ADDRESS:	722 W. FacHange Si. Suite				
CITY, ST., ZIP:	Crete, IL GOULT	CITY, ST., ZIP:	Crose IL 60417				
PHONE NO.:	708-665-4415	PHONE NO.:	708-665-4416				
EMAIL:	INFOCK/NAMIZIND. NET	EMAIL:	INFOR dynamic ino. NET				

Rev. 1-2025

Section III: Certification

The undersigned certifies that	at they are:									
☐ The Owner or Sole Proprietor	☐ A Member authorized to sign on behalf of the Partnership	Officer of the Corporation	☐ A Member of the Joint Venture							
Herein after called the Bidder and that the members of the Partnership or Officers of the Corporation are as follows:										
(President	(President or Partner) (Vice-President or Partner)									
	or Partner)		urer or Partner)							
that this bid is made without forms of agreement and the of the Procurement Officer	collusion with any other person contract specifications for the a , DuPage County, 421 North entioned in the contract docum	n, firm or corporation; that h bove designated purchase, County Farm Road, Whea	principals are those named herein; e has fully examined the proposed all of which are on file in the office aton, Illinois 60187, and all other ached exhibits, including Addenda							
and other means of constru		services necessary to furnis	essary machinery, tools, apparatus, sh all the materials and equipment be therein prescribed.							
of the Bidder and in accorda	하는 사람들은 사람들은 사람들은 사람들이 되는 것이 아니라 하는 것이 없는 것이 없는 것이 없었다. 그리고 없는 것이 없는 것이 없는 것이 없는 것이다.	nent or by-laws of the Corpo	this certification/affidavit on behalf pration, and the laws of the State of							
	d Statutes 5/33 E-3 or 5/33 E-4		act as a result of a violation of either or as a result of a violation of 820							
	at they have examined and cand that the statements contained		d have checked the same in detail t.							
were properly adopted by th held and have not been repe	e Board of Directors of the Corp ealed nor modified, and that the	ooration at a meeting of said same remain in full force ar	hed hereto and made a part hereof I Board of Directors duly called and id effect. (Bidder may be requested act documents authority to do so.)							
			arable to the items specified in this o verify references of business and							
		1 (3 (4 (1 (1 (1 (1 (1 (1 (1 (1 (1	contract documents, and that it will it quantity adjustments based upon							
By signing below, the Bidde true and correct to the best		andatory Form and certifies	that the information on this form is							
	wios Britakianis	Signature:								
Title: // ce //	reiant	Date: 6-11-	-25							

Rev. 1-2025



THE COUNTY OF DUPAGE FINANCE - PROCUREMENT WATER TOWER REHABILITATION 25-069-PW BID TABULATION

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•	

				V					
Dy					strial Services,		Neumann		
			In	~ -	Contractors, Inc.			, Inc.	
NO.	ITEM	UOM	QTY	PRICE	EXTENDED PRICE	I PRIO		E EXTEN	
1	Exterior Pressure Wash	LS	1	\$ 30,000.00	\$ 30,000.00	\$	73,300.00	\$	73,300.00
2	Exterior Touch-Ups and Overcoat	LS	1	\$ 157,550.00	\$ 157,550.00	\$	303,000.00	\$	303,000.00
3	Weld Seal Access Tube Vent	LS	1	\$ 8,000.00	\$ 8,000.00	\$	9,400.00	\$	9,400.00
4	Frost-Free Roof Vent and Appurtenances	LS	1	\$ 10,000.00	\$ 10,000.00	\$	9,000.00	\$	9,000.00
5	Interior Wet Pressure Washing and Sediment Removal	LS	1	\$ 10,000.00	\$ 10,000.00	\$	33,400.00	\$	33,400.00
6	Interior Wet Touch Ups	LS	1	\$ 79,450.00	\$ 79,450.00	\$	40,900.00	\$	40,900.00
7	Fill Pipe Insulation and Jacket	LS	1	\$ 7,000.00	\$ 7,000.00	\$	51,600.00	\$	51,600.00
8	Interior Dry Repaint	LS	1	\$ 30,000.00	\$ 30,000.00	\$	80,200.00	\$	80,200.00
9	Tank Mixer and Appurtenances	LS	1	\$ 17,000.00	\$ 17,000.00	\$	35,800.00	\$	35,800.00
10	Tank Lettering (Logo)	LS	1	\$ 9,000.00	\$ 9,000.00	\$	24,500.00	\$	24,500.00
11	Concrete Foundation Repair	LS	1	\$ 3,000.00	\$ 3,000.00	\$	10,700.00	\$	10,700.00
12	Concrete Foundation Coating Application	LS	1	\$ 3,000.00	\$ 3,000.00	\$	7,500.00	\$	7,500.00
13	Fall Prevention Devices (Interior & Exterior)	LS	1	\$ 8,000.00	\$ 8,000.00	\$	15,400.00	\$	15,400.00
			(GRAND TOTAL	\$ 372,000.00			\$	694,700.00

NOTES

- 1. Public Works has requested a contingency of 5%, \$372,000.00 + \$18,600.00 (contingency) = \$390,600.00.
- 2. Era-Valdivia Contractors, Inc. has been deemed non-responsive for not including required document(s).
- 3. L.C. United Painting Co., Inc. has been deemed non-responsive for not including required document(s).

Bid Opening 6/12/2025 @ 2:30 PM	HK, SR
Invitations Sent	49
Total Vendors Requesting Documents	6
Total Bid Responses	4



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	25-069-PW
COMPANY NAME:	DYNAMIC INDUSTRIAL Services INC
CONTACT PERSON:	PATONIOS BAIRDETARIS
CONTACT EMAIL:	INFORMATINO. NET

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

11		.	12	2788 37			
Has	the	Bidder	made	contributions	as	described	above?

☐ Yes

BONO

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE
	MA			

Rev. 1-2025

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

Ø No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL
NA		

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- · Annual disclosure for multi-year contracts on the anniversary of said contract
- · With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

Ethics | DuPage Co, IL

The full text of the County's Procurement Ordinance is available at:

ARTICLE VI. - PROCUREMENT | Code of Ordinances | DuPage County, IL | Municode Library

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it ha	s received, read, and understands these requirements, and
certifies that the information submitted on this form is true ar	nd correct to the best of its knowledge.
Printed Name: 4 Nionios Sairakira	Signature:
11 1	
Title: Vice President	Date: 6-11-25
fille:	Date.

Rev. 4-2025



Public Works Requisition \$30,000 and Over

421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: PW-P-0018-25 Agenda Date: 7/1/2025 Agenda #: 18.B.

AWARDING RESOLUTION ISSUED TO MID-AMERICAN WATER FOR WATEROUS PACER HYDRANTS FOR PUBLIC WORKS (CONTRACT TOTAL AMOUNT \$62,500)

WHEREAS, bids have been taken and processed in accordance with County Board policy; and

WHEREAS, the Public Works Committee recommends County Board approval for the issuance of a contract to Mid-American Water, for Waterous Pacer Hydrants, for the period of June 26, 2025 to June 25, 2026, for Public Works.

NOW, THEREFORE BE IT RESOLVED, that said contract is for Waterous Pacer Hydrants, for the period of June 26, 2025 through June 25, 2026, for Public Works, be, and it is hereby approved for issuance of a contract by the Procurement Division to Mid-American Water, 1500 Mountain St, Aurora, Illinois, 60502, for a contract total amount not to exceed \$62,500, per lowest responsible bid #24-078-PW, first of three options to renew.

Enacted and approved this 8th day of July, 2025 at Wheaton, Illinois.

	DEBORAH A. CONROY, CHAIR
	DU PAGE COUNTY BOARD
Attest:	
	JEAN KACZMAREK, COUNTY CLERK



Procurement Review Comprehensive Checklist Procurement Services Division

This form must accompany all Purchase Order Requisitions

SECTION 1: DESCRIPTION						
General Tracking	eneral Tracking Contract Terms					
FILE ID#:	RFP, BID, QUOTE OR RENEWAL #: 24-078-PW	INITIAL TERM WITH RENEWALS: INITIAL TERM TOTAL COS 1 YR + 3 X 1 YR TERM PERIODS \$62,500.00				
COMMITTEE: PUBLIC WORKS	TARGET COMMITTEE DATE: 07/01/2025	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$250,000.00 CURRENT TERM PERIOD: FIRST RENEWAL			
	CURRENT TERM TOTAL COST: \$62,500.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS				
Vendor Information		Department Information				
VENDOR: Mid-American Water	VENDOR #: 11215	DEPT: Public Works	DEPT CONTACT NAME: Dwane Kozak			
VENDOR CONTACT: Eric Lowe	VENDOR CONTACT PHONE: 847-345-7388	DEPT CONTACT PHONE #: 630-985-7400	DEPT CONTACT EMAIL: dwane.kozak@dupagecounty.gov			
VENDOR CONTACT EMAIL: ericlowe@midamericanwater.com	VENDOR WEBSITE:	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.). Recommendation for the approval of a contract to Mid American Water, for Waterous Pacer Hydrants, for the period of June 26, 2025 to June 25,2026, for a total contract amount not to exceed \$62,500, per most qualified offer, per bid #24-087-PW, First out of three to renew.

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

Replacement of water hydrants is necessary periodically due to deterioration of old hydrants from age and/or unrepairable hydrant damage. Having these hydrants in Public Works stock is prudent so they are available when needed, particularly in an emergency situation.

SECTION 2: DECISION MEMO REQUIREMENTS						
DECISION MEMO NOT REQUIRED LOWEST RESPONSIBLE QUOTE/BIC	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required. $(QUOTE < \$25,000, BID \ge \$25,000; ATTACH TABULATION)$					
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	Purchase Order To:	Send Invoices To:			
Vendor: Mid-American Water	Vendor#: 11215	Dept: Public Works	Division: Public Works		
tn: Email: ericlowe@midamericanwater.co		Attn: Magda	Email: pwaccountspayable@dupagecour y.gov		
Address: 1500 Mountain St	City: Aurora	Address: 7900 S Rt 53	City: Woodridge		
State: Illinois	Zip: 60502	State: Ilinois	Zip: 60517		
Phone: 847-345-7388	Fax:	Phone: 630-985-7400	Fax:		
Se	end Payments To:	Ship to:			
Vendor: Same as Above	Vendor#:	Dept: Same as Above	Division:		
Attn:	Email:	Attn:	Email:		
Address:	City:	Address:	City:		
State:	Zip:	State:	Zip:		
Phone:	Fax:	Phone:	Fax:		
	 Shipping	Con	tract Dates		
Payment Terms: FOB:		Contract Start Date (PO25):	Contract End Date (PO25):		
PER 50 ILCS 505/1 Destination		Jun 26, 2025	Jun 25, 2026		

	Purchase Requisition Line Details										
LN	Qty	UOM	ltem Detai l (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	EA		Furnish and deliver waterous pacer hydrants on an as needed basis for DCPW Underground Maintenance.	FY25	2000	2640	52250		52,500.00	52,500.00
2	1	EA		Furnish and deliver waterous pacer hydrants on an as needed basis for DCPW Underground Maintenance.	FY26	2000	2640	52250		10,000.00	10,000.00
FY	is require	d, assure	the correct FY i	s selected.						Requisition Total	\$ 62,500.00

	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 documents have been attached: W-9 Vendor Ethics Disclosure Statement			

SECTION 7 - BID FORM PRICING

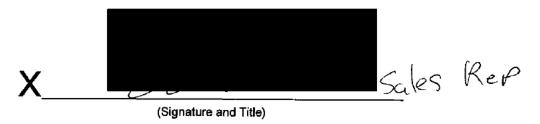
Quantities listed are canvassing quantities and intended to establish pricing. Goods shall be shipped F.O.B. Destination. Pricing shall include shipping to DuPage County Public Works, Underground Maintenance, 17W440 N. Frontage, Darien, IL, 60561.

NO	ITEM	UOM	QTY	PRICE	EXTENDED PRICE
1	Red 5-1/4" Waterous Pacer Hydrant 6'	EA	3	\$5005.53	\$ 15,016.59
2	Red 5-1/4" Waterous Pacer Hydrant 5'6"	EA	3	\$ 4925.92	\$ 14,777.76
3	Yellow 5-1/4" Waterous Pacer Hydrant 6'	EA	3	\$ 5005.53	\$15,016.59
4	Yellow 5-1/4" Waterous Pacer Hydrant 5'6"	EA	3	\$4925.92	\$14,777.76
				GRAND TOTAL	\$ 59,588.70

GRAND TOTAL fifty-Nine thousand five Mundredeighty eight and Seventy Cents.

SECTION 8 - BID FORM SIGNATURE PAGE

The Contractor agrees to provide the service, and/or supplies as described in this solicitation and subject, without limitation, to all specifications, terms, and conditions herein contained. Bidder shall acknowledge receipt of each addendum issued in the space provided on the bid form.



CORPORATE SEAL (If available)

BID MUST BE SIGNED AND NOTARIZED (WITH SEAL) FOR CONSIDERATION

Subscrib	ed and sworn to before me	e this 7 day of June AD, 20 24
		My Commission Expires: 10 /12 /2027
	(Notary Public)	
		"OFFICIAL SEAL"
		Service Richard McCleish ' 5
		MOTARY PUBLIC, STATE OF ILLINOIS 2
		COMMISSION NO. 979407 MY COMMISSION EXPIRES 10/12/2027
		Cummunum
		SEAL

SECTION 9 - MANDATORY FORM WATEROUS PACER HYDRANTS 24-057-PW

(PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION) Full Name of Bidder Main Business Address City, State, Zip Code Telephone Number Email Address **Bid Contact Person** The undersigned certifies that he is: the Owner/Sole a Member authorized to a Member of the Joint sign on behalf of the Proprietor Venture Partnership Herein after called the Bidder and that the members of the Partnership or Officers of the Corporation are as follows: (President or Partner) (Vice-President or Partner) (Secretary or Partner) (Treasurer or Partner) Further, the undersigned declares that the only person or parties interested in this bid as principals are those named herein; that this bid is made without collusion with any other person, firm or corporation; that he has fully examined the proposed forms of agreement and the contract specifications for the above designated purchase, all of which are on file in the office of the Procurement Officer, DuPage County, 421 North County Farm Road, Wheaton, Illinois 60187, and all other documents referred to or mentioned in the contract documents, specifications and attached exhibits, including Addenda No. ___, ____, and ___ issued thereto. Further, the undersigned proposes and agrees, if this bid is accepted, to provide all necessary machinery, tools, apparatus, and other means of construction, including transportation services necessary to furnish all the materials and equipment specified or referred to in the contract documents in the manner and time therein prescribed. Further, the undersigned certifies and warrants that he is duly authorized to execute this certification/affidavit on behalf of the Bidder and in accordance with the Partnership Agreement or by-laws of the Corporation, and the laws of the State of Illinois and that this Certification is binding upon the Bidder and is true and accurate. Further, the undersigned certifies that the Bidder is not barred from bidding on this contract as a result of a violation of either 720 Illinois Compiled Statutes 5/33 E-3 or 5/33 E-4, bid rigging or bid-rotating, or as a result of a violation of 820 ILCS 130/1 et seq., the Illinois Prevailing Wage Act. The undersigned certifies that he has examined and carefully prepared this bid and has checked the same in detail before submitting this bid, and that the statements contained herein are true and correct. If a Corporation, the undersigned, further certifies that the recitals and resolutions attached hereto and made a part hereof were properly adopted by the Board of Directors of the Corporation at a meeting of said Board of Directors duly called and held and have not been repealed nor modified, and that the same remain in full force and effect. (Bidder may be requested to provide a copy of the corporate resolution granting the individual executing the contract documents authority to do so.) Further, the Bidder certifies that he has provided equipment, supplies, or services comparable to the items specified in this contract to the parties listed in the reference section below and authorizes the County to verify references of business and credit at its option.

Finally, the Bidder, if awarded the contract, agrees to do all other things required by the contract documents, and that he will take in full payment therefore the sums set forth in the bidding schedule (subject to unit quantity adjustments based upon actual usage).

CONTRACT ADMINISTRATION INFORMATION:

CORRESPON	DENCE TO CONTRACTOR:	REMIT TO CO	NTRACTOR:	
NAME	Fric Lowe	NAME		
CONTACT	841-345-7388	CONTACT		
ADDRESS	1500 Mountain St	ADDRESS		
CITY ST ZIP	Aurora, FL 60502	CITY ST ZIP		
TX	847-345-7388	TX		
FX		FX		
EMAIL	Eric lowe Winid American Watercay	EMAIL		
COUNTY BILL	TO INFORMATION:	COUNTY SHIP	TO INFORMATION:	
DuPage County Public Works		DuPage Count	y Public Works	
7900 S. Route 53		Underground Maintenance		
Woodridge, IL 60517		Attn: Dwane Kozak		
TX: (630) 985-7400		17W440 N. Frontage		
EMAIL: PWAccountsPayable@dupagecounty.gov		Darien, IL 60561		
		TX: 630-985-7400		
		EMAIL: dwane.	.kozak@dupagecounty.gov	

ALL MATERIALS MUST BE BID AND SHIPPED F.O.B. DESTINATION, DELIVERED, AND INSTALLED (FREIGHT INCLUDED IN PRICE)



The County of DuPage
Finance Department
Procurement Division, Room 3-400
421 North County Farm Road
Wheaton, Illinois 60187

CONTRACT RENEWAL AGREEMENT

This contract, made and entered into by The County of DuPage, 421 North County Farm Road, Wheaton, Illinois, 60187, hereinafter called the "COUNTY" and Mid American Water, located at 1500 Mountain St, Aurora, IL 60502, hereinafter called the "CONTRACTOR", witnesseth;

The COUNTY and the CONTRACTOR have previously entered into a Contract, pursuant to Bid #24-078-PW which became effective on 6/26/2024 and which will expire 6/25/2025. The contract is subject to the first of three options to renew for a twelve (12) month period.

The contract renewal shall be effective on the date of last signature and shall terminate on 6/25/2026.

The parties now agree to renew said agreement, upon the same terms as previously agreed to, as specified in the original contract.

THE COUNTY OF DUPAGE	CONTRACTOR
SIGNATURE	SIGNATURE
Sara Rogers	Eric Lowe
PRINTED NAME	PRINTED NAME
Buyer I	Outside Sales
PRINTED TITLE	PRINTED TITLE
	6/6/25
DATE	DATE



THE COUNTY OF DUPAGE FINANCE - PROCUREMENT WATEROUS PACER HYDRANTS FOR PUBLIC WORKS 24-078-PW BID TABULATION

/

			MID-AMERICAN WATER, INC.		CORE & MAIN, LP		ZIEBELL WATER SERVICE PRODUCTS, INC.		WATER PRODUCTS COMPANY	
NO	ITEM	QTY	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE
1	Red 5-1/4" Waterous Pacer Hydrant 6'	3	\$ 5,005.53	\$ 15,016.59	\$ 5,014.00	\$ 15,042.00	\$ 5,060.00	\$ 15,180.00	\$ 5,260.00	\$ 15,780.00
2	Red 5-1/4" Waterous Pacer Hydrant 5'6"	3	\$ 4,925.92	\$ 14,777.76	\$ 4,935.00	\$ 14,805.00	\$ 4,970.00	\$ 14,910.00	\$ 5,170.00	\$ 15,510.00
3	Yellow 5-1/4" Waterous Pacer Hydrant 6'	3	\$ 5,005.53	\$ 15,016.59	\$ 5,014.00	\$ 15,042.00	\$ 5,060.00	\$ 15,180.00	\$ 5,260.00	\$ 15,780.00
4	Yellow 5-1/4" Waterous Pacer Hydrant 5'6"	3	\$ 4,925.92	\$ 14,777.76	\$ 4,935.00	\$ 14,805.00	\$ 4,970.00	\$ 14,910.00	\$ 5,170.00	\$ 15,510.00
	GRAND TOTAL \$ 59,588.70					\$ 59,694.00		\$ 60,180.00		\$ 62,580.00

NOTES

1. Sigelock Systems, LLC did not meet the bid specifications and has been deemed non-responsive.

Bid Opening 06/07/2024 @ 2:30 PM	HK, BR
Invitations Sent	6
Total Vendors Requesting Documents	2
Total Bid Responses	5



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	24-078-PW	
001101111111111111111111111111111111111		
COMPANY NAME:	Mich-American Water	
CONTACT PERSON:	Eric Lowe	
CONTACT EMAIL:	Ericlowe amid American Worter. com	

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

		Has the	Bidder	made	contributions	as described	ahove2
--	--	---------	--------	------	---------------	--------------	--------

☐ Yes

∑ No

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL
		

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- · With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

http://www.dupagecounty.gov/government/county board/ethics at the county/

The full text of the County's Procurement Ordinance is available at:

https://www.dupagecounty.gov/government/departments/finance/procurement/procurement ordinance and guiding principles.php

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has certifies that the information submitted on this form is true an	
Printed Name: <u>Eric Lowe</u>	Signature:
Title: Outside Sales	Date: 6/16/29

Public Works Requisition \$30,000 and Over



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: PW-P-0019-25 Agenda Date: 7/1/2025 Agenda #: 18.C.

AWARDING RESOLUTION ISSUED TO REVERE ELECTRIC SUPPLY COMPANY TO PROVIDE ROCKWELL AUTOMATION HARDWARE AND SOFTWARE SUPPORT FOR PUBLIC WORKS (CONTRACT TOTAL NOT TO EXCEED \$72,090)

WHEREAS, a sole source quotation has been obtained in accordance with 55 ILCS 5/5-1022 and County Board policy; and

WHEREAS, the County is authorized to enter into a Sole Source Agreement pursuant to Section 2-350 of the DuPage County Procurement Ordinance; and

WHEREAS, based upon supporting documentation provided by the using Department, the Chief Procurement Officer has determined that it is not feasible to secure bids or that there is only one source for the required goods or services, and/or has determined that it is in the best interests of the County to consider only one supplier who has previous expertise relative to the subject procurement; and

WHEREAS, in accordance with the Chief Procurement Officer's determination, the Public Works Committee recommends County Board approval for the issuance of a contract to Revere Electric Supply Company, to provide Rockwell Automation Hardware and Software Support, for the period of May 29, 2025 through May 28, 2028, for Public Works.

NOW, THEREFORE BE IT RESOLVED, that County Contract, covering said, to provide Rockwell Automation Hardware and Software Support, for the period of May 29, 2025 through May 28, 2028 for Public Works, be, and it is hereby approved for issuance of a contract by the Procurement Division to, Revere Electric Supply Company, 8807 187th Street, Mokena, Illinois 60448, for a contract total amount not to exceed \$72,090. Pursuant to 55 ILCS 5/5-1022 (c) not suitable for competitive bids. (Sole provider of Rockwell Automation Hardware and Software Support.)

Enacted and approved on this 8th day of July, 2025 at Wheaton, Illinois.

DEBORAH A. CONROY, CHAIR
DU PAGE COUNTY BOARD
JEAN KACZMAREK, COUNTY CLERK



6/17/2025

Drew J. Cormican
DUPAGE COUNTY PUBLIC WORKS
7900 ROUTE 53
Woodridge, Illinois 60517-3277

Re: Revere Electric

Dear Drew J. Cormican,

This is to confirm that Revere Electric currently is the only distributor appointed and authorized to sell Allen-Bradley Standard Controls, Drives, PLC/MMI, Rockwell Software products and all services offerings in the geographic area in which your Woodridge, IL facility is located. As a matter of Company policy, full factory product and sales support is made available only to the local authorized distributor, and it is Rockwell Automation's practice and policy to always promote and recommend the use of that distributor to customers in that geographic area. Rockwell Automation discourages the use of other non-authorized sources, including distributors who may hold an Allen-Bradley appointment in another locale.

Should you have any questions regarding the above, please do not hesitate to contact Revere Electric at 312-907-6236 or your local Rockwell Automation Services Solutions Sales Rep.

Sincerely,

Erik Weippert

Email: eweippe@ra.rockwell.com

Phone: 864-518-8232

Rockwell Automation

LISTEN. THINK. SOLVE.



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	323580
COMPANY NAME:	Revere Electric Supply Co.
CONTACT PERSON:	Andy Schaeffler
CONTACT EMAIL:	aschaeffler@revereelctric.com

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

and political action committees to which the contracting person has made t	JUI
Has the Bidder made contributions as described above?	
☐ Yes	
ĭ No	

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

Mo No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
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The full text of the County's Procurement Ordinance is available at:

https://www.dupagecounty.gov/government/departments/finance/procurement/procurement ordinance and guiding principles.php

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Printed	Name: Andy Schaeffler	Signati	ure:
Title:	Services Sales Manager	Date:	05/28/2025



Rockwell Automation Contract Renewal

To renew support for another year, please review this quote and instructions below.

If no changes are required, please follow the purchase order instructions outlined in Section 2.3.

<u>If changes are required before purchase</u>, please contact your local Rockwell Automation Distributor.



Rockwell Automation Services Agreement - Renewal

FIXED PRICE PROPOSAL

3801007213

Dupage County Public Work Woodridge, IL

Date of Issue: Friday, May 30, 2025

Quotation #: 340035 (RA Approval - QXSK10533A)

Presented to:

Dupage County Public Work 7900 Route 53 Woodridge, II 60517-3277 United States

Proposed by:

Revere Electric Supply Co 8807 187th St Mokena, IL 60448-7706 United States

Rockwell Automation 5470 S. Howell Avenue Milwaukee, Wi 53207 United States

expanding human possibility°









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1 Rockwell Automation Statement of Work for Services

This proposal is offered to Revere Electric Supply Co for resale to Dupage County Public Work ("Customer").

1.1 TechConnectSM Support Agreement

This TechConnectSM Support Agreement ("Agreement") allows plants to be connected to Rockwell Automation's world-class phone and electronic technical support.

Rockwell Automation's technical support team will provide assistance with installing, configuring and maintaining equipment and software, obtaining current software updates, diagnosing and fixing operating problems, or performing basic programming tasks.

1.1.1 Agreement Term

Agreement Coverage Period: Thursday, May 29, 2025 to Sunday, May 28, 2028

1.1.2 TechConnectSM Support Levels

Product Family	Description	Support Level	Service Level
9800-DC8AUTOA	Automation Control Hardware	Product Support	8 x 5 M-F
9800-DC8HMICOM	HMI Software	Product Support	8 x 5 M-F
9800-DC8INFAUT	Information Automation Software	Product Support	8 x 5 M-F

Table 1: TechConnectSM Support Levels

1.1.3 Product Coverage Details

Rockwell Automation will provide TechConnectSM Support coverage to Customer for the Rockwell Automation Product Families & software serial numbers listed below. Please ensure the following information is complete and includes any new "Software Maintenance" products you wish to add to this support agreement.

Hardware Type	
Automation Control Hardware	

Product Family & Software Serial Numbers	Description	Install Count
9800-DC8AUTOA	Automation Control Hardware	
9310-WED200ENE		1



Product Family & Software Serial Numbers	Description	Install Count
1835225672	Studio 5000 Logix Emulate ESD S/W	1
9324-RL0300ENE		2
1012101501	RSLogix 500 Standard Edn ESD S/W	1
1012260536	RSLogix 500 Standard Edn ESD S/W	1
9324-RLD700NXENE		1
2022199649	Studio 5000 Professional Edition ESD S/W	1
9326-LGXARCHENE		1
2075132374	Studio 5000 Architect ESD S/W	1
9357-CNETL3		1
1163261242	RSNetWorx For ControlNet ESD Software	1
9357-DNETL3		3
1235004118	RSNetWorx For DeviceNet ESD Software	1
1235038189	RSNetWorx For DeviceNet ESD Software	1
1235303022	RSNetWorx For DeviceNet ESD Software	1
9357-ENETL3	THE THE THE POPULATION AND ADDRESS OF THE POPULATION	1
1669238187	RSNetWorx For EtherNet ESD Software	1
9800-DC8HMICOM	HMI Software	
9355-RSLETENE	Timi Coreware	1
1884021051	Lnx Ent FT Serv - FT Activation EN sfw	1
9355-WABGWENE	ETIX ETIT I COLV I I / ACTIVICACIT ETA SIW	1
1006008607	RSLinx Classic Gateway ESD S/W	1
9355-WABOEMENE	ROLITIX Glassic Galeway Lob Griv	3
1005020952	RSLinx Classic OEM ESD S/W	1
1005020352	RSLinx Classic OEM ESD S/W	1
1005247167	RSLinx Classic OEM ESD S/W	1
9701-	TOLITA Glassic GLIVI LOD G/VV	2
VWSS000CW10LENE		
3782006029	FT View SE Srvr Unl W/10 RW Cli ESD S/W	1
3782006030	FT View SE Srvr Unl W/10 RW Cli ESD S/W	1
9701-	T VION CE CIVI CIII W/ TO TWY CII ECD C/W	2
VWSS000LSECENE		
4057000156	FT View SE Srvr Unl RSLinxScndry ESD S/W	1
4057000157	FT View SE Srvr Unl RSLinxScndry ESD S/W	1
9701-VWSTENE		1
2529088510	FT View Studio SE FT View Ent EN ESD S/W	1
9800-DC8INFAUT	Information Automation Software	
9515-ASTCAP0100E		2
2743013626	FT AssetCentre 100 Assets ESD Software	1
2743013627	FT AssetCentre 100 Assets ESD Software	1
9515-ASTDRINVENE		1
3691003560	FTAssetCentre Asset Inv Agent ESD SW	1
9515-ASTDRROKENE		1
2741015918	FT AssetCentre Disaster Recovery ESD S/W	1
9515-ASTSRVRENE		1
2740018597	FT AssetCentre Server 1 User Lic ESD S/W	1
9518-HDLENE		5
2804011822	FT Historian Datalink 1 User Lic ESD S/W	1
2804011823	FT Historian Datalink 1 User Lic ESD S/W	1
2804011824	FT Historian Datalink 1 User Lic ESD S/W	1



Product Family & Software Serial Numbers	Description	Install Count
2804011825	FT Historian Datalink 1 User Lic ESD S/W	1
2804011826	FT Historian Datalink 1 User Lic ESD S/W	1
9518-HSEADV		1
3326006089	FT Historian SE Adv Server ESD Software	1

Note: If changes to the TechConnectSM Support Product Coverage Details above are required, please contact your local Rockwell Automation sales office or Allen-Bradley® authorized distributor to request an updated proposal.

1.1.4 TechConnect[™] Support Information

1.1.4.1 TechConnectSM Support Options

Rockwell Automation offers progressive levels of support to meet your business needs; see table below for all available support level options. Please refer to *Table 1: TechConnectSM Support Levels* regarding support levels included in this Statement of Work.

Support Level	Support Services Description	
	You are partnered with a team of technical support engineers who are uniquely designated to support your key applications. This team visits your site, becomes familiar with the applications, and gathers system drawings and documentation. This team will become an extension of your support staff, providing technical account management and scheduled consulting time. Application Support includes the support elements of Product Support, System Support and the following support elements:	
	Real-time, Application-Level Support	
Application Support	Designated support team / Dedicated telephone and email / Documentation and case familiarization / Application knowledge management / Periodic performance reviews	
	Surveillance and Alarming Options Device and/or process monitoring and alarming at Rockwell Automation facility or remotely / Access to historical data for troubleshooting	
	Application-Level Administration Option Emergency backup / Performance tuning / Guaranteed field service call-out	
	System Support allows your calls to be routed to a group of technical support engineers with proven expertise in Rockwell Automation control systems. You will work with an engineer who manages your case through resolution and follow-up.	
System Support	System Support includes the support elements of Product Support , and the following support elements:	
	Real-time, System-Level Support Standard product and programming software / Advanced software / Proactive follow up / Single-point resolution	
	Advanced Engineering Expertise	



Support Level	Support Services Description		
	Get support from system-level support engineers that have multiple years of experience in the industrial automation industry		
	As often as Customer needs require, you can contact Rockwell Automation technical support engineers for real-time phone support. Our engineers have deep knowledge of our products, software and legacy hardware and can use remote desktop technology to help troubleshoot or assist in the configuration of products quickly.		
	Product Support includes the support elements of Self-Assist Support , and the following support elements:		
	Real-Time, Product-Level Support Standard product and programming software / Telephone and live chat support available in 20 languages / Remote desktop troubleshooting		
Product Support	Learning+ Subscription Available for Purchase Highly interactive learning featuring lessons, software simulations, and demonstration videos to help reinforce learning concepts. Available on any tablet or PC using Chrome, Safari, IE, Edge or Firefox. Each course has a knowledge assessment, requiring 80% to pass. Upon successful completion of the course, a learner will be awarded CEUs (where applicable).		
	Live View An enhanced support experience connecting you with Rockwell Automation Technical experts leveraging a live video feed and augmented reality annotations.		
	Software Maintenance II Software update media / Emergency software replacement		
	Take advantage of the Knowledgebase, an online resource for technical information, support, and assistance. The Knowledgebase can assist in increasing productivity by finding solutions to technical questions more quickly - saving both time and money. The KnowledgeBase is maintained by the same engineers who provide TechConnect SM Support and is updated with the hardware and software solutions from actual support cases. These updates are incorporated dynamically. Self-Assist includes the following support elements:		
Self-Assist Support	Welcome Kit Essential support agreement information / Support authorization number / Local support telephone number / User guide		
••	Digital Assist Library Cloud-hosted augmented reality library of work instructions. Leverage augmented reality to walk through the proper steps to complete tasks related to the repair and maintenance of Allen-Bradley hardware		
	Software Maintenance I Software update downloads		
	Online Support Centre Access Knowledgebase tech notes / Interactive forums / Product notifications / Manage service tickets / Submit questions via email		

1.1.4.2 Definitions of Common Terms Used in Services

Dupage County Public Work 7037328 Rockwell Automation Support Agreement Fixed Price Proposal 3801007213

Technical Phone Support: Rockwell Automation phone support provides technical assistance for installation, configuration, troubleshooting, diagnosis, basic instruction programming and best practice recommendations. With an unlimited phone support agreement, Customer can call as often as needed throughout the term of your Agreement. Standard hours of coverage are 8:00 AM to 5:00 PM Monday – Friday (based on your local calling time; Rockwell Automation observed holidays excluded). Information on Rockwell Automation observed holidays can be found via the Knowledgebase in article #QA33258 (https://rockwellautomation.custhelp.com/app/answers/answer view/a id/819086/redirect).

Case Handling: Rockwell Automation handles cases that require further investigation as a priority with automatic escalation procedures, and call Customer back to provide a progress update if an answer is not immediately available.

Case Resolution Follow-up: For cases where Rockwell Automation could not confirm resolution on the initial call, Customer will receive a proactive follow-up within one business day (target response) to confirm that the problem was resolved or continue troubleshooting, if necessary.

1.1.4.3 Product Families

Rockwell Automation groups products into product families, making it simpler to deliver integrated support for hardware and software, including older and discontinued products. The lists available at the following link are not comprehensive; however, they illustrate how products are classified.

TechConnect Support Product Family Coverage | Rockwell Automation | US

https://www.rockwellautomation.com/en-us/capabilities/industrial-maintenance-support/product-application-support/remote-support/product-family-coverage.html

1.1.5 Learning+ Subscription (Optional)

1.1.5.1 Solution Description

Rockwell Automation offers Learning+, an online training platform accessible on any internet enabled device. Options offered for sale include either short term access to a single automation course or an annual subscription. An annual Learning+ subscription provides modular, self-paced lessons, on-demand webinars, and unlimited access to scheduled Virtual Instructor Led Training Courses.

1.1.6 Changes to Agreement

1.1.6.1 Updates to Supported Software Installed Base

Support included with new Licenses purchased during the agreement term are not covered by this scope of work. Each new software purchase includes an independent support contract which may be co-termed with your TechConnect anniversary date. Renewal of these purchases will occur in the Rockwell Automation commerce portal as a separate agreement.

Please work with your Rockwell Automation Customer Success Manager during each TechConnect renewal to consolidate and extend existing contracts to your next TechConnect renewal date.

1.1.6.2 Upgrade Options

The information contained in this document consists of technical, commercial and/or financial information, which is confidential and proprietary to Rockwell Automation, Inc. This information is furnished in confidence and with the understanding that it may not be disclosed to third parties or reproduced or used, in whole or in part, for any purpose other than evaluation of this document.

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Dupage County Public Work 7037328 Rockwell Automation Support Agreement Fixed Price Proposal 3801007213

Updates to existing TechConnect[™] Support Agreement and/or upgrades must be custom quoted by Rockwell Automation. Customer has the following upgrade options:

Coverage Level: Product and System Support agreements can be upgraded to 24x7x365 coverage (e.g., 8:00AM - 5:00PM to 24x7x365), which provides the option to call at any time, including weekends and holidays.

Support Level: Customer may upgrade support levels (e.g., Product Support to System Support) during the term of an existing agreement.

1.1.6.3 Changes to Scope

Contact your local Rockwell Automation sales representative if any adjustments are required during Agreement term, such as:

- Adding or removing a site from support
- Moving supported equipment and software to another supported facility
- Closing a plant and selling to another entity
- Changes shall not be effective unless agreed beforehand in writing by and between the Parties.

1.1.6.4 Reinstatement Policy

If Customer does not renew their contract until after the expiration date of the contract, the Customer has the following options to reinstate their support:

- a. If an agreement is not renewed on time and it has been less than 12 months since expiration, the renewed agreement will be backdated to the original expected start date and a 10% fee¹ will be added to the cost of the renewal.
- b. If an agreement is not renewed on time and it has been longer than 12 months since expiration, the support agreement will be priced as a new agreement with current price levels and any previous discounts will not be applied.
- c. For software packages that are removed from support and later reinstated, often referred to as "frozen" and "unfrozen," a 30% premium will be applied to each piece of software which carries a fee for maintenance as part of the TechConnectSM program.

Note: There is a grace period of 10 days after the date of the Agreement expiration during which Customer can still access support. If Customer renews after the expiration date of the Agreement, the policy above applies regardless of this grace period.

1.1.7 **Product Coverage Exclusions**

Rockwell Automation products excluded from TechConnect[™] Support coverage under this Agreement (if applicable) are listed below:

1.2 **Customer Responsibilities**

¹ If Customer's TechConnectSM Support Agreement has never included support for the product family in question, then the commercial "waive reinstatement" program applies for the respective packages.



1.2.1 Maintenance, Electrical, and Operations Staff

When applicable, Customer will provide dedicated and available appropriate personnel knowledgeable in the process, operation, control system, and facility layout to assist Rockwell Automation personnel during onsite visits. They will remain onsite and available as necessary for project and/or safety reasons.

System Maintenance and Use 1.2.2

Customer is responsible for (i) the overall performance and overall design of the machine or manufacturing system, including safety features failure modes; (ii) properly using, calibrating, operating, monitoring and maintaining the products and system consistent with all Rockwell Automation or third-party provided instructions, warnings, recommendations, and product and system documentation; (iii) ensuring that properly trained personnel use, operate and maintain the products and system at all times; (iv) staying informed of product updates and alerts and implementing all updates and fixes; (v) notifying Rockwell Automation of any problems with the products or system; and (vi) all other factors affecting the products or system that are outside of the direct control of Rockwell Automation.

1.2.3 Access to the System

Customer will make the applicable processes and/or systems available to Rockwell Automation personnel during the mutually agreed upon schedule for services and equipment implementation as described in this Statement of Work.

1.3 **Assumptions, Clarifications and Exceptions**

The following assumptions, clarifications and exceptions have been made by Rockwell Automation in the development of this Statement of Work:

Reference	Assumptions (A), Clarifications (C) and Exceptions (E)
A1	Safety. All aspects of mechanical, electrical, and process safety are responsibilities of Customer.
A2	Installation. If applicable, all mechanical and electrical installation is to be provided and managed by Customer and their selected Contractor.
C1	Quotation Scope . Any elements not explicitly outlined within this Statement of Work are not included in the deliverables for this Rockwell Automation Services Agreement.
C2	Documentation. All project and system documentation will be in English and furnished in electronic format unless otherwise stated. Translation into other languages is not included in this Statement of Work.
C3	RoHS. Customer supplied/specified products will meet all applicable material restrictions as defined in RoHS. If it does not, Customer will notify Rockwell Automation prior to shipment of Customer supplied/specified products to Rockwell Automation. To the extent permitted by applicable law, Customer will indemnify Rockwell Automation against any third-party claim arising out of Rockwell Automation's use of Customer supplied/specified products.
C4	Existing Devices. Customer represents that any existing operator, machine-mounted, or field devices that are in use or are to be reused are in good working order and will be repaired or replaced by Customer when required. Repair and/or replacement of damaged devices is not included in Rockwell Automation's Statement of Work.
C5	Documented Change Request (DCR) Process. Changes to this scope of work requested by Customer throughout the duration of the Support Agreement will be identified and communicated through project management at Rockwell Automation. Estimates for the material costs, labor, and schedule impacts will be prepared when a change in scope is identified. Refer to the Rockwell Automation Changes provision for additional terms.



C6	Customer Specific Requirements. This proposal does not include Customer specific requirements or onsite activities such as Customer or site specific safety training, background checks, health-related testing or vaccinations, international work visas, and copies of expense receipts. Rockwell Automation must be made aware of any such requirements prior to contract award. Costs for associated time and expenses incurred while complying with such requirements will be at Customer expense. Infectious Disease Planning. Rockwell Automation is committed to health, safety, and doing all
	we can to maintain a high level of service for our customers. We are committed to communicating with you about the impact that an infectious disease and any related governmental restrictions may have on the deployment of our personnel and delivery of the project and truly appreciate your cooperation and understanding. The Parties acknowledge and agree that they will be excused from performance, or delay in performance, of their obligations under this purchase order, regardless of whether a contract is currently in place governing the parties' relationship, to the extent that either Party is unable to perform such obligations due to the effects of a known infectious disease affecting that Party and/or third parties, including, without limitation, logistics and materials suppliers.
C8	On-site Working Hours. Rockwell Automation Standard working hours may differ by country. Contact your local Rockwell Automation Distributor or Sales Office to obtain current local standard working hours.
C9	Stand-by time is defined as time spent on-site waiting for completion of customer activities. This includes, but is not limited to, waiting for correction of construction, installation, and wiring or piping errors, and other delays beyond the control of, or not within, Rockwell Automation's specific responsibilities. Stand by time will be invoiced separately at applicable time and expense rates.
C10	Work Site Safety . Customer is responsible for assuring a safe and secure work environment, compliant with relevant local, state, provincial, and nationally recognized standards and regulations, for work at the site.
C11	Safety and Substance Abuse. Rockwell Automation will comply with its own Substance Abuse Policy which meets the intent of the DRUG FREE WORKPLACE Act and all other legal requirements regarding drug testing. A copy of this policy can be supplied upon request.
C12	Ethics and Compliance. All of Rockwell Automation's employees and every person who performs work for, or on behalf of Rockwell Automation are treated with respect and dignity. Rockwell Automation has a no-tolerance policy for discrimination, harassment, and zero tolerance for workplace violence and weapons. Please see the PartnerNetwork Code of Conduct and the Rockwell Automation Global Policy People for further details. https://www.rockwellautomation.com/en-us/company/about-us/sustainability/ethics-compliance.html .
C13	Third Party Software. This Statement of Work may include third party software that is subject to third party license terms ("Third Party Software"). Customer's right to use such Third Party Software as part of or in connection with the Work is subject to any applicable acknowledgements and license terms accompanying such Third Party Software contained therein. If there is a conflict between the licensing terms of such Third Party Software and this Statement of Work, the licensing terms of the Third Party Software shall prevail in connection with the related Third Party Software.
C14	Information Security Standards In the performance of all Work pursuant to this Agreement and Statement of Work, Customer and Rockwell Automation will comply with the following standards and practices:
	Data Transmission Customer agrees that all transmission or exchange of sensitive data with Rockwell Automation shall take place using secure, industry acceptable, standards (e.g., password-protected, using a complex password; encrypted WinZip sent via e-mail, or, for large files, an encrypted file transfer service; physical media such as paper/DVD sent securely; or another equally secure means of transport). If Customer requires Rockwell Automation to use Customer specified system, the security of the data in transit and at rest once sent from Rockwell Automation is Customer's sole responsibility.



	Customer-Provided Hard Disk If Rockwell Automation personnel are required to use Customer provided hard disks, Customer agrees to provide the hard disk with designated backup and recovery processes and in encrypted form, using commercially supported or industry standard open-source encryption solutions. The Customer must use commercially reasonable efforts to prevent the Customer-provided hard disk from introducing any malicious software into Rockwell Automation's systems. These efforts shall include, but are not limited to, the use of anti-virus and/or anti-malware and the regular deployment of security patches to remediate any vulnerabilities.
	Remote Access Remote access by Rockwell Automation's personnel into Customer's control system(s) must be accomplished in accordance with either Customer or Rockwell Automation procedures, whichever is more stringent. If Customer requires Rockwell Automation personnel to use Customer-specified procedures, the security of the connection/session is Customer's sole responsibility, and Customer is solely responsible for logging activities of all users accessing the Customer's system.
C15	Cybersecurity for Solutions. Sub-contractors and/or third-party vendors will follow any applicable industry best practices and/or guidelines for cybersecurity and data protection with regard to IEC 62443 2-4.
C16	Personal Data. To the extent Rockwell Automation processes personal data in the performance of the services under this Statement of Work, such processing of personal data will be conducted in accordance with the Data Processing Addendum ("DPA") available at https://www.rockwellautomation.com/en-us/company/about-us/legal-notices/data-processing-addendum.html .
C17	Customer Information. Rockwell Automation will share with its authorized distributor or partner of record Customer Data collected under this Agreement pursuant to the terms herein and the Rockwell Automation Privacy and Cookies Policy located at https://www.rockwellautomation.com/en-us/company/about-us/legal-notices/privacy-and-cookies-policy.html .
C18	Customer Success Publication. Sharing customer success stories helps position customers as leaders among companies pursuing excellence in their industrial operations. Customer agrees that Rockwell Automation can reference and disclose Customer's name and logo in internal and external marketing materials and will share only the solutions and services purchased, Customer industry, location, and general results through a customer success story. Rockwell Automation will make no claims that Customer endorses the product or solution, and the success story will be used for marketing purposes only.

1.4 TechConnectSM - Termination for Convenience

Either party may terminate this Agreement with a prior written 30-day notice.

1.5 Rockwell Automation Commitment for Sales Through Distribution

The Rockwell Automation Commitment for Sales Through Distribution (the "Commitment Terms") found at https://www.rockwellautomation.com/en-us/company/about-us/legal-notices/commitment-for-sales-through-distribution.html covers purchases by Distributor's customer ("Customer") from Distributor of the Products and Services described and integrated pursuant to this Statement of Work to be provided by Rockwell Automation, Inc. and/or its affiliates. The Commitment Terms apply directly to Customer and Rockwell Automation.



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Accepted.		
Customer:		
Date:		



2 Distributor Commercial Terms

2.1 Pricing Summary

Revere Electric Supply Co's price is based on the Statement of Work set forth in Section 1 above. All prices are in USD.

Item	Product	Price
1	9800-DC8AUTOA Automation Control Hardware, Product Support, 8 x 5 M-F, 1-4 Total Devices	3,060.00
2	9800-DC8HMICOM HMI Software, Product Support, 8 x 5 M-F	41,175.00
3	9800-DC8INFAUT Information Automation Software, Product Support, 8 x 5 M-F	27,855.00
4	9800-REINSTATE1 End User Contract Reinstatement Fee	2,403.00

TOTAL PRICE: USD 72,090.00

LEARNING+ SUBSCRIPTION (OPTIONAL): Web hosted, self-paced training courses including virtual classroom sessions are available for customers with an active TechConnect support agreement, as either single course access or annual subscription to all course content available in the Rockwell Automation Digital Learning Library. Please add the net amount for the Learning+ option desired in the correct quantity of desired users to your renewal PO.

Catalog Number	Description	List Price per User
LP-3TC	Learning+ 1 Class available for 3 months	USD 820.00
LP-SU1	Learning+ Single User Subscription	USD 4,940.00

2.2 Invoicing Schedule

Billed annually

Dupage County Public Work 7037328 Rockwell Automation Support Agreement Fixed Price Proposal 3801007213

2.3 **Purchase Order Instructions**

Please Issue a Single Purchase Order to: Revere Electric Supply Co

Ref: Proposal # 3801007213

Purchase order should match the value and term proposed above. If a purchase order received does not match the term of the agreement, pricing will be subject to annual price adjustments.

2.4 **Distributor Terms and Conditions of Sale**

https://www.revereelectric.com/new-customer-credit-application

Technology Requisition \$30,000 and Over





File #: TE-P-0009-25 Agenda Date: 7/1/2025 Agenda #: 20.A.

AWARDING RESOLUTION ISSUED TO KARA COMPANY, INC. FOR MANAGEMENT OF THE COUNTY'S GPS CORS SITES FOR INFORMATION TECHNOLOGY - GIS DIVISION (CONTRACT TOTAL NOT TO EXCEED \$39,500.00)

WHEREAS, a sole source quotation has been obtained in accordance with 55 ILCS 5/5-1022 and County Board policy; and

WHEREAS, the County is authorized to enter into a Sole Source Agreement pursuant to Section 2-350 of the DuPage County Procurement Ordinance; and

WHEREAS, based upon supporting documentation provided by the using Department, the Chief Procurement Officer has determined that it is not feasible to secure bids or that there is only one source for the required goods or services, and/or has determined that it is in the best interests of the County to consider only one supplier who has previous expertise relative to the subject procurement; and

WHEREAS, in accordance with the Chief Procurement Officer's determination, the Technology Committee recommends County Board approval for the issuance of a contract to Kara Company, Inc., for operation, monitoring, and upgrading software and firmware for seven (7) County GPS CORS sites, for the period of September 1, 2025 through August 31, 2026, for Information Technology.

NOW, THEREFORE BE IT RESOLVED, that County Contract, covering said, for operation, monitoring, and upgrading software and firmware for seven (7) County GPS CORS sites, for the period of September 1, 2025 through August 31, 2026 for Information Technology, be, and it is hereby approved for issuance of a contract by the Procurement Division to, Kara Company, Inc., 5255 Dansher Road, Countryside, IL 60525, for a contract total amount not to exceed \$ 39,500.00. (Sole provider - KARA Company is the only known vendor for this service.)

Enacted and approved this 8th day of July, 2025 at Wheaton, Illinois.

	DEBORAH A. CONROY, CHAIR
	DU PAGE COUNTY BOARD
Attest:	
	JEAN KACZMAREK, COUNTY CLERK



Procurement Review Comprehensive Checklist Procurement Services Division

This form must accompany all Purchase Order Requisitions

SECTION 1: DESCRIPTION			
General Tracking		Contract Terms	
FILE ID#: 25-1586	RFP, BID, QUOTE OR RENEWAL #: Quote #31714	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$39,500.00
COMMITTEE: TECHNOLOGY	TARGET COMMITTEE DATE: 07/01/2025	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$39,500.00
	CURRENT TERM TOTAL COST: \$39,500.00	MAX LENGTH WITH ALL RENEWALS: ONE YEAR	CURRENT TERM PERIOD: INITIAL TERM
Vendor Information		Department Information	
VENDOR: KARA Company Inc.	VENDOR #: 11029	DEPT: GIS/IT	DEPT CONTACT NAME: Tom Ricker
VENDOR CONTACT: Jon Pesek	VENDOR CONTACT PHONE: 708-482-8888	DEPT CONTACT PHONE #: 630-407-5062	DEPT CONTACT EMAIL: tom.ricker@dupagecounty.gov
VENDOR CONTACT EMAIL: jpesek@karaco.com	VENDOR WEBSITE: karaco.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.). Management of the DuPage County GPS CORS sites. This includes operating, monitoring and upgrading of software and firmware for 7 GPS CORS sites, for a total amount of \$39,500, sole source.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Management is needed for the County's 7 GPS CORS sites including the operating, monitoring and upgrading of high precision geodetic control instruments.

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.			
SOLE SOURCE PER DUPAGE ORDINANCE, SECTION 2-350 (MUST FILL OUT SECTION 4)			
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		
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).	

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	SECTION 4: SOLE SOURCE MEMO/JUSTIFICATION
JUSTIFICATION	Select an item from the following dropdown menu to justify why this is a sole source procurement.
	SOLE PROVIDER OF ITEMS THAT ARE COMPATIBLE WITH EXISTING EQUIPMENT, INVENTORY, SYSTEMS, PROGRAMS OR SE
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.
	KARA has designed & upgraded our CORS network system and the software that works with each of the 7 stations. They monitor each station and are able to diagnose and correct a problem when one of the stations goes down. In almost every case they were able to bring the downed station up within hours because of their familiarity with the system.
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. Yes. Tom Ricker, GIS Manager, has reviewed the local market and cannot find a local company that can maintain system functions and software, has network knowledge, and has the ability to be on-site to correct any problems with the seven individual stations.
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. Tom Ricker spoke with other industry professionals to see if they can fulfill the County's needs. The current GPS units are LEICA, for which KARA is the local dealer, and they include the related Spider Software. In order to switch brands we would need to replace all of the units and related software.

	SECTION 5: Purch	ase Requisition Informat	ion		
Sena	l Purchase Order To:	Seno	Send Invoices To:		
Vendor:	Vendor#:	Dept:	Division:		
Kara Company I nc	11029		GIS		
Attn:	Email:	Attn:	Email:		
Jon Pesek	jpesek@karaco.com	Sarah Godzicki	itap@dupagecounty.gov		
Address:	City:	Address:	City:		
5255 DanSher Road	Countryside	421 N. County Farm Rd.	Wheaton		
State:	Zip:	State:	Zip:		
IL	60525		60187		
Phone:	Fax:	Phone:	Fax:		
708-482-8888	708-482-7171	630-407-5037			
Se	end Payments To:		Ship to:		
Vendor:	Vendor#:	Dept:	Division:		
Kara Company I nc	11029		GIS		
Attn:	Email:	Attn:	Email:		
Jon Pesek	jpesek@karaco.com	Tom Ricker	tom.ricker@dupagecounty.gov		
Address:	City:	Address:	City:		
5255 DanSher Road	Countryside	421 N. County Farm Rd.	Wheaton		
State:	Zip:	State:	Zip:		
IL	60525		60187		
Phone:	Fax:	Phone:	Fax: 630-407-5555		
708-482-8888	708-482-7171	630-407-5062			
	Shipping	Con	itract Dates		
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Contract End Date (PO25) Sep 1, 2025 Aug 31, 2026			

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	Purchase Requisition Line Details										
LN	Qty	UOM	ltem Detai l (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	EA		Annual maintenance and management of the seven (7) DuPage County GPS CORS Sites. This includes: -Single "point to point" solutions for each individual stations, available for all GPS Users using modern Real Time Kinematic GPS systemsDetailed usage logs, generated for each user on the systemMaster Auxiliary Concept (MAX) network correction for DuPage County Government unitsYearly software and firmware maintenance.	FY25	1100	2900	53806		39,500.00	39,500.00
FY is required, ensure the correct FY is selected. Requisition Total					\$ 39,500.00						

	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. Please send PO to Sarah Godzicki and Tom Ricker 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.			

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QUOTE



Kara Company, Inc.

QUOTE: 31714 DATE: JUNE 23,2025

5255 Dansher Rd. Countryside, IL 60525 Phone 708-482-8888 Fax 708.482.7171 www.karaco.com

TO DPC Info Tech - GIS 421 North County Farm Rd. Wheaton, IL 60188

SALESPERSON	P.O. NUMBER	PAYMENT TERMS	DUE DATE
Jon Pesek		In accordance with the IL Local Government Prompt Payment Act	

DESCRIPTION

Real Time Products for the existing reference stations managed by the Kara Company Inc. for the period of September 1, 2025 to August 31, 2026......\$39,500.00 Includes:

Single "point to point" solutions for each of the individual stations are available for all GPS Users using modern Real Time Kinematic GPS systems.

Detailed usage logs are generated for each user on the system.

Master Auxiliary Concept (MAX) network correction for DuPage County Government units.

Yearly software and firmware maintenance.

SUBTOTAL	\$39,500.00
SALES TAX	0
TOTAL	\$39,500.00

Make all checks payable to Kara Company **THANK YOU FOR YOUR BUSINESS!**



Leica Geosystems, Inc. 555 North Point Center E, Suite 700 Alpharetta, GA 30022 Mobile: 319-855-8206

Email: brett.black@leicaus.com

Monday, June 23, 2025

To Whom It May Concern,

Please accept this letter as confirmation that KARA Company, based in Countryside, IL is an authorized Distribution Partner for Lecia Geosystems' High-end Surveying segment consisting of GNSS, Robotic surveying instruments, MultiStations, field controllers, related field and office software, firmware and CCP (Customer Care Packages).

KARA Company is currently the only authorized Distribution Partner that has a Service Center within the state of Illinois to provide technical service on our high-end survey related instruments.

On behalf of Leica Geosystems, I would like to thank you for your interest in our portfolio of Surveying Solutions. We are confident that KARA Company will provide the highest level of sales, service and support.

If you should have any questions, please feel free to contact me directly.

Regards,

Signature on File

Brett Black Manager, Channel Sales Leica Geosystems, Inc.



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	
COMPANY NAME:	Kara Company, Inc.
CONTACT PERSON:	Christine Kara
CONTACT EMAIL:	ckara@karaco.com

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

Has the	e Bidder made contributions as described above?
	Yes
X	No

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

http://www.dupagecounty.gov/government/county board/ethics at the county/

The full text of the County's Procurement Ordinance is available at:

https://www.dupagecounty.gov/government/departments/finance/procurement/procurement ordinance and guiding principles.php

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Printed Name: Christine Kara	Signature on File Signature:
	(
Title: President	Date:June 23, 2025

Transportation Change Order with Resolution



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: 25-1557 Agenda Date: 7/8/2025 Agenda #: 21.B.

DT-R-0082A-23

AMENDING RESOLUTION TO DT-R-0082-23
THE INTERGOVERNMENTAL AGREEMENT
BETWEEN THE COUNTY OF DU PAGE, ILLINOIS
AND THE CITY OF DARIEN FOR RETAINING WALL CONSTRUCTION ALONG
CH 31/PLAINFIELD ROAD, FROM CASS AVENUE TO LINDEN AVENUE
(INCREASE COUNTY COST \$264,500.00, +141.07%)

WHEREAS, the DuPage County Board heretofore adopted Resolution DT-R-0082-23 on September 23, 2023, wherein the County of DuPage (hereinafter referred to as COUNTY) and the City of Darien (hereinafter referred to as CITY) as public agencies within the meaning of the Intergovernmental Cooperation Act (5 ILCS 220/1 et seq.), entered into a Local Public Agency Agreement (hereafter AGREEMENT) to improve the existing retaining wall and fencing along the southside right-of-way of CH 31/Plainfield Road at Cass Avenue extending east to Linden Avenue (hereinafter referred to as "PROJECT"); and

WHEREAS, since the execution of the aforementioned AGREEMENT, the estimated costs of construction engineering and construction have increased, and it has been determined that land acquisition not previously considered for the PROJECT will now be included; and

WHEREAS, the AGREEMENT must be amended to update the total estimated construction engineering and construction costs and incorporate the land acquisition costs not previously included in the AGREEMENT (reflected in a revised EXHIBIT A, attached hereto); and

WHEREAS, a revised total cost for the PROJECT has been determined and the updated estimated cost for design engineering, construction engineering, construction, lighting and land acquisition is \$876,000; and

WHEREAS, this revised estimate is agreeable to the COUNTY and the COUNTY will reimburse the CITY 50% of the updated construction cost, estimated COUNTY share \$366,500.00, 50% of design and construction engineering costs, estimated COUNTY share \$37,500.00, and 100% of land acquisition costs, estimated COUNTY cost \$48,000.00; for a revised COUNTY total share of \$452,000; and

NOW, THEREFORE, BE IT RESOLVED that the DuPage County Chair is hereby authorized and directed to sign on behalf of the COUNTY, and the DuPage County Clerk is hereby authorized to attest thereto, the attached Amendment to the Intergovernmental Agreement between the COUNTY OF DUPAGE and the CITY OF DARIEN; and

File #: 25-1557	Agenda Date: 7/8/2025	Agenda #: 21.B.
	R RESOLVED that three (3) original copies of this ement be sent to the CITY, by and through the Divisi	
Enacted a	and approved this 8th day of July, 2025 at Wheaton, I	llinois.
		DEDORALLA CONDON CHAID
		DEBORAH A. CONROY, CHAIR DU PAGE COUNTY BOARD
	Attest:	
	JEAN K	ACZMAREK, COUNTY CLERK

FIRST AMENDMENT

TO INTERGOVERNMENTAL AGREEMENT

BETWEEN THE COUNTY OF DU PAGE AND THE CITY OF DARIEN FOR RETAINING WALL CONSTRUCTION ALONG CH 31/PLAINFIELD ROAD FROM CASS AVENUE TO LINDEN AVENUE

This FIRST AMENDMENT to the Intergovernmental Agreement, between the County of DuPage and the City of Darien, (hereinafter referred to as "FIRST AMENDMENT"), concerning Retaining Wall Construction along CH 31/Plainfield Road from Cass Avenue to Linden Avenue, is entered into this ______ day of ______, 2025, between the County of DuPage (hereinafter referred to as the "COUNTY"), a body corporate and politic, with offices at 421 North County Farm Road, Wheaton, Illinois and the City of Darien (hereinafter referred to as the "CITY"), a municipal corporation with offices at 1702 Plainfield Road, Darien Illinois 60561. The COUNTY and the CITY are hereinafter sometimes individually referred to as a "PARTY" or together as the "PARTIES".

RECITALS

WHEREAS, the COUNTY and CITY entered into an Intergovernmental Agreement, dated September 26, 2023, (hereinafter referred to as "AGREEMENT"), to improve the existing retaining wall and fencing along the southside right-of-way of CH 31/Plainfield Road at Cass Avenue extending east to Linden Avenue (hereinafter referred to as "PROJECT"); and

WHEREAS, since the execution of the aforementioned AGREEMENT (COUNTY Resolution DT-R-0082-23), the estimated costs of construction engineering and construction have increased, and it has been determined that lighting and land acquisition not previously considered for the PROJECT will now be included; and

WHEREAS, the AGREEMENT must be amended to update the total estimated construction engineering and construction costs and incorporate the lighting and land acquisition costs not previously included in the AGREEMENT (reflected in a revised EXHIBIT A, attached hereto); and

WHEREAS, a revised total cost for the PROJECT has been determined and the updated estimated cost for design engineering, construction engineering, construction, lighting and land acquisition is \$876,000; and

WHEREAS, this revised estimate is agreeable to the COUNTY and the COUNTY will reimburse the CITY 50% of the updated construction cost, estimated COUNTY share $\frac{$366,500.00}{$}$, 50% of design and construction engineering costs, estimated COUNTY share $\frac{$37,500.00}{$}$, and 100% of land acquisition costs, estimated COUNTY cost $\frac{$48,000.00}{$}$; for a revised COUNTY total share of \$452,000; and

NOW, THEREFORE, in consideration of the premises, the mutual covenants, terms, and conditions herein set forth, the PARTIES agree the AGREEMENT is amended as follows:

- 1) Section 3.0 RESPOSIBILITIES OF THE CITY Paragraph shall be added:
 - 3.5. The CITY agrees to negotiate and manage right-of-way land acquisition on behalf of the COUNTY for PROJECT right-of-way with full reimbursement from the COUNTY for said right-of-way.
- 2) Section 4.0 RESPONSIBILITIES OF THE COUNTY
 Paragraph 4.1, 4.2 and 4.3 of the AGREEMENT shall be amended to read
 as follows and is fully incorporated therein by reference:
 - 4.1 The COUNTY agrees to reimburse the CITY for 50% of the actual construction cost for the PROJECT, COUNTY share estimated to be \$366,500 (see Exhibit A).
 - 4.2 The COUNTY also agrees to reimburse the CITY for 50% of the actual design and construction engineering costs for the PROJECT, COUNTY share estimated to be \$37,500 (see Exhibit A). The COUNTY agrees to pay the CITY its share of design engineering costs upon award of a contract for construction and receipt of an invoice from CITY, or in accordance with Section 10.2.
 - 4.3 The COUNTY agrees to pay the CITY eighty (80%) percent of its share of the PROJECT construction cost (\$293,000) upon award of the contract for the PROJECT based upon as-bid unit prices for the PROJECT and receipt of an invoice from CITY. Upon completion of the PROJECT and based upon the documentation of final costs and quantities, submitted by the CITY and a final invoice, the COUNTY agrees to reimburse the CITY for the balance of its share of the PROJECT cost within sixty (60) days of receipt of a properly documented invoice from the CITY.

3) Section 9.0 NOTICES

County of DuPage Director information shall be updated to:

Stephen M. Travia

Director of Transportation

Phone: 630.407.6900

Email: stephen.travia@dupagecounty.gov

- 4) Exhibit A of the AGREEMENT has been amended to reflect the revised estimated costs of the PROJECT, including cost shares of the PARTIES, and is fully incorporated therein.
- 5) It is mutually agreed by and between the PARTIES hereto that all covenants contained in the AGREEMENT which are not in conflict with this FIRST AMENDMENT shall remain in full force and effect and are incorporated herein.

IN WITNESS WHEREOF, the parties have caused this FIRST AMENDMENT to be executed in duplicate counterparts, each of which shall be considered as an original by their duly authorized officers as of the date first above written.

COUNTY OF DU PAGE

CITY OF DARIEN

Signature on file

Deborah A. Conroy, Chair DuPage County Board

Jøseph A. Marchese, Mayor City of Darien

ATTEST:

ATTEST:

Jean Kaczmarek

County Clerk

Signature on file JóAnne Ragona City Clerk

AMENDED EXHIBIT A PROJECT COST ESTIMATE

	PROJECT COST ESTIMATE	ESTIMATED CITY SHARE	ESTIMATED COUNTY SHARE
PROJECT Construction Cost Estimate (CITY/COUNTY 50% Share)	\$ 733 , 000	\$ 366,500	\$ 366,500
PROJECT Design and Construction Engineering Cost Estimate (CITY/COUNTY 50% Share)	\$ 75 , 000	\$ 37,500	\$ 37,500
PROJECT Right-of-Way Land Acquisition Cost Estimate (COUNTY 100% Share)	\$ 48,000 OF DU	Marie	\$ 48,000
PROJECT Lighting Cost Estimate (CITY 100% Share)	\$ 20,000	\$ 20,000	
Total Cost Estimate	\$ 876,000	\$ 424,000	\$ 452,000

RESOLUTION NO. R-24-25

AN AMENDED RESOLUTION AUTHORIZING THE MAYOR TO EXECUTE AN INTERGOVERNMENTAL AGREEMENT WITH THE COUNTY OF DUPAGE FOR A COST SHARE OF A RIGHT-OF-WAY ENHANCEMENT PROJECT AT THE SOUTHEAST CORNER ALONG PLAINFIELD ROAD FROM CASS AVENUE TO LINDEN AVENUE AND CASS AVENUE TO THE SIDE YARD LIMIT OF 7614 GAIL AVENUE

WHEREAS, under the Constitution and Statues of the State of Illinois, a municipality is authorized to participate in intergovernmental cooperation; and

WHEREAS, an Intergovernmental Agreement has been prepared between the City of Darien and the County of DuPage concerning said retaining wall construction along CH 31/Plainfield Road from Cass Avenue to Linden Avenue, a copy of which is attached hereto as "Exhibit A", and is incorporated herein; and

WHEREAS, The Corporate Authorities, for record keeping, desire to authorize the execution of the Intergovernmental Agreement by Resolution.

NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF DARIEN, DUPAGE COUNTY, as follows:

SECTION 1: That the Mayor and City Clerk are hereby authorizing the Mayor to execute an Intergovernmental Agreement with the County of DuPage for a cost share of a right-of-way enhancement project at the southeast corner along Plainfield Road from Cass Avenue to Linden Avenue and Cass Avenue to the side yard limit of 7614 Gail Avenue.

The obligations of the City of Darien shall be limited to those specifically stated within the terms of the Intergovernmental Agreement.

SECTION 2: This Resolution shall be in full force and effect from and after its passage and approval as provided by law.

PASSED BY THE CITY COUNCIL OF THE CITY OF DARIEN, DUPAGE COUNTY, ILLINOIS, this 2nd day of June 2025.

AYES: 6 – Belczak, Kenny, Leganski, Schauer, Stompanato, Sullivan

NAYS: 0 - NONE

ABSENT: 1 -Gustafson

RESOLUTION NO. R-24-25

APPROVED BY THE MAYOR FOR THE CITY OF DARIEN, DUPAGE COUNTY, ILLINOIS, this 2^{nd} day of June 2025.

Signature on file

JOSEPH A. MARCHESE, MAYOR

ATTEST:

Signature on file

JØANNE E. RÁGŎŃA, ĆITY CLERK

APPROVED AS TO FQRM: /

Signature on file



STATE OF ILLINOIS)
SS
COUNTY OF DU PAGE)

I, JoAnne E. Ragona, do hereby certify that I am the duly qualified CITY CLERK of the CITY OF DARIEN of DuPage County, Illinois, and as such officer I am the keeper of the records and files of the City;

I do further certify that the foregoing constitutes a full, true and correct copy of RESOLUTION NO. R-24-25 — "CONSIDERATION OF A MOTION TO APPROVE AN AMENDED RESOLUTION AUTHORIZING THE MAYOR TO EXECUTE AN INTERGOVERNMENTAL AGREEMENT WITH THE COUNTY OF DUPAGE FOR A COST SHARE OF A RIGHT-OF-WAY ENHANCEMENT PROJECT AT THE SOUTHEAST CORNER ALONG PLAINFIELD ROAD FROM CASS AVENUE TO LINDEN AVENUE AND CASS AVENUE TO THE SIDE YARD LIMIT OF 7614 GAIL AVENUE" of The City of Darien, Du Page County, Illinois, Duly Passed and Approved by the Mayor and City Council at a Meeting held on June 2, 2025.

IN WITNESS WHEREOF, I have hereunto affixed my official hand and seal this 2nd day of June, 2025.



Signature on file

City Clerk

SPECIAL PURCHASE REQUISITION, DU PAGE COUNTY, ILLINOIS

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6647-1-SERV			WHEATON, ILLINOIS 60187			DT-R-	0082-23
PURCHASE ORDER NO.	REQUISITIO	REQUISITIONING AGENCY		SHIP TO ADDRESS		RESOLUTI	ON NUMBER
DuPage Co		County Division of Transportation		Same			
	NAME			NAME			
	421 N. Cour	ity Farm Road		ADDRESS			
06/24/2025	_ Wheaton, IL	60187		ADDINESS			
DATE	CITY, STATE, ZIP	00101		CITY, STATE, ZIP			
FUND AGENCY	VENDOR NUMBER		EXPIRATION DATE	LAST INVOI	CE DATE	F	ОВ
	10226		11/30/2025			Wheaton, IL	
ORGANIZATION ACTIVITY OBJECT	UNIT OF QUANTITY PURCHASE	ITEM CODE		CRIPTION TY / CONTRACT		UNIT PRICE	EXTENSION
LN1-1500-3500-54040-	PLNFLD_CASS_LDN		Intergovernmental Agreement bet	ween the County of D	uPage		37,500.00
LN2-1500-3500-54050-	PLNFLD_CASS_LDN		and the City of Darien, for retaining	g wall and fencing im	provements		150,000.00
			along the southside right-of-way of	of CH 31/Plainfield Roa	ad		
			from Cass Avenue extending eas	t to Linden Avenue.			
			Amending Reso	olution DT-R-0082	<u>4</u> -23		
LN2-1500-3500-54050-	PLNFLD_CASS_LDN		Increase Line				216,500.00
LN3-1500-3500-54000-	LN3-1500-3500-54000- PLNFLD_CASS_LDN		Establish Line				48,000.00
			Extend contract expiration date to	10/31/40			
						TOTAL	\$452,000.00
REMIT TO:							
City of Darien, 1702 Plainfi	eld Road, IL 60561						
COMMITTEE APPROVAL	DATE						
Transportation	07/01/25			Sig	gnature o	n file	11
County Board	07/08/25	_		<u> </u>			6/24/25
		_		21 21 21 21			DAIL 1

FORM PR770 REV. 1193

Transportation Resolution





File #: DT-R-0021-25 Agenda Date: 7/8/2025 Agenda #: 21.A.

AWARDING RESOLUTION TO EARTHWERKS LAND IMPROVEMENT AND DEVELOPMENT CORPORATION FOR ARMY TRAIL ROAD DRAINAGE IMPROVEMENTS SECTION 24-00286-12-DR (COUNTY COST: \$435,376.10)

WHEREAS, the County of DuPage is authorized and empowered to construct, repair, improve and maintain County and/or township roads, bridges, and appurtenances; and

WHEREAS, the County of DuPage has published a contract proposal for drainage improvements to Army Trail Road, Section 24-00286-12-DR, setting forth the terms, conditions, and specifications (a copy of which is incorporated herein by reference); and

WHEREAS, the budget for the 2025 fiscal year provides for the construction and maintenance of roads, bridges, and appurtenances; and

WHEREAS, the following bids were received in compliance with the contract proposal:

<u>NAME</u>	<u>BID AMOUNT</u>
Earthwerks Land Improvement & Development Corp.	\$435,376.10
Martam Construction, Inc.	\$456,225.93
Copenhaver Construction, Inc.	\$470,530.36
V-3 Construction Group, Ltd.	\$531,030.00; and

WHEREAS, it has been determined that it is in the best interest of the County of DuPage to award a contract to Earthwerks Land Improvement & Development Corp. for their submission of the lowest responsible bid in the amount of \$435,376.10.

NOW, THEREFORE, BE IT RESOLVED, that a contract in accordance with the terms, conditions, and specifications set forth in said contract proposal be, and is hereby awarded to Earthwerks Land Improvement & Development Corp., 2111 Ogden Avenue, Lisle, Illinois 60532 for their bid of \$435,376.10; and

BE IT FURTHER RESOLVED, that this contract is subject to the Prevailing Wage Act (820 ILCS 130/0.01 *et seq.*), and as such, not less than the prevailing rate of wages as found by the Illinois Department of Labor shall be paid to all laborers, workers, or mechanics performing work under this contract; and

File #: DT-R-0021-25	Agenda Date: 7/8/2025	Agenda #: 21.A.
	VED, that the DuPage County Chair is d County Clerk is hereby authorized Development Corp.	
Enacted and appro-	ved this 8th day of July, 2025 at Wheato	n, Illinois.
	_	
		DEBORAH A. CONROY, CHAIR DU PAGE COUNTY BOARD
	Attest:	
	JEAI	N KACZMAREK, COUNTY CLERK

DU PAGE COUNTY 2025 JUN 18 FM 2: 00 DIVISION OF TRANSPORTATION

OPENING OF PROPOSALS

Wednesday, June 18, 2025 2:00 PM

C.H. 11 Army Trail Road

Section 24-00286-12-DR

Engineer's Estimate: \$387,190.50

BIDDER	1	BID AMOUNT
A. Lamp Concrete Contractors, Inc.		
Earthwerks Land Improvement & Development Corp.		\$ 435, 376.10
Copenhaver Construction, Inc.		\$ 470,530.36
Martam Construction, Inc.		\$ 456, 225, 93
V3 Construction Group, Ltd.		\$ 531,030.00

√ Proposal includes the following:

- Addenda (if any)
- o Proposal (form BLR12200 & BLR 12201)
 - o Cover page

Notice to Bidders

Proposal

o Contractor Certifications

o Signatures

- Schedule of Prices
- o Local Agency Proposal Bid Bond (or Check)
- o Apprenticeship or Training Program Certification (not for federally funded projects)
- Affidavit of Illinois Business Office
- o BC 57 Affidavit of Availability (may be submitted within 24 hours after the letting)
- Vendor Ethics Disclosure Statement
- o three (3) references form
- o W-9 Taxpayer Identification Number (may be submitted after the letting)
- Any other items required to be submitted with the bid, such as Bituminous Materials Cost Allowance, or Steel Cost Adjustment, or Fuel Cost Adjustment



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	24-00286-12	
COMPANY NAME:	Easth Wern's Lond Improvement & Development Cosporation	
CONTACT PERSON:	Dan Davies	
CONTACT EMAIL:	LDAYIES @ earth weres inc. com	

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

Has the	Ridder made	contributions	as described	ahove?
i ias tile	Diddel Hade	COHUIDUUOIIS	as described	abuve:

Yes
Yes



If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

₹ No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

http://www.dupagecounty.gov/government/county_board/ethics_at_the_county/

The full text of the County's Procurement Ordinance is available at:

Section IV: Certifica	ation_	SEAL SEAL		
certifies that the inform	ation submitted on this	form is true and correct to the ba	nd understands these requirements, a st of its knowledge. Signature on fi	
Printed Name:	President	Signature: Date:	6-18-2625	

https://www.dupagecounty.gov/government/departments/finance/procurement/procurement ordinance and guiding principles.php

SPECIAL PURCHASE REQUISITION, DU PAGE COUNTY, ILLINOIS



WHEATON, ILLINOIS 60187

PURCHASE ORDER NO. REQUISITIONING DuPage County NAME 421 N. County F			ınty Division of	Transportation	SHIP TO A Same NAME	ADDRESS	RESOLUT	TION NUMBER		
	/24/2025 DATE	5		Wheaton, IL			ADDRESS			
FUND		ENCY	VENI	DOR NUMBER		EXPIRATION DATE 10/31/2030	CITY, STATE, Z	ST INVOICE DATE 11/30/2031		FOB eaton, IL
ORGANIZATION	ACTIVITY	OBJECT	QUANTITY	UNIT OF PURCHASE	ITEM CODE		CRIPTION TY / CONTRACT		UNIT PRICE	EXTENSION
LN1-15	500-350	0-54050	ATR_RGN	ICY_DRNG		Drainage improvements to Army	rail Road at l	Regency Boulevard		300,000.00
LN2-1500-3500-54050 ATR_RGNCY_DRNG			Section #24-00286-12-DR				135,376.10			
									TOTAL	\$435,376.10
REMIT TO:	s I and	Improve	ement and	Developme	nt Corporation	n - 2111 Ogden Avenue, Lisle, IL	60532			
COMMITTEE				DATE		T TO ISSUE FORMAL NOTICE TO PR				
Transportation	n			07/01/25				Signature	on file	//
County Board				07/08/25	***	HEADER COMMENTS DOT-EARTHWERKS 24-00286-12-	-DR ***	Digitature	- OII IIIC	6/24/25 DAYE
								THE STATE OF THE S		

FORM PR770 REV. 1193

Finance Resolution

421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov



File #: FI-R-0111-25 Agenda Date: 7/1/2025 Agenda #: 10.A.

ACCEPTANCE AND APPROPRIATION OF ADDITIONAL FUNDING AND EXTENSION OF TIME FOR THE ILDCEO COMMUNITY SERVICES BLOCK GRANT PY25 INTER-GOVERNMENTAL AGREEMENT NO. 25-231028 COMPANY 5000 - ACCOUNTING UNIT 1650 FROM \$1,269,609 to \$1,401,491 (AN INCREASE OF \$131,882)

(Under the administrative direction of the Community Services Department)

WHEREAS, the County of DuPage, through the DuPage County Department of Community Services, heretofore accepted and appropriated the ILDCEO Community Services Block Grant PY25, Inter-governmental Agreement No. 25-231028, Company 5000- Accounting Unit 1650, pursuant to Resolution FI-R-0021-25 for the period January 1, 2025 through December 31, 2025; and

WHEREAS, the County of DuPage has been notified by the Illinois Department of Commerce and Economic Opportunity, through the attached letter (ATTACHMENT II) that additional grant funds in the amount of \$131,882 (ONE HUNDRED THIRTY-ONE THOUSAND EIGHT HUNDRED EIGHTY-TWO AND NO/100 DOLLARS) are available to increase assistance to low-income individuals and families become self-sufficient; and the grant is extended to June 30, 2026; and

WHEREAS, no additional County funds are required to receive this additional funding; and

WHEREAS, acceptance of this additional funding does not add any additional subsidy from the County; and

WHEREAS, the County of DuPage finds that the need to appropriate said additional funds creates an emergency within the meaning of the Counties Act, Budget Division, (55 ILCS 5/6-1003).

NOW, THEREFORE, BE IT RESOLVED by the DuPage County Board that the Amendment 1 for grant No. 25-231028, via the attached letter (ATTACHMENT II) between the DuPage County and the Illinois Department of Commerce and Economic Opportunity is hereby accepted; and

BE IT FURTHER RESOLVED that the additional appropriation on the attached sheet (ATTACHMENT I) in the amount of \$131,882 (ONE HUNDRED THIRTY-ONE THOUSAND EIGHT HUNDRED EIGHTY-TWO AND NO/100 DOLLARS) be made and added to the ILDCEO Community Services Block Grant PY25, Inter-governmental Agreement NO. 25-231028, Company 5000 - Accounting Unit 1650, and that the expiration date of this grant be extended until June 30,2026, and the grant continues as originally approved in all other respects; and

File #: FI-R-0111-25	Agenda Date: 7/1/2025	Agenda #: 10.A.
BE IT FURTHER RESC is approved as the County's Aut	DLVED by the DuPage County Board that the thorized Representative; and	he Director of Community Services
	DLVED that should state and/or federal fund the need for continuing the specified prog	
	DLVED that should the Human Services Concommend action to the County Board by Ro	
Enacted and appr	roved this 8 th day of July, 2025 at Wheaton,	Illinois.
		DEBORAH A. CONROY, CHAIR DU PAGE COUNTY BOARD
	Attest:	
	JEAN	KACZMAREK, COUNTY CLERK

ATTACHMENT I

APPROPRIATION OF ADDITIONAL FUNDING FOR THE ILDCEO COMMUNITY SERVICES BLOCK GRANT PY25 INTER-GOVERNMENTAL AGREEMENT NO. 25-231028 COMPANY 5000 – ACCOUNTING UNIT 1650 \$131,882

REVENUE

	41000-0002 - Federal Operating Grant - HHS	\$ 131,882	_	
TOTAL	ANTICIPATED REVENUE		\$	131,882
EXPEN	<u>DITURES</u>			
PERSO	NNEL			
	50000-0000 - Regular Salaries	\$ (26,775)		
	50010-0000 - Overtime	2,472		
	51010-0000 - Employer Share I.M.R.F.	(2,166)		
	51030-0000 - Employer Share Social Security	(1,859)		
	51040-0000 - Employee Med & Hosp Insurance	 (48,957)	_	
	TOTAL PERSONNEL		\$	(77,285)
COMM	ODITIES			
	52000-0000 - Furn/Mach/Equip Small Value	\$ 3,000		
	52100-0000 - I.T. Equipment-Small Value	35,599		
	52200-0000 - Operating Supplies & Materials	4,401		
			\$	43,000
CONTR	ACTUAL			
	53500-0000 - Mileage Expense	\$ 200		
	53510-0000 - Travel Expense	4,000		
	53600-0000 - Dues & Memberships	1,200		
	53610-0000 - Instruction & Schooling	2,235		
	53800-0000 - Printing	100		
	53807-0000 - Software Maint Agreements	10,000		
	53815-0006 - Csbg Disaster Assistance	31,340		
	53820-0000 - Grant Services	66,092		
	53830-0000 - Other Contractual Expenses	 51,000	•	
	TOTAL CONTRACTUAL		\$	166,167
TOTAL	ADDITIONAL APPROPRIATION		\$	131,882



COMMUNITY SERVICES BLOCK GRANT PROGRAM

Notice of Grant Allocation Modification

DuPage County Department of Community Services

PY24 Initial Allocation Amount:	\$1,269,609
Total Modification Increase:	\$131,882
New Modified Budget Total:	\$1,401,491
Modification Breakdown	
PY25 Allocation Change:	\$0
PY24 Carryover:	\$131,882
Discretionary Funds Awarded:	\$0
Total Modification Increase:	\$131,882

Funds NOT Eligible for Carryover

PY24 Unspent Discretionary: \$0

AMENDMENT TO THE GRANT AGREEMENT



BETWEEN THE STATE OF ILLINOIS, DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY AND DuPage County

The State of Illinois (State), acting through the undersigned agency (Grantor) and **DuPage County** (Grantee) (collectively, the "Parties" and individually, a "Party") agree that this Amendment (Amendment) will amend the Grant Agreement (Agreement) referenced herein. All terms and conditions set forth in the original Agreement and any subsequent amendment, but not amended herein, shall remain in full force and effect as written. In the event of conflict, the terms of this Amendment shall prevail.

The Parties or their duly authorized representatives hereby execute this Amendment.

ILLINOIS DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY

DuPage County

Ву:		By:	
Signature of Kristin A. Richards, Dire	ector		horized Representative
Date:		Date:	
		Printed Name:	
Ву:	_		
Signature of Designee		Printed Title:	
Date:		Email:	
Printed Name:			
Printed Title:	Designee		
Ву:		Bv:	
Signature of Second Grantor Approv			ond Grantee Approver, if applicable
Date:		Date:	
Printed Name:		Printed Name:	
Printed Title:		Printed Title:	
Second G	Grantor Approver		Second Grantee Approver (optional at Grantee's discretion)

By:		
Signature of Third Grantor Approver, if applicable		
Date:		
Printed Name:		
Printed Title:		
	Third Grantor Approver	

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ARTICLE I AWARD AND AMENDMENT INFORMATION AND CERTIFICATION

- 1.1. Original Agreement. The Agreement, numbered **25-231028**, has an original term from **01/01/2025** to **12/31/2025**.
- 1.2. Prior Amendments. Below is the list of all prior amendments to the Agreement (mark N/A if none):

Amendment Number	Effective Date (MM/DD/YYYY)
N/A	N/A

- 1.3. <u>Current Agreement Term.</u> The Agreement expires on **12/31/2025**, unless terminated pursuant to the Agreement.
- 1.4. <u>Item(s)</u> Altered. Identify which of the following Agreement elements are amended herein (check all that apply):

	☐ Exhibit A (Project Description)	\boxtimes	Award Term
	☐ Exhibit B (Deliverables/Milestones)	\boxtimes	Award Amount
	☐ Exhibit C (Contact Information)		PART TWO (Grantor-Specific Terms)
	☐ Exhibit D (Performance Measures/Stds.)		PART THREE (Project-Specific Terms)
	☐ Exhibit E (Specific Conditions)	\boxtimes	Budget
			Budget (Unilateral)
			Funding Source
			Other (specify):
1.5.	Effective Date. This Amendment shall be effective on		
	identified in this Paragraph, the Amendment shall be	effe	ctive upon the last dated signature of the
	Parties.		

1.6. Certification. Grantee certifies under oath that (1) all representations made in this Amendment are true and correct and (2) all Grant Funds awarded pursuant to the Agreement shall be used only for the purpose(s) described therein, including all subsequent amendments. Grantee acknowledges that the Award is made solely upon this certification and that any false statements, misrepresentations, or material omissions shall be the basis for immediate termination of the Agreement and repayment of all Grant Funds.

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ARTICLE II AMENDMENTS

- 2.1. Award Term Changes. Paragraph 2.1 of the Agreement is amended to expire on 06/30/2026, unless terminated pursuant to the Agreement.
- 2.2. Award Amount Changes. The first sentence of Paragraph 2.2 of the Agreement is amended as follows: Grant Funds shall not exceed \$1,401,491.00, of which \$1,401,491.00 are federal funds.
- 2.3. <u>Budget Changes</u>. The Budget is revised by modifying the line items as detailed in the attached revised Budget.

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Finance Resolution

421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov



File #: FI-R-0113-25 Agenda Date: 7/8/2025 Agenda #: 10.C.

APPROVAL OF EMPLOYEE COMPENSATION AND JOB RECLASSIFICATION ADJUSTMENTS

WHEREAS, appropriations for the 5000-2840 GRANT FUND for Fiscal Year 2025 were adopted by the County Board pursuant to Ordinance FI-O-0009-23; and

WHEREAS, the DuPage County Employee Policy Manual, Compensation Practices Policy, states salary adjustments, outside of those specifically authorized by the County Board or recognized collective bargaining agreements, must be reviewed by the Finance Department. These requests should be included within the Department's annual fiscal budget; and

WHEREAS, the DuPage County Employee Policy Manual, Job Evaluation/Headcount Title Changes Policy, states job evaluations and headcount title change requests should be included within the annual fiscal budget process. Requests made outside of the annual fiscal budget process must obtain approval from the Chief Financial Officer (or designee), Human Resources Director and County Board Chair designee and complete all documents as part of the request.

NOW, THEREFORE BE IT RESOLVED that the positions as specified below be placed on the regular, parttime or temporary payroll salaries, classifications, and with the effective date as more particularly set forth below:

GRANT FUND - WIOA

JOB RECLASSIFICATIONS

Workforce Development

July 9, 2025

Thaddeus Zychowski Workforce Development Program Coordinator, from Senior Programs Specialist Class 1732, Grade 312 at \$80,000.12 per year, from Class 1744, Grade 311 at \$70,112.84 per year

Enacted and approved this 8th day of July, 2025 at Wheaton, Illinois.

	DEBORAH A. CONROY, CHAIR DU PAGE COUNTY BOARD
Attest:	JEAN KACZMAREK, COUNTY CLERK

Finance Resolution

421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov



File #: FI-R-0115-25 **Agenda Date:** 7/8/2025 **Agenda #:** 10.E.

AUTHORIZATION OF A CONTRACT WITH THE INTERNATIONAL UNION OF OPERATING ENGINEERS, LOCAL 150, DEPARTMENT OF PUBLIC WORKS, STORMWATER AND FACILITIES MANAGEMENT

WHEREAS, the Illinois Public Employee Labor Relations act has established regulations regarding union recognition and collective bargaining in the State of Illinois, and

WHEREAS, a group of employees in the Department of Public Works, Stormwater and Facilities Management did authorize the International Union of Operating Engineers, Local 150 as their exclusive bargaining agent under the terms and conditions of the Act, and

WHEREAS, the County, and the International Union of Operating Engineers, Local 150, Department of Public Works, Department of Stormwater, and Department of Facilities Management have been bargaining in good faith to reach agreement, and

WHEREAS, the union members have ratified a tentative agreement.

NOW, THEREFORE, BE IT RESOLVED that the County Board does hereby ratify, accept and adopt the contract attached to this resolution between the International Union of Operating Engineers, Local 150, Department of Public Works, Department of Stormwater, Department Facilities Management and the County of DuPage, and

BE IT FURTHER RESOLVED that the County Board Chair be authorized to execute said contract, and

BE IT FURTHER RESOLVED that the County Clerk transmit a copy of this resolution to the Human Resources Department and the County Board Office.

Enacted

and approved this 8 th day of July, 2025 at Wheat	on, Illinois.
	DEBORAH A. CONROY, CHAIR DU PAGE COUNTY BOARD
Attest:	AN KACZMAREK, COUNTY CLERK

AGREEMENT

Between

COUNTY OF DUPAGE

DEPARTMENT OF PUBLIC WORKS

And

THE INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 150, PUBLIC EMPLOYEES' DIVISION

July 8, 2025 to November 30, 2030

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PREAMBLE

This Agreement has been made and entered into by and between the County of DuPage (hereinafter referred to as the "County") and the International Union of Operating Engineers, Local 150, (hereinafter referred to as the "Union").

It is the intent and purpose of this Agreement to set forth the parties' entire agreement with respect to the wages, hours, and other terms and conditions of employment that will be in effect during the term of this Agreement for employees covered by this Agreement; as required by the Illinois Public Labor Relations Act.

The parties acknowledge their mutual desire to foster harmonious relations between the County and the employees represented by this agreement and to establish equitable and peaceful procedure for the resolution of differences, to prevent interruptions of work and interference with the efficient operation of County operations, and to provide an orderly and prompt method for resolving grievances concerning the employees.

This Agreement, upon ratification, supersedes all prior Memoranda of Understanding (MOUs), and agreements.

ARTICLE 1 RECOGNITION

SECTION 1.1 RECOGNITION

The Employer recognizes the Union as the sole and exclusive bargaining representative in all matters establishing and pertaining to wages and salaries, hours, working conditions and other conditions of employment on which it may lawfully bargain collectively for employees within the following collective bargaining unit, as certified by the Illinois State Labor Relations Board:

**INCLUDED

All persons employed full-time by the DuPage County in its Department of Public Works, Facilities Management Department, and/or Stormwater Management in the following classifications: Water/Wastewater Maintenance Worker; Senior Water/Wastewater Maintenance Worker; Utility Inspector; Water/Wastewater Maintenance Crew Leader; Lead Heavy Equipment Mechanic; Laborer; Senior Meter Reader/Installer, ; Equipment Operator, Principal Meter Reader, Grounds Crew Leader, Sr. Grounds Maintenance Worker, Grounds Maintenance Worker.

**EXCLUDED

All other employees of the County of DuPage, including supervisory, managerial or confidential employees.

SECTION 1.2 NEW CLASSIFICATIONS

The Employer shall notify the Union within fifteen (15) working days of its decision to implement any and all new classifications pertaining to work of a nature performed by employees within the bargaining unit.

ARTICLE 2 MANAGEMENT RIGHTS

SECTION 2.1 MANAGEMENT RIGHTS

It is understood and agreed that the County retains all traditional, statutory, and constitutional rights and authority to manage and operate the employees of the County in all respects, including, but not limited to, all rights and authority exercised by the County prior to the execution of this Agreement, except as amended, changed or modified in a specific provision set forth in this Agreement. These rights include but are not limited to the following:

- a) plan, direct, control, and determine all functions, operations, standards and services.
- b) Supervise, direct and evaluate employees;
- c) Establish the qualifications for employment and employ employees;
- d) Establish reasonable work rules, schedules, assignments and assign employees;
- e) Hire, promote, transfer, schedule and assign employees in positions and to create, combine, modify, and eliminate positions within the Department;
- f) Suspend, discharge, and take other disciplinary action against employees for just cause (with the exception of probationary employees, who may be discharged without cause).
- g) To relieve employees from duty because of lack of work, money or other legitimate cause, to determine the size and composition of the working force;
- h) Establish reasonable work and productivity standards and rules of conduct, and, from time to time, amend such standards;
- Determine whether work and/or services are to be provided by employees covered by this Agreement (including which employees) or by other employees or persons not covered by this Agreement;
- j) Determine the number of hours of work and shifts per work week and assign overtime;
- k) Maintain efficiency of operations and services of the Department;
- 1) Take whatever action is necessary to comply with the State and Federal law;
- m) Secure, change or eliminate methods, equipment, and facilities for the improvement of operation and to establish and implement a budget;
- n) Determine the kinds and amounts of services to be performed as it pertains to operations, and the number and kind of classifications to perform such services, to include revision, combination, addition or elimination of job classifications; determine the methods, means, organization and personnel by which operations are to be conducted to include services and staffing requirements by program, unit, and division.

However, nothing in this Section shall alter the County's obligation to bargain with the Union over mandatory subjects of bargaining as provided in the Illinois Labor Relations Act and relevant case-law.

ARTICLE 3 UNION RIGHTS

SECTION 3.1 UNION ACTIVITY DURING WORKING HOURS

Union activities within Employer facilities shall be restricted to administering and negotiating this agreement. The Stewards or his/her designees shall ask for and obtain permission before leaving his/her job in order to conduct Union business. The Stewards or his/her designees will ask for and obtain permission from the Manager of any employee with whom he/she wishes to carry on Union business.

Authorized agents of the Union shall have access to the Employer's establishment, including remote job sites, during working hours for the purpose of adjusting disputes, investigating working conditions, and ascertaining that the Agreement is being adhered to, with prior notification to the Operations Level Manager or his/her designee, provided however, there is minimal interruption of the Employer's working schedule.

SECTION 3.2 UNION BULLETIN BOARD

The Employer shall provide a Union bulletin board at each work location. The board(s) shall be for the sole and exclusive use of the Union, such notices shall be limited to Union business and notices of a non-controversial and non-political nature.

ARTICLE 4 UNION DUES/FAIR SHARE CHECKOFF

SECTION 4.1 DEDUCTIONS

The Employer agrees to deduct from the pay of those employees who are Union members any or all of the following:

- (A) Union membership dues, assessments, PAC, or fees;
- (B) Union sponsored credit and other benefit programs;
- (C) Voluntary fair share payments

Requests for any of the above shall be made on a form provided by the Union and shall be made within the provisions of the State salary and annuity withholding Act and/or any other applicable State statute.

Upon receipt of an appropriate written authorization from an employee, such authorized deductions shall be made in accordance with the law and shall be remitted to the Union on a monthly basis at the address designated in writing by the Union. The Union shall advise the Employer of any increases in dues or other approved deductions in writing at least thirty (30) days prior to its effective date.

The Union shall certify the current amount of Union deductions.

SECTION 4.2 HOLD HARMLESS

The Union shall hold and save the employer harmless from any and all responsibility and claims in connection with the collection and disbursement of monies under this Article and Agreement.

ARTICLE 5 HOURS OF WORK AND OVERTIME

SECTION 5.1 WORKDAY AND WORKWEEK

- (A) The workday for bargaining unit employees is eight (8) hours and the workweek is forty (40) hours.
- (B) Hours
 - 1) Except as set forth herein, the hours for bargaining unit employees are 7:00 a.m. to 3:30 p.m., 6:00 a.m. to 2:30 p.m., or 5:30 a.m. to 2:00 p.m., Monday through Friday.
 - The Employer reserves the right to adjust the hours of work as operational needs arise to conduct business in the most efficient manner with twenty-one (21) days prior notice to the affected employees. The Employer agrees that it will not change the hours of work arbitrarily and it shall only be for legitimate operational needs and for specific job assignments. The Employer shall not adjust the hours of work to avoid paying overtime compensation.
 - 3) The workweek for current employees shall not be altered from Monday through Friday. However, if the County has a legitimate operational need that requires a permanent change to the workweek for new hires, the County shall (1) inform the Union of any such proposed change thirty (30) days before it is proposed to be implemented and (2) if the Union objects, the parties will meet and negotiate the decision to alter the workweek.

SECTION 5.2 LUNCH/REST PERIODS

- (A) Employees shall be granted two (2) fifteen (15) minute paid breaks, one during the first half of the workday and one during the second half of the work day. Employees will be allowed to combine these two breaks with prior approval from the supervisor. Except that employees will not be permitted to combine these two breaks at the beginning or end of the day as a means to begin later or end early.
- (B) Employees shall be granted a one-half hour unpaid lunch during the midpoint of each day. Additionally, where the requirements of the job dictate that employees work through their lunch period, employees shall be allowed to leave work thirty (30) minutes early or shall be compensated at the rate of one-half hour of appropriate overtime. The employee shall notify and obtain approval from the supervisor to leave work thirty (30) minutes early, such approval shall not be unreasonably denied.

SECTION 5.3 ALLOWABLE REST PERIOD

Employees may work more than sixteen (16) hours in a twenty-four (24) hour period without taking an eight (8) hour rest period. Should an employee reasonably believe that he can

work more than 16 hours in a twenty-four-hour period, he shall be permitted to do so. The employee agrees to provide the Employer a minimum of one (1) hour advance notice if he cannot continue to work. If the employee is sent home by the County for an eight (8) hour rest period and any part of the eight (8) hour rest period falls within the employee's normal workday, he shall be compensated for those hours. Should the employee opt to go home for an eight (8) hour rest period and any part of the eight (8) hour rest period falls within the employee's normal workday he shall be permitted to use accrued vacation or compensatory time off for those hours.

SECTION 5.4 OVERTIME COMPENSATION

The compensation paid employees for scheduled overtime work shall be as follows:

- (A) Except as provided for in this agreement, a bargaining unit employee shall be paid at one and one-half his/her regular hourly rate of pay when required to work over forty (40) hours in a workweek.
- (B) A bargaining unit employee shall be paid at one and one-half (1 ½) times his/her regular hourly rate of pay for all scheduled hours worked on holidays in addition to the regular holiday pay. Bargaining unit members shall be paid two (2) times his/her regular hourly rate of pay for all hours worked above eight (8) hours worked on holidays.
- (C) For scheduled overtime, all time paid for but not worked, excluding sick leave and compensatory time shall be counted as "time worked" for purposes of computing overtime compensation.
- (D) Notwithstanding the above, all emergency call outs shall be compensated at the applicable overtime rate of pay. For emergency call outs, employees shall be paid at one and one-half (1½) times his/her regular hourly rate of pay for all hours worked outside his normal workday, defined as 7:00 a.m. to 3:30 p.m., 6:00 a.m. to 2:30 p.m., or 5:30 a.m. to 2:00 p.m., Monday through Friday. For emergency call outs, all time paid for but not worked shall count as time worked for purposes of computing overtime. For emergency call outs, employees shall be paid at time and a half for the first eight hours worked on the actual holiday and double time for all hours worked above eight (8) hours worked on the holiday in addition to the holiday pay; except that employees that work emergency overtime on Thanksgiving, Christmas Day, New Year's Day, and Independence Day shall be compensated at double time for all hours worked on those actual holiday in addition to the holiday pay.

SECTION 5.5 OVERTIME DISTRIBUTION

The Employer agrees to distribute overtime available to the bargaining unit employees as equally as possible amongst those bargaining unit employees who normally perform the work at issue within a classification. The employee working on any job which extends into overtime shall have first claim on the overtime.

The employment of part-time, temporary, seasonable or non-bargaining unit personnel shall not work to deprive regular full-time personnel of opportunities to work overtime. However, if the full-time personnel who would have usually worked the overtime refuses it or is unavailable, the employer may work part-time, temporary, seasonal or non-bargaining unit personnel on said overtime without violating the Agreement.

SECTION 5.6 NO PYRAMIDING

Compensation shall not be paid more than once for the same hours under any provision of this Article or Agreement.

SECTION 5.7 CALLBACK

A "callback" is defined as an official assignment of work which is outside of an employee's regularly scheduled working hours as defined in Section 5.1 of this Article. Callbacks shall be compensated for at the appropriate overtime rate of pay, as stated above, for all hours worked on callback, with a guaranteed minimum of two and one half (2.5) hours at such overtime rate of pay for each callback. It is expressly agreed that a callback assignment is for a specific purpose and the Employer shall not assign employees who complete their callback assignment busy work in order to fill the remaining hours. Compensation will start at the point the employee arrives at the designated site to work on the emergency situation. A continuation of the end of a normal workday due to an emergency shall not qualify for the minimum of two and one-half (2 ½) hours of pay but shall be paid as overtime pay according to this contract.

SECTION 5.8 ON-CALL ASSIGNMENTS

The Employer reserves the right to require and adjust on-call assignments within the Department as operations needs dictate. The designation of on-call shall be decided based upon a rotating list, starting in seniority order of employees who normally perform the work at issue. Telephones will be assigned to on-call personnel. Personnel will be required to respond to emergencies in a fit condition within one (1) hour of any emergency call-out notification. Weather conditions and other special considerations will be taken into account for this reporting requirement. Each employee designated as on-call shall receive seven (7) hours of pay per week at one and one half his or her (1 1/2) regular rate of pay for each week. Employees may trade on-call assignments with prior notice to the Manager. On-call pay shall be eligible to be paid as compensatory time as long as all conditions of the Compensatory Time section of this contract are met.

All employees scheduled for seasonal snow on-call duty, time period of November 1 through March 31, shall report to work when required to do so. Employees shall respond to the last call out notification within 15 minutes, and report to work within one (1) hour of any call out notification. Supervisors may establish a designated shift start time more than one hour after the call-out notification. Employees shall be compensated at the rate of seven (7) hours per week (one (1) hour per day) at their regular straight time rate of pay for being on-call for snow removal duty.

An employee shall lose one (1) hour of on-call pay per day for a prior approved off-call assignment, not responding to the last notification within 15 minutes of the last callout notification (unless at a supervisor's request, they are still requested to respond), not reporting to work within one (1) hour of a call out notification or by the designated shift start time, or missing an on-call assignment. Missing an on-call assignment will also be subject to the discipline policy.

An employee receiving On-Call Pay is not eligible to also receive Seasonal On-Call Pay.

SECTION 5.9 COMPENSATORY TIME OFF

In lieu of paid overtime, employees may opt to earn compensatory time off. Compensatory blocks shall be for a minimum of one quarter (1/4) hour increments. Compensatory time off shall be scheduled and approved the same as vacation time off. Employees may not accumulate more than one hundred (100) hours of compensatory time between November 1 and October 31st. On November 1 of every year, all accumulated compensatory time over sixteen (16) hours will be paid out. At no time shall an employee have more than 100 hours of comp; including the 16 hours carried over Employees may request to cash out their accumulated compensatory time prior to November 1, one time per year. After one hundred (100) hours of compensatory time is accrued between November 1 and October 31st, the option to earn over 100 hours of compensatory time off in lieu of paid overtime shall be by mutual agreement of the department head and employee.

ARTICLE 6 SENIORITY

SECTION 6.1 SENIORITY DEFINED

Except for purposes of layoff, an employee's seniority shall be the period of the employee's most recent continuous regular employment with the Employer. For purposes of layoff, an employee's seniority shall be the period of the employee's most recent continuous employment with the Employer within the bargaining unit.

SECTION 6.2 BREAKS IN CONTINUOUS SERVICE

An Employee's continuous service record shall be broken by voluntary resignation, discharge for just cause, retirement, failure to return from a leave of absence and being absent for three (3) consecutive days without approval.

SECTION 6.3 SENIORITY LIST

Upon the Union's request, the County will provide the Union with a seniority list setting forth each employee's seniority date. The County shall not be responsible for any errors in the seniority list unless such errors are brought to the attention of the County in writing within fourteen (14) calendar days after the Union's receipt of the list.

SECTION 6.4 PROBATIONARY EMPLOYEES

An employee is probationary for the first six (6) months of employment. A probationary employee shall have no seniority, except as otherwise provided for in this Agreement, until he/she has completed their required probationary period. Upon such completion, he/she shall acquire seniority retroactively from the date of employment. During this period of probation, no grievance may be filed by or on behalf of such employee regarding discharge or discipline. Employees who are promoted within the bargaining unit shall not be required to serve an additional probationary period.

ARTICLE 7 LAYOFF AND RECALL

SECTION 7.1 DEFINITION AND NOTICE

A layoff is defined as a reduction in bargaining unit jobs. The Employer shall give the Union at least thirty (30) days notice of any layoffs. Prior to any layoffs, the Employer shall give the Union notice of the layoff and agrees, upon request from the Union, to meet and discuss the layoffs and consider alternatives to the layoff(s).

SECTION 7.2 GENERAL PROCEDURES

In the event of a layoff, employees shall be laid off in inverse order of seniority within the following grouping of classifications as defined in Appendix **A** as defined in Article V. However, prior to laying off any bargaining unit employees, all seasonal, temporary, probationary, part-time or other non-bargaining unit employees who perform work customarily performed by bargaining unit employees shall be laid off or terminated, as the case may be. Employees selected to be laid off may bump a less senior employee in another classification as defined in Appendix **A** provided the more senior employee has the present ability and skills to perform the available work.

SECTION 7.3 RECALL OF LAID-OFF EMPLOYEES

The names of laid-off employees shall be placed on a layoff list for twelve (12) months. Employees shall be recalled in seniority order and seniority shall be restored. No part-time, temporary, seasonal or other non-bargaining unit employees will be hired to do bargaining unit work during this time. If there is a recall in the employee's job classification, employees who are still on the re-employment registry in said job classification shall be recalled in the inverse order of their layoffs. After twelve (12) months on layoff, an employee shall lose his/her seniority and will be removed from the layoff list.

Employees who are eligible for recall shall be given seven (7) calendar days' notice of recall and notice of recall shall be sent to the employee by certified or registered mail with a copy to the Union. The employee must notify the Director of Human Resources, or designee of his intention to return to work within three (3) days after receiving the notice of recall. The County shall be deemed to have fulfilled its obligations by mailing the recall notice by certified or registered mail, return receipt requested, to the mailing address last provided by the employee, it being the obligation and responsibility of the employee to provide the Director of Human Resources, or designee with his latest mailing address. If an employee fails to respond to a recall notice his name shall be removed from the re-employment registry.

ARTICLE 8 DISCIPLINARY PROCEDURES

SECTION 8.1 EMPLOYEE DISCIPLINE

The Employer agrees with the tenets of progressive and corrective discipline and that it shall be imposed only for just cause. Discipline shall include but not be exclusive of the following progressive steps of priority:

only for just cause. Discipline shall include but not be exclusive of the following progressive steps of priority:

- (A) Oral warning with documentation of such filed in the employee's personnel file.
- (B) Written reprimand with copy of such maintained in the employee's personnel file.
- (C) Suspension without pay with documentation of such maintained in the employee's personnel file, with copy sent to Union office.
- (D) Discharge with documentation of such maintained in the employee's personnel file, with copy sent to Union office.

The disciplinary steps may or may not be used in sequential order. Certain conduct may warrant an immediate written reprimand, suspension or termination. Whenever appropriate, prior to actual imposition of written reprimands, suspension without pay, or discharges, the employee shall be afforded an opportunity to discuss his/her views concerning the conduct causing such disciplinary action. Such discussion should take place as soon as practicable after the supervisor's action and not be unduly or unreasonable delayed, and the employee shall be informed clearly and concisely of the basis for such action. Furthermore, upon request of the employee, a representative of the Union (Steward) shall be allowed to be present and participate in such discussions.

able delayed, and the employee shall be informed clearly and concisely of the basis for such action. Furthermore, upon request of the employee, a representative of the Union (Steward) shall be allowed to be present and participate in such discussions.

SECTION 8.2 RIGHT TO REPRESENTATION

Prior to the pre-disciplinary discussions with the employee, the employee shall be informed of his/her rights to Union representation due to the fact that disciplinary action may be taken.

SECTION 8.3 USE OF ELECTRONIC SURVEILLANCE

The Employer agrees that electronic surveillance, including but not limited to GPS tracking, surveillance cameras, and other monitoring technologies, will not be used solely for the purpose of disciplining employees.

Surveillance data collected will be used primarily for legitimate business purposes such as ensuring employee safety, improving operational efficiency, and protecting company property.

In circumstances where there is evidence of misconduct or policy violations, surveillance data may be used as evidence to support disciplinary actions, provided that such use is consistent with fair and just cause principles.

ARTICLE 9 GRIEVANCE PROCEDURE

SECTION 9.1 GRIEVANCE DEFINED

A grievance is defined as any dispute or difference of opinion raised by an employee against the County involving an alleged violation of an express provision of the Agreement.

SECTION 9.2 PROCESSING OF GRIEVANCE

The parties acknowledge that it is usually most desirable for an employee and his immediate supervisor to resolve problems through free and normal communications. If, however, the informal process does not resolve the matter, the Union may process his grievance according to the following procedures in Section 8.3.

Grievances shall be processed by a Union Steward, the Union on behalf of an employee or on behalf of a group of employees or itself setting forth name(s) or group(s) of the employee(s). The Grievant or one Grievant representing a group of Grievants may be present at any step of the grievance procedure, and the employee is entitled to Union representation at each and every step of the grievance procedure. The resolution of a grievance filed on behalf of a group of employees shall be made applicable to the appropriate employees within that group.

SECTION 9.3 GRIEVANCE STEPS

STEP ONE: MANAGER

The Union may submit a written grievance to the employee's Manager, within ten (10) business days of the event giving rise to the grievance or the Union's reasonable knowledge of the events giving rise to the grievance. The grievance shall contain the name of grievant, a complete statement of the facts, and the provision or provisions of this Agreement which are alleged to have been violated, and the relief requested. The Manager or his/her designee shall schedule a conference within five (5) business days of receipt of the grievance to attempt to adjust the matter. The Manager, or designee shall submit a written response within ten (10) business days of the receipt of the grievance, unless otherwise agreed to by the parties.

STEP TWO: DEPARTMENT DIRECTOR

If the grievance remains unsettled at step one, the Union may advance the written grievance to the Director of Department that the member works for within ten (10) business days of the response in step one or when such response was due. The Department Director or his/her designee shall schedule a conference within five (5) business days of receipt of the grievance to attempt to adjust the matter. The Department Director, or designee, shall submit a written response within ten (10) business days of the grievance appeal, unless otherwise agreed to by the parties.

STEP THREE: <u>DIRECTOR of HUMAN RESOURCES</u>

If the grievance remains unsettled at step two, the Union may advance the written grievance to the Director of Human Resources within ten (10) business days of the response in step two or when such response was due. The Director of Human Resources

Officer or his/her designee shall schedule a conference within five (5) business days of receipt of the grievance to attempt to adjust the matter. The Director of Human Resources or designee shall submit a written response within five (5) business days of the grievance appeal, unless otherwise agreed to by the parties.

Pre-Arbitration Meeting:

If the grievance is not resolved at Step 3, either party may request a prearbitration meeting to be held with one of the County Board Office's Administrative Chiefs and the Union representative within ten (10) working days following the receipt of the Director of Human Resources written answer. This meeting shall constitute further attempts at resolving the issue prior to involving an arbitrator. The Administrative Chief will present the Union representative with a written response as to the outcome of the pre-arbitration meeting within ten (10) working days following the meeting.

STEP FOUR: <u>ARBITRATION</u>

If the grievance remains unsettled after the response in step three or the Pre-Arbitration meeting, if scheduled, the Union may refer the grievance to arbitration within ten (10) working days of the receipt of the County's written answer as provided to the Union at Step 3 or at which time the written response to Step 3 was due, or after the Pre-Arbitration if scheduled or when the Pre-Arbitration answer was due. Such an appeal shall be made in writing to the Director of Human Resources.

The Union and the Director of Human Resources shall attempt to agree upon an arbitrator within five (5) working days after receipt of the notice of referral. In the event the parties are unable to agree upon the arbitrator within said five (5) working days, the parties shall jointly request the Federal Mediation and Conciliation Service to submit a panel of five (5) arbitrators. The parties shall alternatively strike the name of an arbitrator, with the party requesting arbitration making the first strike. The person whose name remains shall be the arbitrator, provided that either party, before striking any names, shall have the right to reject one (1) panel of arbitrators.

Both parties agree to attempt to arrive at a joint stipulation of the facts and issues as outlined to be submitted to the Arbitrator. Both parties shall have the right to request the Arbitrator to require the presence of witnesses and/or documents. Each party shall bear the costs of its own witnesses.

Questions of arbitrability shall be decided by the Arbitrator. The Arbitrator shall make a preliminary determination on the question of arbitrability. If it is determined that the matter is arbitrable, the Arbitrator shall then proceed to determine the merits of the dispute. If either party objects, another panel will be requested, and another arbitrator selected. The fees and expenses of the arbitrator and the cost of a written transcript, if any, shall be divided equally between the County and the Union; provided, however, that each party shall be responsible for compensating its own representatives and witnesses.

Nothing in this Article shall preclude the parties from agreeing to the appointment of a permanent Arbitrator(s) during the term of this Agreement or from agreeing that more than one grievance may be submitted to the same arbitrator where both parties mutually agree in writing.

The Arbitrator shall endeavor to_render his/her decision in writing to the parties within thirty (30) calendar days following the close of the arbitration hearing or the submission date of briefs, whichever is later. The Arbitrator shall support his/her findings with a written opinion. The decision and opinion shall be based solely on and directed to the issue presented.

The decision and award of the arbitration shall be final and binding to the Union, employee(s) and Employer. Such decision shall be within the scope and terms of this Agreement but shall not change any of its terms or conditions.

SECTION 9.4 LIMITATION ON AUTHORITY OF ARBITRATOR

The arbitrator shall have no right or authority to amend, modify, ignore, add to, or subtract from the provisions of this Agreement. The arbitrator shall consider and decide only the question of fact as to whether there has been a violation, misinterpretation or misapplication of the specific provisions of this Agreement. The arbitrator shall only be empowered to determine the issue raised by the grievance as initially presented in writing and shall have no authority to make a decision on any issue not so submitted or raised. The arbitrator shall be without power to make any decision or award, which is contrary to or inconsistent with, in any way, applicable laws, or of rules and regulations of administrative bodies that have the force and effect of law. The arbitrator shall not in any way limit or interfere with the powers, duties and responsibilities of the County which are under law, granted to the County by law, court decisions, or the provisions of this Agreement.

Any decision and award of the arbitrator shall be final and binding on the County, the Union, and the employee(s) involved, unless reversed on appeal in accordance with the provisions of the Uniform Arbitration Act and the Illinois Labor Relations Act.

SECTION 9.5 TIME LIMIT FOR FILING

The Parties agree that the time limits set forth in this section are of the essence. No grievance shall be entertained or processed unless it is submitted at Step 1 within ten (10) working days, if the Union does not reasonably have knowledge of the events giving rise to the grievance within ten (10) days. If a grievance is not presented by the Union within the time limits set forth above, it shall be considered "waived" and may not be pursued further. If a grievance is not appealed to the next step within the specified time limit or any agreed extension thereof, it shall be considered settled on the basis of the County's last answer. If the County does not answer a grievance or an appeal thereof within the specified time limits, the aggrieved employee may elect to treat the grievance as denied at the step and immediately appeal the grievance to the next step. The parties may by mutual agreement in writing extend any of the time limits set forth in this Article.

No member of the bargaining unit shall have any authority to respond to a grievance being processed in accordance with the grievance procedure set forth in this article. Moreover, no action, statement, agreement, settlement or representation made by any member of the bargaining unit shall impose any obligation or duty or be considered to be authorized by or binding upon the County unless and until the County has agreed thereto in writing.

SECTION 9.6 GRIEVANCE FORMS

The written grievance required under this Article shall be on a form which shall be provided by the Union. It shall contain a statement of the Grievant's complaint, the section(s) of this Agreement that have been allegedly violated, the date of the alleged violations and the relief being sought. The form shall be signed and dated by the Grievant and/or his/her representative. An improper date, section citation or other procedural error shall not be grounds for denial of the grievance.

SECTION 9.7 SETTLEMENTS AND TIME LIMITS

Any grievance not appealed to the next succeeding step in writing and within the appropriate number of work days of the Employer's last answer will be considered settled on the basis of the employer's last answer and shall not be eligible for further appeal, except that the parties may, in any individual case (except discharge cases), extend this limit by unilateral written notice.

SECTION 9.8 UNION STEWARDS

Two (2) duly authorized bargaining unit representatives shall be designated by the Union as the Union Stewards. Two (2) duly authorized bargaining unit representatives shall be designated by the Union in each department as the Alternate Steward. The Alternate Stewards shall only act in the place of the Union Stewards when the Union Steward is absent. The Union will provide written notice to the Employer to identify all Stewards.

ARTICLE 10 HOLIDAYS

SECTION 10.1 GENERAL INFORMATION

Holidays are:

New Year's Day Christmas Day Thanksgiving Day President's Day Columbus Day Veterans Day Martin Luther King Day Memorial Day Independence Day Labor Day Day after Thanksgiving Juneteenth

If the Employer declares any additional dates as observed holidays, such date(s) shall be considered holiday(s) for all bargaining unit employees. If the employer declares any reduced dates as observed holidays, such dates shall be reduced holidays for all bargaining unit employees.

SECTION 10.2 SPECIFIC APPLICATIONS

When a holiday falls on a Saturday, it will be observed on the preceding Friday. When a holiday falls on a Sunday, it will be observed on the following Monday.

SECTION 10.3 HOLIDAY PAY

All employees shall receive eight (8) hours pay for each holiday. Employees who perform work on a holiday shall additionally be compensated at time and one half (1½) their regular rate of pay for the first eight (8) hours of time actually worked on such holiday, with a guaranteed minimum of two and one half (2.5) hours should an employee be called out on a holiday; except that any employee that is called out to work on an emergency basis on Thanksgiving Day, Christmas Day, New Year's Day or Independence Day shall be compensated at double their regular rate of pay for all hours worked on the actual holiday. The employee will be paid double time for all hours worked above the eight (8) hours of work on the holiday.

Eligibility Requirements: To be eligible for holiday pay, an employee must work in the week in which the holiday falls and must work his/her full scheduled workday immediately preceding and following the holiday unless with the prior approved time off request by the Manager or designee. Exceptions for medical or other emergencies may be granted at the Manager or designee's discretion. A doctor's note or other proof of emergency may be required.

SECTION 10.4 PERSONAL DAYS

As part of this bargaining process, the County and the Union have agreed to waive the paid leave for all workers act in favor of the Personal Days Policy as described below.

- (A) Except in the case of initial hiring, eligible employees shall be awarded five (5) personal days per year. The personal days may be taken at any time during the calendar year. Employees must give a minimum of twenty-four (24) hours advance notice for approval of time off to the Department Head or Supervisor, where practicable.
- (B) During the first calendar year of employment the employee shall be awarded personal days on a pro-rated basis after passing the six-month probationary period. The following schedule shall apply:

Probationary Period Ends	Eligible For
January – February	5 Days
March- April	4 Days
May – June	3 Days
July - August	2 Days
September - October	1 Day
November - December	0 Days

(C) An employee who separates employment with the County will not receive payment for unused Personal Days. Personal Days may not be carried over to the next year.

- (D) Personal Days may be used in a minimum of one quarter (1/4) hour increments.
- (E) Eligible part-time employees will receive personal days at a proportional rate, based on the number of hours they are regularly scheduled to work.

SECTION 10.5 AUTHORIZED CLOSINGS

On the days when the County Board declares an emergency and allows employees to go home early with pay, or stay at home with pay, bargaining unit employees who are not given the time off shall be granted compensatory time at straight time for all hours actually worked during their shift.

ARTICLE 11 VACATIONS

SECTION 11.1 VACATION

All employees shall be eligible for a paid vacation time after completion of six (6) months of consecutive service in the bargaining unit in accordance with the following schedule.

YEARS OF CONTINUOUS SERVICE	VACATION DAYS PAID ANNUALLY	HOURS PER WORK WEEK	ACCRUED HOURS PER MONTH
0 through the completion of the fourth (4) year	10 Days	40.0 Hours	6.67 Hours
Beginning of the fifth (5) year through the completion of the Ninth (9) year	15 Days	40.0 Hours	10.00 Hours
Beginning of tenth (10) year through completion of the Nineteenth (19) year	20 Days	40.0 Hours	13.33 Hours
The beginning of the twentieth (20) year or more	25 Days	40.0 Hours	16.67 Hours

If the DuPage County Board adopts a policy allowing more than 25 vacation days annually to its non-union employees, then Local 150 DuPage County employees shall receive the additional vacation days under the terms established by the county for the non-union employees, such as required years of service.

SECTION 11.2 VACATION USAGE

(A) Vacation will be accrued on a monthly basis but calculated and credited in advance for each calendar year in January for all bargaining unit employees. Should an employee's employment be terminated (voluntarily or involuntarily) prior to December 31 of any given year and the employee has used all of his or her vacation time in advance of it actually accruing on the monthly basis, the employee will be responsible for reimbursing the County for all time used, but unearned. The reimbursement for all vacation time used but unearned will be deducted from the final pay check that is to be issued to the

- employee.
- (B) Upon separation, vacation paid after the last day worked shall not be used to extend an employee's length of service.
- (C) Vacation time shall not accrue during an unpaid leave of absence.
- (D) Employees who have been rehired shall accrue vacation time as of their rehire date, unless the employee is separated for less than thirty (30) days or as a result of layoff. In that case, if the separation is less than thirty (30) days or as a result of a layoff, the accrual shall continue from the original date of hire.
- (E) Vacation may be used in increments of four (4) hours or more. Vacation requests to take vacation in less than four-hour increments will be considered by management on a case-by-case basis and may not require twenty-four-hour advance notice. Employees seeking to take vacation in duration of one (1) week or more shall provide the Employer with a minimum of one (1) week prior notice. Employees seeking to take vacation in duration of less than one (1) week shall provide a minimum of twenty-four hours advance notice. All vacations must be approved by the Manager, such approval not to be unreasonably withheld. Vacation is to be scheduled in such a way that temporary help is not required and overtime payments are not needed.
- (F) Employees may carry over up to ten (10) days of vacation from one year to the next, not to exceed ten (10) days, according to their normally scheduled bi-weekly hours. Any unused vacation time above the ten (10) day carryover maximum allowed, will be forfeited at the beginning of the following calendar year.
- (G) Once an employee has completed five (5) years of continuous service, they may elect to receive monetary payment for up to five (5) days or 40 hours of their earned vacation accrual at full value, in full day increments. Upon completion of fifteen (15) years of continuous service, an employee may elect to receive monetary payment for up to ten (10) days or 80 hours of their earned vacation accrual at full value, in full day increments.
- (H) If an eligible employee elects to sell vacation time, the "pay date" determines the calendar year. For example, if an employee is requesting a payment at the end of the year, (December), the "pay date" is the following calendar year (January). An employee will not receive this payment if the vacation time is unearned.
- (I) Vacation pay shall be paid at the rate of the employee's regular straight-time hourly rate of pay in effect for the employee's regular job classification on the pay date immediately preceding the employee's vacation.

SECTION 11.3 ACCUMULATED VACATION AT SEPARATION

- (A) For an employee that has completed one (1) year or more of service, upon separation or layoff the employee will receive monetary compensation for any accrued, unused vacation time.
- (B) Upon separation, employees will receive monetary compensation for all earned vacation time which consists of the number of vacation days currently accrued based on the employee's years of service and a maximum of 10 days of banked vacation time. According to the policy, this amount shall not exceed a maximum of 35 days. Employees will receive any earned vacation payout on their last paycheck.
- (C) In the event of the employee's death, compensation for all unused vacation allowances shall be paid to his/her beneficiary.

(D) Upon separation, an employee shall be paid for all unused, accrued vacation time based on the employee's current rate of pay.

ARTICLE 12 SICK LEAVE

SECTION 12.1 SICK LEAVE

All full-time employees covered by this Bargaining Agreement, who have completed one (1) month of continuous service in the bargaining unit, shall be entitled to sick leave. Sick leave will be calculated at 1/10 of the normally scheduled bi-weekly work hours. All employees covered in the bargaining unit will accrue (8) sick days annually. Sick time credits will accrue at a rate of 5.33 hours monthly.

A doctor's note may be required of an employee who is out for three (3) or more days, at the discretion of the Department Head. If a Department Head does not consider the evidence submitted as adequate for the use of sick time, additional documentation may be required. If this additional documentation is not supplied, the request for sick time shall be denied and the time shall be coded as without pay. The time without pay may include a preceding or following designated holiday or vacation. Any employee determined by the Department Head or Supervisor to be abusing sick time shall be subject to disciplinary action, up to and including termination.

Sick time hours accrued and banked, may be used during the course of employment for the employee's own health condition or to care for an immediate family member who requires the employee's care or other reasons stated within the Policy handbook.

Upon ratification, all sick time hours accrued, unused, and banked will be frozen for purposes of eligibility for monetary compensation. The accrued sick time will continue to be eligible for pay based on years of service at time of separations, as outlined in this Agreement.

Employees who have been rehired shall accrue sick time as of their rehire date, unless the employee is separated for less than thirty (30) days as a result of layoff or employer-initiated separation. In that case, if the separation is less than thirty (30) days, the accrual shall continue from the original date of hire.

Sick time earned after ratification of this Agreement, may be accrued up to a maximum of 120 days. This bank will be maintained separately from sick time banked prior to ratification. This bank may be used to obtain service credit to the full extent allowed by the Illinois Municipal Retirement Fund.

Employees hired prior to November 1, 2005:

- A. Once an employee accrues thirty (30) days of sick time, they have the option to receive monetary compensation for up to five (5) days of sick time, one time per calendar year, at the payout percentage based on their length of service as indicated in the Payout Table below.
- B. Upon separation or layoff, the employee has the option to either: receive monetary compensation for accrued, unused sick time, based on the Sick Time Payout Table below; or to obtain service credit to the full extent allowed by Illinois law and IMRF policies, if any.

Years of Completed Continuous Service	Monetary Compensation Percentage Rate
5 through 7 years	50%
8 through 10 years	67%
11 through 15 years	75%
16 years or greater	100%

For employees hired after November 1, 2005: For an employee who has completed eight (8) years of service, upon separation or layoff, the employee will have the option to either: receive monetary compensation for accrued, unused sick time at 50% of the value no more than one time per calendar year; or to obtain service credit to the full extent allowed by Illinois law and IMRF policies.

Employees may not request or be paid for any sick time that has not yet been earned.

Payout For Accrued Sick Time

Effective August 13, 2024, employees that have accrued sick time with monetary value may request a payout for a portion, or all, of this accrued sick time benefit without submitting a notice of separation from the County, as follows:

- a. Employees hired up to and including November 1, 2005, are eligible for payment of accrued sick time earned prior to December 1, 2011, at a rate of 100% of their current payrate.
- b. Employees hired after November 1, 2005, are eligible for payment of accrued sick time earned prior to December 1, 2011, at a rate of 50% of their current payrate.
- c. A Request for Payment of Accrued Sick Leave PRE-FY12 Sick Bank form must be completed and submitted to receive this payout.
- d. A request for payment of accrued sick leave may be made up to four (4) times per year and will be processed on the last pay period of each quarter of the calendar year (last pay period of March, June, September and December).

SECTION 12.2 SICK TIME PROCEDURES

Sick leave may be granted in minimum one quarter (1/4) hour blocks for any of the reasons listed below-and sick leave can only be used for an approved absence that falls under the following guidelines:

- Illness or injury of employee or employee's dependent or family,
- Emergency medical or dental care.
- Exposure to contagious disease and possible endangering of others by attendance on duty.
- Preventative care.

Employees shall notify the Supervisor or his designee of his/her intent to use sick time prior to the employee's start time. Notice to the Supervisor or his designee should continue at the beginning of each work shift for which the employee is unable to report to work, unless otherwise directed by the Employer.

Sick leave shall not accrue during any unpaid leave of absence.

SECTION 12.3 DONATED SICK TIME

A.) **Donating Sick Time.** A bargaining unit member may donate accrued and unused sick time to any other Local 150 bargaining unit member who has been approved to receive donated sick time as long as the donating bargaining unit member retains a sick leave balance of at least 40 hours after deduction of the hours offered for donation.

B.) Use of Donated Sick Time

- a. A bargaining unit member receiving donated sick time shall be paid at their regular rate regardless of the rate of pay of the employee donating such leave.
- b. Sick time shall be deducted from donating bargaining unit members in the order donated and shall be credited to the receiving bargaining unit member's account on pay day up to the amount necessary for the bargaining unit member to be paid their regular two weeks' pay. No sick time shall accumulate in the account of a receiving employee or be converted to cash or compensatory time. Any sick time donated by a bargaining unit member that is not used shall remain in the account of the donating bargaining unit member.
- c. A bargaining unit member using donated sick time shall be in active pay status and shall accrue sick time and be entitled to any other benefits they would normally receive. All sick time or other paid leave provided to, or accrued by, a bargaining unit member while using donated sick time shall be used in the following pay period first before donated sick time is used.
- d. A bargaining unit member approved to receive donated sick leave shall be eligible to receive such leave until the bargaining unit member:
 - i. Returns to full duty; or
 - ii. Exhausts all donated leave; or
 - iii. Has been on donated sick leave for a total of six months.

Bargaining unit members absent from work and receiving donated sick leave may not work, perform services, receive, or earn compensation for or from any other entity, including the bargaining unit member's own business, from the beginning of such absence until the employee returns to work.

C.) Donated Sick Leave

- a. A bargaining unit member requesting the use of donated sick time must submit a Request to Receive Donated Sick Time Form, to the Human Resources Department along with a written certification from a health care provider of the employee's serious health condition, on a Health Certification Form, and an estimated date of the bargaining unit member's return to full duty, must be attached to the request.
- b. Upon approval of a request for donated sick time, Human resources shall complete a Notice to Donate Sick Time and forward copies to each bargaining unit members.

- c. Bargaining unit members wishing to donate sick time to a fellow bargaining unit member eligible for donation shall complete their portion of the Notice to Donate Sick Time, sign and date it (including the time of signature) and return it to Human resources.
- d. Human Resources shall confirm the bargaining unit members wishing to donate sick time have sufficient balance to do so and shall allocate sick time pursuant to this Article.

ARTICLE 13 LEAVES OF ABSENCE

SECTION 13.1 PERSONAL LEAVE OF ABSENCE

All employees covered by this Bargaining Agreement shall receive Personal Leave equivalent to the provisions adopted within the DuPage County Board Employee Policies and Guidelines, and all applicable County Board Resolutions through the length of the contract. (See Appendix D)

SECTION 13.2 BEREAVEMENT/FUNERAL LEAVE

All employees covered by this Bargaining Agreement shall receive Bereavement/Funeral Time equivalent to the provisions adopted within the DuPage County Board Employee Policies and Guidelines, and all applicable County Board Resolutions through the length of the contract. (See Appendix E)

SECTION 13.3 FAMILY AND MEDICAL LEAVE (FMLA)

The Employer will comply with all Federal and State laws in granting Family Medical Leave, and may take any actions not inconsistent with such laws or the terms of this Agreement. (See Appendix F)

SECTION 13.4 JURY DUTY LEAVE

Any employee who is subpoenaed as a result of his regular job duties, or otherwise required to serve on a jury (except if the employee is a party to a non-work-related litigation) shall be excused from work without loss of regular straight-time pay for the days or portions thereof on which the employee must be present for such service and on which the employee would have otherwise been scheduled to work. The employee shall submit documentation evidencing that he/she appeared and served as a juror and shall remit any witness fee in order to receive pay for such jury service. The employee may retain any money received to cover travel, meal, and /or lodging expenses. (See Appendix G)

SECTION 13.5 MILITARY LEAVE

Employer agrees to comply with all applicable Federal and State laws relative to Military service of employees. (See Appendix H)

SECTION 13.7 PARENTAL TIME

All employees covered by this Bargaining Agreement shall receive Parental Time equivalent to the provisions adopted within the DuPage County Board Employee Policies and Guidelines, and all applicable County Board Resolutions through the length of the contract. (See Appendix I)

ARTICLE 14 HEALTH INSURANCE

All employees covered by this Bargaining Agreement shall continue to be eligible to receive the same health, life, dental and other insurance benefits at the same employee/dependent premium cost(s) as a majority of all other DuPage County employees. In no event will Bargaining Unit employees pay more in premiums or copays, or receive less health, life, or dental benefits than a majority of all other DuPage County employees.

ARTICLE 15 EMPLOYEE TRAINING AND EDUCATION

SECTION 15.1 TRAVEL/BUSINESS REIMBURSEMENT

All employees covered by this Agreement shall receive Travel/Business Reimbursement equivalent to the provisions and guidelines attached as Appendix **B**. Should the Federal or State law(s) change with regard to the travel, business, or mileage reimbursement, which subsequently cause a change in the Employer's policy, such change will be provided to the Union within five (5) days of the new policy going into effect and shall be incorporated herein upon adoption of the policy by the DuPage County Board and shall supersede any old policies that may already be incorporated or included herein.

Employees who attend training may mutually agree with his/her supervisor to have the start and end of the work day adjusted.

Non-Mandatory training is considered a benefit to the employee and no overtime compensation will be provided for the purposes of attending such training opportunities.

SECTION 15.2 TUITION REIMBURSEMENT

The employees covered by this agreement shall receive tuition reimbursement benefits in accordance with the Tuition Reimbursement Policy from the County's Personnel Manual. (See Appendix J)

SECTION 15.3 ADOPTION ASSISTANCE

The employees covered by this agreement shall receive adoption assistance in accordance with the Adoption Assistance Policy from the County's Personnel Manual. (See Appendix K)

ARTICLE 16 SAFETY

SECTION 16.1 UNSAFE CONDITIONS

Employees who reasonably and justifiably believe that their safety and health are in danger due to an alleged unsafe working condition, equipment, or vehicle, shall immediately inform their supervisor who shall have the responsibility to determine what action, if any, should be taken, including whether or not the job assignment should be discontinued.

ARTICLE 17 LABOR-MANAGEMENT MEETINGS

SECTION 17.1 LABOR-MANAGEMENT CONFERENCES

The Union and the Employer mutually agree that in the interest of efficient management and harmonious employee relations, meetings shall be held between Union and Employer representatives when appropriate. Such meetings shall be scheduled within one week of either party submitting an agenda to the other, or at a time mutually agreed upon by the parties, and shall be limited to:

- (A) Discussion of the implementation and general administration of this Agreement;
- (B) A sharing of general information of interest to the parties;
- (C) The identification of possible health and safety concerns.

A Union representative and/or Union Steward may attend these meetings. The Employer may assign appropriate management personnel to attend.

SECTION 17.2 PURPOSE

It is expressly understood and agreed that such meetings shall be exclusive of the grievance procedure. Such meeting shall be chaired by the Employer representative and there shall be no loss of wages for attendance by Union Stewards and/or affected bargaining unit employees. Grievances and arbitrations shall not be discussed at such meetings.

ARTICLE 18 UNIFORMS AND EQUIPMENT

SECTION 18.1 UNIFORMS/BOOTS

The Employer shall provide an eight hundred (\$800.00) dollar uniform allowance per year for all bargaining unit employees. The Employer reserves the right to increase this compensation amount for new employees upon their initial hiring. This amount will be provided to employees in the first pay period on or after October 1 of every year.

SECTION 18.2 PROTECTIVE CLOTHING

The Employer shall provide all necessary items of protective clothing and safety gear. In addition, the Employer shall provide up to a three hundred (\$300.00) boot allowance per year for all bargaining unit employees to facilitate the purchase of protective boots. This will be administered in the form of a direct payment to an approved vendor or a reimbursement to the employee after they present a receipt for the protective boots purchased. The reimbursement amount will be the lessor of the amount actually spent or three hundred (\$300). At the discretion of the Deputy Director of Public Works, Deputy Director of Facilities Management, or Director of Stormwater, funding for additional boot replacements may be authorized if it is determined that the safety functions of the boot are at issue.

Bibs & waders shall be considered protective clothing and safety gear and shall be provided for by the County when deemed necessary by the Deputy Director of Public Works, Director of Stormwater or Deputy Director of Facilities Management or designee.

SECTION 18.3 PRESCRIPTION SAFETY GLASSES

Bargaining unit employees who are subject to assignments or situations necessitating protective eyeglasses shall be reimbursed for purchasing prescription safety glasses from an employer approved vendor as follows:

- (A) Reimbursement may be made once every two years.
- (B) The Employer shall reimburse one hundred dollars (\$100) of the cost for one (1) pair of prescriptions safety glasses.

The Employer further agrees to replace glasses should an employee's original pair become damaged/broken on the job.

ARTICLE 19 PERSONNEL RECORDS

SECTION 19.1 PERSONNEL RECORDS

The personnel record is available during regular business hours for an employee and/or his/her designee to review. An employee must make a request to review his or her personnel record in writing and may review their personnel records a maximum of two (2) times per year.

SECTION 19.2 RIGHT OF INSPECTION AND COPIES

An employee will be granted the right to inspect his/her personnel during working time no more than two times per year by written request. An employee may obtain a copy of his/her record upon request to the Director of Human Resources. Copies shall be provided, at no charge to the employee, within two (2) business days.

SECTION 19.3 REMOVAL OF DISCIPLINARY RECORDS

No disciplinary records will be removed from an employee's personnel file. However, the employer agrees that it will not rely on oral or written reprimands for purposes of progressive discipline if the employee has not engaged in the same conduct for a period of eighteen (18) months, unless the conduct is of a nature to expose the County to liability to third parties like harassment or violence.

ARTICLE 20 NO STRIKE / NO LOCKOUT

SECTION 20.1 NO STRIKE

During the stated term of this Agreement, the Union shall not call a strike.

SECTION 20.2 NO LOCKOUT

During the stated term of this Agreement, the Employer shall not lockout any bargaining unit employees.

ARTICLE 21 NON-DISCRIMINATION

SECTION 21.1 PROHIBITION AGAINST DISCRIMINATION

In accordance with all federal, state and local laws regarding Equal Opportunity, which includes the Americans with Disabilities Act, neither the County nor the Union will discriminate against any employee covered by this Agreement with regard to employment, tenure or any other term or condition of employment on the basis of race, color, sex, age, religion, creed, national origin, ancestry, marital status, political belief, veteran status, or sensory, mental or physical disability. Employees are also encouraged to contact the DuPage County Human Resources Department, or their union representative, should they have any concerns regarding potential discriminatory actions. An employee who files a charge with an administrative agency cannot also file a grievance under this Section regarding the same or similar allegations.

SECTION 21.2 UNION ACTIVITY

The Employer and the Union agree that no employee shall be discriminated against, intimidated, restrained or coerced in the exercise of any rights granted by this Agreement, or on account of membership or non-membership in, or lawful activities on behalf of the Union.

ARTICLE 22 WAGES

SECTION 22.1: MINIMUM SALARIES

Effective the second full pay period after ratification, the minimum salary for each bargaining unit position is listed below in Section 5: Wage Schedule. Each employee will be placed at the appropriate step based on their years of service within their job classifications as of December 1st 2025. If any bargaining unit employees are below the minimum salaries listed in Section 5, the salaries of those employees will be adjusted to meet the minimum salary requirements.

Years in Position on December 1 st 2025	Step
099 years	1
1 – 1.99 years	2
2 – 2.99 years	3
3 – 3.99 years	4
4 – 4.99 years	5
5 – 5.99 years	6
6 – 6.99 years	7
Greater than 7 years	7 plus years

SECTION 22.2: STEP INCREMENTS

Bargaining unit employees will progress through the step increments based on their years of service within their job classification as of December 1st each calendar year. Each step increment represents a pay increase of 1.75% for Steps 1 through 7. Employees with over 7 years of service in their respective positions will not receive a step increase. Step increments will occur annually on the first full pay period in December beginning December 2026.

SECTION 22.3: COST OF LIVING ADJUSTMENT

Bargaining unit members with less than 7 years of service as of December 1st of each calendar year shall receive a 2% cost-of-living increase to their existing wage rates. This cost-of-living adjustment will occur during the first full pay period in December. Bargaining unit members with over 7 years of service in their respective positions will receive a 2.75% increase to their existing wage rates. This cost-of-living adjustment will occur annually on the first full pay period in December beginning December 2026.

SECTION 22.4: PROMOTIONS WITHIN BARGAINING UNIT

Employees who are promoted within the bargaining unit will be positioned at Step 1 of the new classification, as outlined in Section 5: Wage Schedule. If Step 1 of the new classification results in a salary increase of less than 5%, the employee will instead be placed at the next highest step in the new classification to ensure a minimum raise of 5%.

SECTION 22.5: WAGE SCHEDULE (Subject to rounding for input into Payroll system)

	Water/Wastewater Maintenance Crew Leader					
	2nd payroll period	First pay period after				
Step	after ratification	12/1/2026	12/1/2027	12/1/2028	12/1/2029	
1	86,700.00	88,434.00	90,203.00	92,007.00	93,847.00	
2	88,217.00	89,981.00	91,781.00	93,617.00	95,489.00	
3	89,761.00	91,556.00	93,387.00	95,255.00	97,160.00	
4	91,332.00	93,159.00	95,022.00	96,922.00	98,860.00	
5	92,930.00	94,789.00	96,685.00	98,619.00	100,591.00	
6	94,556.00	96,447.00	98,376.00	100,344.00	102,351.00	
7	96,211.00	98,135.00	100,098.00	102,100.00	104,142.00	
	Employees with greater than 7 years in position					
7+	2.75%	2.75%	2.75%	2.75%	2.75%	

		Lead Heavy Equipmer	nt Mechanic		
	2nd payroll period	First pay period after	First pay period after	First pay period after	First pay period after
Step	after ratification	12/1/2026	12/1/2027	12/1/2028	12/1/2029
1	86,700.00	88,434.00	90,203.00	92,007.00	93,847.00
2	88,217.00	89,981.00	91,781.00	93,617.00	95,489.00
3	89,761.00	91,556.00	93,387.00	95,255.00	97,160.00
4	91,332.00	93,159.00	95,022.00	96,922.00	98,860.00
5	92,930.00	94,789.00	96,685.00	98,619.00	100,591.00
6	94,556.00	96,447.00	98,376.00	100,344.00	102,351.00
7	96,211.00	98,135.00	100,098.00	102,100.00	104,142.00
	Employees with great	ter than 7 years in posit	ion		
7+	2.75%	2.75%	2.75%	2.75%	2.75%

	Senior Water/Wastewater Maintenance Worker				
	2nd payroll period	First pay period after			
Step	after ratification	12/1/2026	12/1/2027	12/1/2028	12/1/2029
1	74,970.00	76,469.00	77,998.00	79,558.00	81,149.00
2	76,282.00	77,808.00	79,364.00	80,951.00	82,570.00
3	77,617.00	79,169.00	80,752.00	82,367.00	84,014.00
4	78,975.00	80,555.00	82,166.00	83,809.00	85,485.00
5	80,357.00	81,964.00	83,603.00	85,275.00	86,981.00
6	81,763.00	83,398.00	85,066.00	86,767.00	88,502.00
7	83,194.00	84,858.00	86,555.00	88,286.00	90,052.00
	Employees with greater than 7 years in position				
7+	2.75%	2.75%	2.75%	2.75%	2.75%

		Utility Inspector			
	2nd payroll period	First pay period after	First pay period after	First pay period after	First pay period after
Step	after ratification	12/1/2026	12/1/2027	12/1/2028	12/1/2029
1	74,970.00	76,469.00	77,998.00	79,558.00	81,149.00
2	76,282.00	77,808.00	79,364.00	80,951.00	82,570.00
3	77,617.00	79,169.00	80,752.00	82,367.00	84,014.00
4	78,975.00	80,555.00	82,166.00	83,809.00	85,485.00
5	80,357.00	81,964.00	83,603.00	85,275.00	86,981.00
6	81,763.00	83,398.00	85,066.00	86,767.00	88,502.00
7	83,194.00	84,858.00	86,555.00	88,286.00	90,052.00
	Employees with great	er than 7 years in posit	ion		
7+	2.75%	2.75%	2.75%	2.75%	2.75%

		Equipment Operator I	I		
	2nd payroll period	First pay period after	First pay period after	First pay period after	First pay period after
Step	after ratification	12/1/2026	12/1/2027	12/1/2028	12/1/2029
1	74,970.00	76,469.00	77,998.00	79,558.00	81,149.00
2	76,282.00	77,808.00	79,364.00	80,951.00	82,570.00
3	77,617.00	79,169.00	80,752.00	82,367.00	84,014.00
4	78,975.00	80,555.00	82,166.00	83,809.00	85,485.00
5	80,357.00	81,964.00	83,603.00	85,275.00	86,981.00
6	81,763.00	83,398.00	85,066.00	86,767.00	88,502.00
7	83,194.00	84,858.00	86,555.00	88,286.00	90,052.00
	Employees with great	er than 7 years in posit	ion		
7+	2.75%	2.75%	2.75%	2.75%	2.75%

	Water/Wastewater Maintenance Worker				
	2nd payroll period	First pay period after	First pay period after	First pay period after	First pay period after
Step	after ratification	12/1/2026	12/1/2027	12/1/2028	12/1/2029
1	64,770.00	66,065.00	67,386.00	68,734.00	70,109.00
2	65,903.00	67,221.00	68,565.00	69,936.00	71,335.00
3	67,056.00	68,397.00	69,765.00	71,160.00	72,583.00
4	68,229.00	69,594.00	70,986.00	72,406.00	73,854.00
5	69,423.00	70,811.00	72,227.00	73,672.00	75,145.00
6	70,638.00	72,051.00	73,492.00	74,962.00	76,461.00
7	71,874.00	73,311.00	74,777.00	76,273.00	77,798.00
	Employees with great	er than 7 years in posit	ion		
7+	2.75%	2.75%	2.75%	2.75%	2.75%

		Principal Meter Reade	r		
	2nd payroll period	First pay period after	First pay period after	First pay period after	First pay period after
Step	after ratification	12/1/2026	12/1/2027	12/1/2028	12/1/2029
1	67,320.00	68,666.00	70,039.00	71,440.00	72,869.00
2	68,498.00	69,868.00	71,265.00	72,690.00	74,144.00
3	69,697.00	71,091.00	72,513.00	73,963.00	75,442.00
4	70,917.00	72,335.00	73,782.00	75,258.00	76,763.00
5	72,158.00	73,601.00	75,073.00	76,574.00	78,105.00
6	73,421.00	74,889.00	76,387.00	77,915.00	79,473.00
7	74,706.00	76,200.00	77,724.00	79,278.00	80,864.00
	Employees with great	er than 7 years in posit	ion		
7+	2.75%	2.75%	2.75%	2.75%	2.75%

		Senior Meter Reader			
	2nd payroll period	First pay period after	First pay period after	First pay period after	First pay period after
Step	after ratification	12/1/2026	12/1/2027	12/1/2028	12/1/2029
1	56,100.00	57,222.00	58,366.00	59,533.00	60,724.00
2	57,082.00	58,224.00	59,388.00	60,576.00	61,788.00
3	58,081.00	59,243.00	60,428.00	61,637.00	62,870.00
4	59,097.00	60,279.00	61,485.00	62,715.00	63,969.00
5	60,131.00	61,334.00	62,561.00	63,812.00	65,088.00
6	61,183.00	62,407.00	63,655.00	64,928.00	66,227.00
7	62,254.00	63,499.00	64,769.00	66,064.00	67,385.00
	Employees with great	er than 7 years in posit	ion		
7+	2.75%	2.75%	2.75%	2.75%	2.75%

		Laborer			
	2nd payroll period	First pay period after	First pay period after	First pay period after	First pay period after
Step	after ratification	12/1/2026	12/1/2027	12/1/2028	12/1/2029
1	51,000.00	52,020.00	53,060.00	54,121.00	55,203.00
2	51,893.00	52,931.00	53,990.00	55,070.00	56,171.00
3	52,801.00	53,857.00	54,934.00	56,033.00	57,154.00
4	53,725.00	54,800.00	55,896.00	57,014.00	58,154.00
5	54,665.00	55,758.00	56,873.00	58,010.00	59,170.00
6	55,622.00	56,734.00	57,869.00	59,026.00	60,207.00
7	56,595.00	57,727.00	58,882.00	60,060.00	61,261.00
	Employees with great	er than 7 years in posit	ion		
7+	2.75%	2.75%	2.75%	2.75%	2.75%

		Grounds Maintenance	e Worker		
	2nd payroll period	First pay period after	First pay period after	First pay period after	First pay period after
Step	after ratification	12/1/2026	12/1/2027	12/1/2028	12/1/2029
1	51,000.00	52,020.00	53,060.00	54,121.00	55,203.00
2	51,893.00	52,931.00	53,990.00	55,070.00	56,171.00
3	52,801.00	53,857.00	54,934.00	56,033.00	57,154.00
4	53,725.00	54,800.00	55,896.00	57,014.00	58,154.00
5	54,665.00	55,758.00	56,873.00	58,010.00	59,170.00
6	55,622.00	56,734.00	57,869.00	59,026.00	60,207.00
7	56,595.00	57,727.00	58,882.00	60,060.00	61,261.00
	Employees with great	er than 7 years in posit	ion		
7+	2.75%	2.75%	2.75%	2.75%	2.75%

Senior Grounds Maintenance Worker								
	2nd payroll period	First pay period after						
Step	after ratification	12/1/2026	12/1/2027	12/1/2028	12/1/2029			
1	61,000.00	62,220.00	63,464.00	64,733.00	66,028.00			
2	62,068.00	63,309.00	64,575.00	65,867.00	67,184.00			
3	63,154.00	64,417.00	65,705.00	67,019.00	68,359.00			
4	64,259.00	65,544.00	66,855.00	68,192.00	69,556.00			
5	65,384.00	66,692.00	68,026.00	69,387.00	70,775.00			
6	66,528.00	67,859.00	69,216.00	70,600.00	72,012.00			
7	67,692.00	69,046.00	70,427.00	71,836.00	73,273.00			
Employees with greater than 7 years in position								
7+	2.75%	2.75%	2.75%	2.75%	2.75%			

	Grounds Crew Leader								
	2nd payroll period	First pay period after							
Step	after ratification	12/1/2026	12/1/2027	12/1/2028	12/1/2029				
1	82,365.00	84,012.00	85,692.00	87,406.00	89,154.00				
2	83,806.00	85,482.00	87,192.00	88,936.00	90,715.00				
3	85,273.00	86,978.00	88,718.00	90,492.00	92,302.00				
4	86,765.00	88,500.00	90,270.00	92,075.00	93,917.00				
5	88,283.00	90,049.00	91,850.00	93,687.00	95,561.00				
6	89,828.00	91,625.00	93,458.00	95,327.00	97,234.00				
7	91,400.00	93,228.00	95,093.00	96,995.00	98,935.00				
	Employees with greater than 7 years in position								
7+	2.75%	2.75%	2.75%	2.75%	2.75%				

Upon ratification of this contract, all Facilities Management Grounds Group Members, and any member with 25 years of service represented by this Contract, shall receive a one-time payment of two thousand (\$2,000) dollars. This payment will not increase the salary of members but will be solely a one-time payment. This payment will be reflected on the second full pay period following ratification.

SECTION 22.6 EMPLOYEE RETENTION

All employees who are eligible for retention benefits covered by this Bargaining Agreement shall receive Retention payouts pursuant to the provisions adopted within the DuPage County Board Employee Policies and Guidelines, and all applicable County Board Resolutions through the length of the contract. (See Appendix L)

SECTION 22.7 RECLASSIFICATION OF SENIOR MAINTENANCE WORKER

Upon ratification a current Senior Maintenance Worker in Underground shall be reclassified to a Utility Inspector, which will open a Senior Maintenance Worker position. The position will be posted through the standard DuPage County Human Resources hiring process and will only be available to current employees

SECTION 22.8 RECLASSIFICATION OF GROUNDS LABORER

Upon ratification the current Grounds Laborer positions will be reclassified to Grounds Maintenance Worker. The Grounds Laborer position will be eliminated.

SECTION 22.9 RECLASSIFICATION OF METER READER INSTALLER

Upon ratification the current Meter Reader Installer position will be reclassified to Laborer. The Meter Reader Installer position will be eliminated.

ARTICLE 23 DRUG AND ALCOHOL POLICY

SECTION 23.1 DRUG AND ALCOHOL POLICY

The drug and alcohol policy, in effect for all bargaining unit employees required to have a Commercial Driver's License, is set forth in Appendix C, attached hereto and made a part hereof.

SECTION 23.2 FITNESS FOR DUTY

DuPage County is committed to providing a safe working environment and to protecting the health and safety of all employees. If an employee lacks the essential physical and mental requirements necessary to perform the essential functions of the job, or poses a significant risk to their own safety, safety of co-workers or the safety of the public, they may be referred for a fitness for duty evaluation. (See Appendix M)

ELIGIBILITY

All employees under County Board Jurisdiction regardless of employment status.

GUIDELINES

- A. Employees are responsible for managing their health in such a way that they can safely perform the essential functions of their job, with or without a reasonable accommodation.
- B. Employees must come to work fit for duty and must perform their job in a safe, secure, productive and effective manner during the entire time they are working.
- C. Employees are responsible for notifying their supervisor if they are not fit for duty.
- D. Employees are responsible for notifying their Supervisor, Human Resources Representative, Department Head or Director of Human Resources when they observe a co-worker acting in a manner that indicates the co-worker may be unfit for duty.

PROCEDURES

- 1. A fitness for duty assessment may be requested when there is reasonable cause for serious concern about an employee's ability to perform their role and duties safely, when the employee's behavior is grossly inappropriate for the workplace, or if there is reasonable concern for workplace safety.
- 2. An impartial, independent healthcare evaluator with expertise in the disciplines of medical, psychological alcohol, or other drug conditions will conduct a fitness for duty evaluation.
- 3. Referrals for Fitness for Duty assessments will be made by the Department Head and Director of Human Resources.
- 4. Employees will be removed from the workplace while in the process of completing a fitness for duty assessment.
- 5. Employees who cooperate in a fitness for duty evaluation and are in compliance with recommendations for medical, psychological and/or chemical dependence treatment may be returned to work provided appropriate discipline, if warranted, has taken place.
- 6. Non-compliance with a request for a fitness for duty evaluation or a determination that an employee is unfit for duty may result in disciplinary action, not to exclude termination.

ARTICLE 24 FILLING OF VACANCIES

SECTION 24.1 POSTING

Whenever the Employer determines there is a vacancy in an existing job classification or that a new position within the bargaining unit job has been created, a notice of such vacancy shall be posted on all bulletin boards for five (5) working days. During this period, employees who wish to apply for such vacancy, including employees on layoff, may do so.

SECTION 24.2 FILLING OF VACANCIES

The Employer shall determine if there is a vacancy to be filled and at any time before the vacancy is filled, whether or not the vacancy should be filled. When vacancies occur in the bargaining unit, the Employer will give first consideration to the employees in the bargaining unit, unless the non-bargaining unit applicant demonstrates greater skill and ability to fulfill the needs determine by the Employer.

ARTICLE 25 SAVINGS CLAUSE

In the event any Article, section or portion of this Agreement should be held invalid and unenforceable by any board, agency or court of competent jurisdiction or by reason of any subsequently enacted legislation, such decision or legislation shall apply only to the specific Article, section or portion thereof specifically specified in the board, agency or court decision or subsequent litigation, and the remaining parts or portions of this Agreement shall remain in full force and effect. The subject matter of such invalid provision shall be open to immediate renegotiation.

ARTICLE 26 TERMINATION

This Agreement shall be effective as of July 8, 2025 and shall remain in full force and effect until November 30, 2050, whereupon, it shall be automatically rendered null and void. It shall be automatically renewed from year to year thereafter unless either party notifies the other in writing at least ninety (90) days prior to the anniversary date that is desires to modify this Agreement. In the event that such notice is given, negotiations shall begin not later than sixty (60) days prior to the anniversary date.

Unless expressly stated otherwise in this Agreement, no changes or provisions herein shall be applied retroactively.

IN WITNESS WHEREOF, the parties have executed this Agreement this 8th day of July, 2025, at the Wheaton, Illinois.

INTERNATIONAL UNION OF OPERATING ENGINEERS, LOCAL 150,

James M. Sweeney
President/Business Manager
International Union of Operating Engineers, Local 150

Deanna M. Distasio Attorney International Union of Operating Engineers, Local 150

DuPage County

Deborah A. Conroy, Chair

DuPage County Board

Appendix A

Classifications For Layoff Purposes within the Local 150 Public Works Unit

Wastewater/Stormwater Maintenance Group

- 1. Wastewater Maintenance Crew Leader
- 2. Senior Wastewater Maintenance Worker/Equipment Operator II
- 3. Utility Inspector
- 3. Wastewater Maintenance Worker

Mechanic Group

1. Heavy Equipment Mechanic

General Labor Group

- 1. Principal Meter Reader
- 2. Senior Meter Reader
- 3. Laborer

Grounds Group

- 1. Grounds Crew Leader
- 2. Sr. Grounds Maintenance Worker
- 3. Grounds Maintenance Worker

Appendix B

TRAVEL/BUSINESS REIMBURSEMENT REGULATIONS

All employees covered by this Bargaining Agreement shall receive travel/business reimbursement equivalent to the provisions adopted within the DuPage County Board Employee Policies and Guidelines, and all applicable County Board Resolutions through the length of the contract. Any dispute over an alleged violation of this section may be pursued through the appropriate step in the grievance procedure prior to arbitration.

POLICY

Introduction

This policy applies to the payment of business travel expenses by the County of DuPage (hereinafter "County") for members of the County Board, the County Board Chair, all Countywide Elected Officials, and all County employees, and is adopted in compliance with the Local Government Travel Expense Control Act 50 ILCS 150/1 et seq. Certain provisions herein may be superseded by collective bargaining agreements or policies applicable to employees under the jurisdiction of the judicial branch of government.

This policy is to be interpreted to conform with all applicable laws and regulations governing the reimbursement of business travel expenses. IRS Publications in effect at the time of travel shall guide the definition of words used herein as well as the application and interpretation of this policy. Currently, the reference is IRS Publication 463. https://www.irs.gov/publications/p463

Either the County Board or appropriate Parent Committee may authorize business travel expenses that do not conform with this policy, on a case-by-case basis, however in such cases a portion of the payment may need to be reported as taxable wages if required by applicable federal law.

1.0 General provisions

1.1 Business travel refers to travel away from the normal place of daily employment for purposes that are of direct interest or benefit to the purposes and functions of County government. Examples include attendance at conferences or meetings related to the activities of the County or County agency, professional education and development, training related to current or future job duties, attendance at or appearance before other governmental entities to represent County interests, site visits to assist decision making regarding contemplated County transactions and other purposes deemed essential to the function of County government by the Elected Official or Department Head.

- 1.2 All Elected Officials and employees are encouraged to use available forms of technology to minimize the need for in person travel. For example, video conferencing or web-based training should be considered as appropriate.
- 1.3 All Elected Officials and employees are expected to make travel arrangements in an economical manner keeping in mind that travel expenses are paid from public funds.
- 1.4 Payment of travel expenses requires the submission of fully completed Business Travel Expense Reports. These forms will be created in accordance with this policy and will be available on the Inside DuPage intranet.
- 1.5 Section 15 of the Local Government Travel Expense Control Act places additional requirements on the payment of travel expenses for County Board members and the County Board Chair. For these individuals, payment will not be made unless those requirements have been satisfied. See 50 ILCS 150/15
- 1.6 Section 20 of the Local Government Travel Control Expense Act prohibits the payment or reimbursement of entertainment expenses. 50 ILCS 150/20
- 1.7 For purposes of this policy the term "Parent Committee" means the County Board Committee deemed most relevant in relation to the reason for travel and "Parent Committee Chair" means the Chair of that committee.

2.0 Authorization to Incur Travel Expense

- 2.1 This policy distinguishes between overnight travel and non-overnight travel. In general, overnight travel is travel that requires an overnight stay away from home, for example in a hotel. Refer to current IRS Publications for a detailed explanation of differences between overnight travel and non-overnight travel.
- 2.2 Non-overnight travel expenses do not require advance approval of either the Parent Committee or the Parent Committee Chair, regardless of amount, unless 50 ILCS 150/15 is applicable.
- 2.3 Except in cases of bona fide emergencies, all overnight travel requires advance approval as follows:
 - 2.3.1 All overnight travel for County Board members and the County Board Chair must be pre-approved by the County Board consistent with 50 ILCS 150/15.
 - 2.3.2 All overnight travel up to and including \$2,500 per person for employees under County Board jurisdiction requires advance approval by the Parent Committee Chair.

- 2.3.3 All overnight travel expenses greater than \$2,500 per person require advance approval by an affirmative vote of the Parent Committee.
- 2.3.4 Overnight travel that has no financial cost to the County only needs the approval of the Department Head.
- 2.4 In the event the need for travel subject to section 2.4.3 arises when it is not possible to obtain advance Parent Committee approval, then the Parent Committee Chair may give advance approval; however, the Department Head or representative shall appear at the subsequent Parent Committee meeting to explain the circumstances that prevented the matter from being presented to the Parent Committee in sufficient time.
- 2.5 Unless actual travel expenses materially exceed the amounts approved in advance, payment or reimbursement will be made consistent with the policies of the Finance Department and the Auditor's Office. If actual travel expenses materially exceed the amounts approved in advance the claim may be referred to the relevant Parent Committee Chair for subsequent approval, or to the County Board if 50 ILCS 150/15 is applicable.
- 2.6 In the event of a bona fide emergency where no advance approval can be obtained, travel expenses may be paid if the relevant Parent Committee Chair subsequently authorizes the actual amount (if the actual amount is not greater than \$2,500 per person) or if the relevant Parent Committee subsequently authorizes the actual amount (if the actual amount is greater than \$2,500 per person). The itemized travel expenses and an explanation of the emergency shall be included as an Informational Item on the next subsequent meeting of the County Board.
- 2.7 In the event of a bona fide emergency requiring travel by a member of the County Board or the County Board Chair, subsequent approval by the County Board can be made consistent with 50 ILCS 150/15.
- 3.0 Business Travel Expense Reimbursement Forms and Procedures
 - 3.1 Reimbursement will not occur without submission of standard expense reimbursement forms. The use of these forms will allow the County to properly document and account for travel expenditures. Initially, four Business Travel Expense forms will be prepared and made available on the Inside DuPage intranet page. These forms may be changed from time to time.
 - 3.1.1 Employee Overnight Business Travel Request Form (to obtain advance approval)
 - 3.1.2 County Board / Chair Overnight Business Travel Request Form (to obtain advance approval)
 - 3.1.3 Overnight Business Travel, Mileage and Expense Report

3.1.4 Non-Overnight Business Travel, Mileage and Expense Report

- 3.2 All reimbursement requests must be fully completed with all required documentation. The Business Travel Expense Reports forms will include a description of documentation and other conditions required for reimbursement or for direct payment to a vendor.
- 3.3 An approved Overnight Business Travel Request Form must be attached to the Overnight Travel, Mileage and Expense Report when submitted for reimbursement or for direct payment to a vendor.
- 3.4 All requests for employee reimbursement must be provided to the Finance Department or entered in the accounts payable system (currently MHC) *AND* approved within the accounts payable system by the Office or Department not more than sixty (60) days after the first day of travel.

4.0 Transportation Reimbursement

- 4.1 Airfare or other common carrier travel to the destination will be reimbursed at actual cost of coach travel or equivalent. Airport ground transfers or shuttles will be reimbursed at actual cost shown on receipts.
- 4.2 Taxis, ride-sharing services (Lyft, Uber, etc...) and public transportation (light rail, subway or buses) will be reimbursed at actual cost shown on the receipts.
- 4.3 Mileage and tolls for personal vehicle use will be reimbursed consistent with IRS standard mileage rates in effect at the time of travel.
- 4.4 Gasoline purchased for a County owned vehicle while traveling away from the County facilities will be reimbursed at actual cost incurred. All rules otherwise applicable to the use of County vehicles must be followed, for example, no consumption of alcohol or tobacco use.
- 4.5 County Board members are not eligible for mileage reimbursement for travel within the County and any Elected Official or employee eligible for a car allowance is not eligible for mileage reimbursement.
- 4.6 Vehicle rentals must be included in the Overnight Travel Request and must have advance approval. Vehicle rental contracts must conform with all policies established by the Finance Department or Risk Management regarding insurance coverage. Currently, additional insurance is required for rental vehicles used outside of the State of Illinois.

5.0 Lodging Reimbursement

5.1 Lodging reimbursement shall be at an actual cost consistent with facilities available and in proximity to the location of a conference, seminar, or business meeting. Where

multiple occupancy involving a spouse and/or other family members has occurred, the County official or employee may only claim the actual and necessary cost of his or her single occupancy at a single rate. If no single rate exists, the lowest double rate shall be reimbursed.

- 5.2 Lodging provided by a friend, relative, or non-invoicing organization is not reimbursable and Airbnb-type accommodations are not reimbursable.
- 5.3 The number of nights for which an employee may obtain reimbursement will be limited to the number necessary to conduct County business. Arrival one night before a conference or meeting is reimbursable. Employees are encouraged to return home on the final day of the conference whenever possible. For conferences that end before 5:00 p.m. the Travel Expense Request Form should include an explanation to support a request for not returning home on the final day of the conference.
- 5.4 Overnight lodging within a 75-mile radius of the County complex is not reimbursable without advance approval by the Parent Committee.
- 5.5 Personal items such as movie rentals, room service, clothing cleaning, etc. are not reimbursable.

6.0 Meal reimbursement

- 6.1 Meal expenses will be reimbursed on a per diem basis, consistent with General Services Administration (GSA) CONUS allowances in effect at the time of travel. Individual meals are not reimbursable and receipts for meals are not required. Tips for meals are included in the per diem and not separately reimbursed. https://www.gsa.gov
- 6.2 Consistent with GSA guidance, per diems are reimbursed at 75% for travel days.
- 6.3 If a conference or event registration includes meals, the per diem will be reduced accordingly. Consistent with recent GSA/GAO guidance "free" hotel meals and snacks provided at a conference will not reduce the amount of the per diem.
- 7.0 Conference registration fees, materials, and miscellaneous expenses
 - 7.1 Local Government Travel Control Expense Act, 50 ILCS 150/1 et seq., does not apply to conference registration fees. If an employee has advanced conference registration fees from personal funds, reimbursement may be made prior to conference attendance or subsequent to the conference with the approval of the Chair of the relevant Parent Committee. Conference fees shall be itemized and documented on the applicable Expense Report. In the event reimbursement is made prior to conference attendance, all funds paid to the employee shall be reimbursed to the County within seven days if the employee fails to attend the conference for any reason.

- 7.2 Registration fee reimbursement shall be paid from the "Instruction & Schooling" Account Code (53610) and not from the "Travel Expenses" Account Code (53510).
- 7.3 Materials related to a conference, meeting, or event that are purchased separate from the conference registration are to be paid from the appropriate commodity Account Code and not out of the "Travel Expenses" Account Code (53510).
- 7.4 Tips for meals are included in the per diem and not separately reimbursed. Other tips are reimbursable up to 20% of the original cost, if documented or up to \$5 per day if not documented.

Appendix C

DRUG AND ALCOHOL POLICY

I. PROHIBITIONS

A. Prohibited Alcohol-Related Conduct

An employee shall not operate a County commercial motor vehicle or perform a related safety-sensitive function if s/he has engaged in any form of alcohol-related conduct listed below:

- 1. Using alcohol on the job.
- 2. Being in possession of alcohol while on duty or operating a commercial motor vehicle.
- 3. Having a prohibited breath alcohol concentration while performing a safety-sensitive function.
- 4. Having used alcohol during the four (4) hours before going on duty.
- 5. Using alcohol within eight (8) hours following an accident requiring a breathalcohol test, or until tested.
- 6. Refusing to submit to a required alcohol test.

B. Prohibited Drug-Related Conduct

An employee shall not perform a safety-sensitive function if s/he has engaged in any of the following activities:

- 1. Using any of the following controlled substances, including use of a substance for medicinal purposes under a doctor's care, unless a physician has advised the employee that it not will interfere with the employee's ability to perform his job safely:
 - a. Marijuana (THC metabolite)
 - b. Cocaine
 - c. Opiates (morphine and codeine)
 - d. Phencyclidine (PCP)
 - e. Amphetamines
- 2. Being in possession of any unauthorized controlled substance.

- 3. Reporting for duty while impaired from any prescribed therapeutic drug or controlled substance usage.
- 4. Refusing to submit to a required controlled substances test.

C. Reporting Requirements for Prescribed Controlled Substances

- 1. Any employee who takes prescribed medication and whose duties include operating a commercial motor vehicle for the Employer must inquire of his/her treating physician whether the controlled substance would adversely affect his/her ability to operate a commercial motor vehicle.
- 2. If the medication in use will adversely affect the employee's ability to safely perform his job, the employee may not report to work or may not remain on duty. Employees eligible for sick leave may take such period of absence as paid sick leave.

II. CATEGORIES OF TESTING

A. Post-Accident Testing

- 1. Conducted when a bargaining unit employee was involved in an accident in a Employer vehicle, <u>and</u>:
 - a. The accident involved the loss of life; or
 - b. The employee was issued a citation for a moving traffic violation arising from an accident that included:
 - (1) Injury requiring medical treatment away from the scene; or
 - (2) One or more vehicles having to be towed from the scene.

2. Post-Accident Alcohol Testing

- a. Whenever possible, post-accident alcohol testing shall be conducted within two (2) hours of the accident.
- b. If testing is not administered within two (2) hours of the accident, the Employer must prepare and maintain a record stating the reason the test was not promptly administered.
- c. If testing is not administered within eight (8) hours of the accident, the Employer shall cease attempts to administer an alcohol test.

d. An employee required to be tested under this section is prohibited from consuming any alcohol for at least eight (8) hours following the accident or until after the breath alcohol test.

3. Post-Accident Drug Testing

- a. Post-accident drug testing <u>must</u> be conducted within thirty-two (32) hours after the accident. If testing is not administered within thirty-two (32) hours of the accident, the Employer shall cease attempts to administer a drug test.
- b. If testing is not administered within thirty-two (32) hours of the accident, the Employer must prepare and maintain a record stating the reason the test was not promptly administered.

B. Random Testing

Conducted throughout the year on a random, unannounced basis according to the following guidelines:

Restricted Period

- a. Bargaining unit employees required to have a Commercial Driver's License (CDL) are subject to unannounced random drug testing during all periods on duty and are subject to unannounced random alcohol testing while the driver is performing safety-sensitive functions, just before the driver is to perform safety-sensitive functions, or just after the employee has ceased performing such functions.
- b. The Employer will not require employees to come in for a call-out assignment for the sole purpose of random testing.

2. Frequency

- a. The Employer shall conduct random <u>drug</u> testing on at least fifty percent (50 %) of the average number of bargaining unit employees required to have a CDL. The minimum annual percentage rate in succeeding years shall be determined by the rate set by the FHWA Administrator, as published in the Federal Register (pursuant to 49 CFR Part 382 (Sec. 382.305)). The Employer shall provide written notice to the Union before January 1 of each succeeding year regarding any changes in the minimum annual percentage rate.
- b. The Employer shall conduct random <u>alcohol</u> testing on at least twenty-five percent (25 %) of the average number of bargaining unit employees in each calendar year. The minimum annual percentage rate in succeeding years shall be determined by the rate set by the FHWA Administrator, as published in the Federal Register (pursuant to 49 CFR

Part 382 (Sec. 382.305)). The Employer shall provide written notice to the Union before January 1 of each succeeding year regarding any changes in the minimum annual percentage rate.

3. Selection

- a. The procedure used to determine which employees are subject to random drug or alcohol testing in a given year shall ensure that each bargaining unit employee who is required to have a CDL has an equal chance of being selected.
- b. Should disputes arise regarding the random selection process, the Director Human Resources or other person responsible for administering the drug and alcohol policy for the Employer shall meet with a representative of Local 150 (not a bargaining unit member) and explain the methodology used.

C. Reasonable Suspicion Testing

Conducted when a <u>trained</u> supervisor observes behavior or appearance that is characteristic of an individual who is currently under the influence of or impaired by alcohol, impaired by drugs, or a combination of alcohol and drugs, according to the following guidelines:

- 1. A supervisor's determination that reasonable suspicion exists shall be based on specific, contemporaneous, articulable observations concerning the appearance, behavior, speech or body odors of the employee;
- 2. The Department Head or a second <u>trained</u> department supervisor who is reasonably available must confirm the reasonable suspicion determination;
- 3. The employee is entitled to Union representation before being questioned in connection with a reasonable suspicion determination, if so requested.
- 4. The supervisor(s) must complete and submit a Reasonable Cause Observation Form for any drug tests within twenty-four (24) hours.
- 5. A "trained supervisor" is one who has received at least two (2) hours of training in the signs of alcohol and drug use, including at least sixty (60) minutes of training on drug use and at least sixty (60) minutes of training on alcohol use.

D. Return to Duty Testing

1. After engaging in prohibited alcohol conduct, an employee may not return to duty requiring the performance of a safety sensitive function until s/he takes a return to duty breath alcohol test with a result indicating an alcohol concentration of less than 0.02.

2. After engaging in prohibited controlled substances conduct, an employee may not return to duty requiring the performance of a safety sensitive function until s/he takes a return to duty urine drug test with a verified negative result for controlled substances use.

E. Follow-Up Testing

- 1. Upon returning, the employee is subject to at least six (6) unannounced follow-up tests during the first twelve (12) months after s/he returns to duty requiring a CDL.
- 2. If the Substance Abuse Professional determines that follow-up testing is not longer necessary, it may be terminated after the first six (6) follow-up tests.

3. Substance Abuse Professional

The Substance Abuse Professional shall be a licensed physician (medical doctor or doctor of osteopathy), or a licensed or certified psychologist, social worker, employee assistance professional, or addiction counselor with knowledge of and clinical experience in the diagnosis and treatment of alcohol and controlled substances-related disorders.

III. TESTING PROCEDURES

A. Drug Testing Procedures

1. Collection Site

- a. Once a drug test is announced, an employee shall go directly to the collection site.
- b. Upon arrival, the employee shall verify his identity and will be provided with a form on which the employee may elect to list any prescription or non-prescription medication s/he is using.
- c. Before testing, an employee shall be shown a sealed container, which shall be unwrapped in front of him/her.
- d. An employee shall be afforded a private area to provide a urine specimen. This area shall be equipped with a toilet, and shall be secured to prevent adulteration or dilution.
- e. Once an employee has provided a urine sample in the collection container, s/he shall hand it to the collection person. The collection person, in the presence of the employee, shall then pour the urine into two (2) specimen bottles. At least thirty (30) milliliters must be poured into the primary specimen bottle, and fifteen (15) milliliters into the split specimen bottle.

f. If an employee of the testing facility believes that an employee is attempting to obstruct the collection process or may submit an altered, adulterated or substitute specimen, and a Employer official concurs, an observed specimen may be collected.

2. Medical Review Officer (MRO)

The Medical Review Officer shall be a licensed physician designated by the Employer as the person responsible for receiving laboratory results generated by the Employer's drug testing program. The MRO shall have knowledge of substance abuse disorders and have the appropriate medical training to interpret and evaluate an employee's positive test result together with his/her medical history and any other relevant biomedical information.

3. Laboratory Analysis

- a. Analysis of a primary urine specimen shall be performed at a laboratory certified and monitored by the Department of Health and Human Services (DHHS).
- b. The laboratory shall analyze the primary specimen with an Enzyme Multiple Immunoassay Test (EMIT) or some other screen test allowed by DHHS for employees required to have CDLs.
- c. Positive screens shall be confirmed by the Gas Chromatography/Mass Spectrometer (GC/MS) method.
- d. When directed in writing by the MRO that an employee has requested analysis of the split specimen, the laboratory shall forward the split specimen to another DHHS-certified laboratory for testing.

4. Primary Specimen Test Results

a. Negative Test Results

If the result of the test of the primary specimen is negative, the MRO shall promptly report a negative test to the Employer and the employee.

b. Positive Test Results

- 1) Drug test results reported positive by the laboratory shall not be deemed positive or disseminated to the Employer until they are reviewed by the MRO.
- 2) If the result of the test of the primary specimen is positive, the MRO shall contact the employee and give the employee an opportunity to establish an alternative medical explanation for the positive test result.

- a) If the MRO determines that the positive result was caused by the legitimate medical use of the prohibited drug, or that the positive result was otherwise in error, the MRO shall report the drug test result as negative.
- b) If the MRO determines that there is no alternative medical or other explanation for the positive test result, the MRO shall inform the employee that s/he has seventy-two (72) hours in which to request a confirmation test of the split specimen, and inform the Employer that the driver should be removed from service.
- 3) The employee shall remain out of service pending the result of the split sample analysis.

5. Confirmation/Split Specimen Test

- a. If within seventy-two (72) hours of notification of the positive result by the MRO, the employee requests that the split specimen test be conducted, the MRO shall make written notice to the primary specimen laboratory to forward the split sample to a second laboratory.
- b. If the employee has not contacted the MRO within seventy-two (72) hours, the employee may present to the MRO information documenting that serious illness, injury, inability to contact the MRO, lack of actual notice of the positive test result, or other unavoidable circumstances prevented the employee from timely contacting the MRO. If the MRO concludes that there is a legitimate explanation for the employee's failure to contact the MRO within seventy-two (72) hours, the MRO shall direct that analysis of the split specimen be performed.

c. Waived or Positive Confirmation Test

- 1) If the employee waives his right to a confirmation/split specimen test, or if the confirmation/split specimen test is positive, the MRO shall report a verified positive test to the Employer.
- 2) Upon receiving the results of the positive test, the Employer shall promptly notify the employee and provide the employee the opportunity to request full information concerning the test results.

d. Alternative Test

If the employee requests that an alternative test be undertaken, it shall be conducted at the employee's expense. The results of such test may be admitted into evidence at any disciplinary hearing on the issue of prohibited drug use, at the employee's discretion.

6. Inability to Provide Adequate Sample

- a. Employees who are unable to provide a urine sample of forty-five milliliters shall be offered additional drinking water and allowed additional time before being required to provide another urine specimen. The amount of fluids the employee is given and the amount of time he/she is allowed shall follow federal D.O.T. rules.
- b. If the employee is still unable to provide an adequate sample, testing shall be discontinued and the MRO shall refer the employee for a medical evaluation to develop pertinent information concerning whether the individual's inability to provide a specimen is genuine.
 - 1) The employee shall be placed out of service until this determination is made.
 - 2) If there is no verification that inability to provide an adequate sample was genuine, the employee will be deemed to have refused to test.

B. Alcohol Testing Procedures

1. Screening Test

- a. All breath alcohol testing shall be conducted through use of an Evidential Breath Testing (EBT) device, in accordance with FHA rules and DOT regulations.
- b. Only a Breath Alcohol Technician (BAT), trained in accordance with DOT regulations, shall conduct testing with an EBT. Supervisors of bargaining unit employees shall <u>not</u> serve as BATs under any circumstances.

c. Testing Site

- 1) Testing locations shall ensure visual and aural privacy to employees, sufficient to prevent unauthorized persons from seeing or hearing test results.
- 2) Before testing begins, the BAT shall explain the testing procedure to the employee and answer any questions s/he may have.
- 3) An individually-sealed mouthpiece shall be opened in view of the employee. The mouthpiece shall then be attached to the EBT.

4) Once testing is complete, the BAT shall show the results to the employee.

d. Screening Test

- 1) If the result of the screening test is less than 0.02 percent alcohol concentration, the result is negative and no further testing shall be done.
- 2) If the result of the screening test is an alcohol concentration of 0.02 percent or greater, a confirmation test shall be performed.

2. Confirmation Test

- a. When required, the confirmation test shall be performed not less than fifteen (15) minutes nor greater than twenty (20) minutes after completion of the screening test.
- b. Employees with a breath alcohol concentration between 0.02 and 0.04 may not perform or continue to perform safety-sensitive functions until the start of the employee's next regularly scheduled duty period, not less than twenty-four (24) hours following administration of the test.
- c. If the result of the confirmation test is 0.04 percent alcohol concentration or greater, the result is positive.

3. Inability to Provide an Adequate Amount of Breath

- a. If an employee is unable to provide an adequate amount of breath, the Employer may direct the employee to see a licensed physician.
- b. The employee may not perform safety sensitive functions until s/he is evaluated, provided the evaluation takes place within two (2) hours.
- c. The physician shall examine the employee to determine whether the employee's inability could have been caused by a medical condition.
- d. If the physician determines, in his or her reasonable medical judgment, that a medical condition has, or with a high degree of probability, could have, precluded the employee from providing an adequate amount of breath, the employee shall not be deemed to have refused to take the test.
- e. If the physician is unable to make this determination, the employee shall be deemed to have refused to take the test.
- f. The Employer shall pay any medical fees assessed for the examination.

IV. CONSEQUENCES OF POSITIVE TEST RESULTS

A. Confirmed Breath Alcohol Test Result Between 0.02 and 0.04

An employee with a breath alcohol concentration result between 0.02 and 0.04 shall be removed from duty without pay for twenty-four (24) hours or a retest below 0.02.

B. Confirmed Breath Alcohol Test Result of 0.04 or More or Other Prohibited Alcohol Conduct

- 1. An employee with a breath alcohol concentration result of 0.04 or more, or who has otherwise violated the alcohol conduct rules set forth above, shall be immediately removed from duty.
- 2. The employee cannot resume the performance of safety sensitive functions until s/he:
 - a. Is evaluated by a Substance Abuse Professional (SAP); and
 - b. Complies with and completes any treatment program recommended by the SAP; and
 - c. Completes the return to duty testing requirements set forth above with a breath alcohol content of less than 0.02.

C. Confirmed Positive Urine Drug Test

- 1. An employee who tests positive for any of the prohibited controlled substances, or who has otherwise violated the substance abuse rules set forth above, shall be immediately removed from duty.
- 2. The employee cannot resume the performance of safety sensitive functions until s/he:
 - a. Is evaluated by a Substance Abuse Professional (SAP); and
 - b. Complies with and completes any treatment program recommended by the SAP; and
 - c. Completes the return to duty testing requirements set forth above with a negative result.

D. Discipline

Any discipline imposed upon employees shall be subject to the Disciplinary and Grievance Procedure provisions of the Collective Bargaining Agreement.

E. Refusal to Test

Any employee who refuses to undergo required testing, as set forth in this policy, shall be considered as having tested positive and shall be immediately removed from duty. However, if it is subsequently determined that the order to submit to testing was in violation of this policy, the employee will be made whole for any economic loss incurred during his/her time off.

V. CONFIDENTIALITY OF RECORDS

All drug and alcohol test results and records shall be maintained under strict confidentiality. Supervision shall not be entitled to copies of test results although supervision may be informed on a need to know basis of the results of such tests.

A. Employee Entitled to Information

Upon written request, the employee shall be promptly furnished with copies of any and all records pertaining to his/her use of alcohol and/or drugs, including any records pertaining to conducted tests. The employee's access to the records shall not be contingent upon payment for the records.

B. Conditions Under Which the Employer Must Release Records

- 1. To the employee, upon written request.
- 2. When requested by federal or state agencies with jurisdiction, when license or certification actions may be required.
- 3. To a subsequent employer pursuant to written consent of the former employee.
- 4. To the decision maker in a grievance, arbitration, litigation, or administrative proceeding arising from a positive test result or employee-initiated action.

VI. EMPLOYEE ASSISTANCE PROGRAM

A. Voluntary Referral

- 1. Before Testing
 - a. Any bargaining unit employee who voluntarily refers himself or herself to the Commission's Employee Assistance Program (EAP) before being ordered to submit to a random, reasonable suspicion, post-accident or return to duty drug or alcohol test shall not be subject to discipline.
 - b. Any bargaining unit employee who has voluntarily referred himself or herself to the EAP shall be subject to the same testing procedures as an employee who has tested positive for drug and alcohol use.

c. The employee shall be returned to regular work duties only on the recommendation of the EAP counselor and successful completion of a return to duty medical exam.

2. At the Time of Testing

If a bargaining unit employee voluntarily refers himself or herself to EAP upon being ordered to submit to a drug or alcohol test, the Employer shall consider such voluntary referral in mitigation of any discipline.

B. Confidentiality of Referral

All EAP referral shall be kept strictly confidential.

C. Rehabilitative Leave of Absence

1. Accrued Leaves of Absence

An employee may use any accrued leave (e.g., sick, vacation, personal, etc.) for the purpose of rehabilitation of a drug and/or alcohol problem.

2. Extended Leave of Absence

Upon an employee's request, the Employer shall, to the extent necessary for treatment and rehabilitation, and subject to the General Leave provisions of the Collective Bargaining Agreement, grant the employee an unpaid leave of absence for the period necessary to complete primary treatment of the employee's drug and/or alcohol problem.

Appendix D

PERSONAL LEAVE OF ABSENCE

POLICY

It is the policy of DuPage County to allow employees to take a Personal Leave of Absence without pay unless accrued vacation, sick, and compensatory time is available for extraordinary circumstances of personal need when it is determined to be in the best interest of both the County and the requesting employee.

ELIGIBILITY

•All full-time and part-time employees under County Board Jurisdiction.

GUIDELINES

- A. A Personal Leave can be initiated at the employee's request and is not to exceed ninety
- (90) calendar days unless approved by the County Board Chair.
- B. If an employee is not working due to illness, sickness, or injury which is not protected by the Family Medical Leave Act, the County may place an employee on a Personal Leave not to exceed ninety (90) calendar days unless approved by the County Board Chair.
- C. An employee will be required to use any accrued vacation, sick, and compensatory time during an approved Personal Leave. If an employee does not have this time available, they will go unpaid during the length of the Personal Leave.
- D. In most circumstances, an employee may be required to use any accrued vacation, sick time, and compensatory time during any unpaid portion of Personal Leave granted, providing this does not interfere with Workers' Compensation benefits, eligibility for IMRF disability benefits, or Parental Time. If an employee does not have this time available, they will go unpaid during the length of the Personal Leave. Personal Leave will run concurrently with any other applicable benefits. For instance, Workers' Compensation benefits, IMRF disability, or Parental Time, will be simultaneously designated as Personal Leave as well, if qualifying.
- E. Accrual of vacation and sick time will cease during any Personal Leave. In addition, employees will not be eligible to receive jury duty/ court services pay or blood donation leave pay at any time during Personal Leave and will not be eligible to receive holiday pay or Bereavement/Funeral Time. Unpaid leave is defined as time off during which the employee is not receiving any compensation for previously accrued benefit time (sick, vacation, or compensatory time). Additionally, future benefits and benefit accruals will be adjusted based upon the period of time the employee is on Personal Leave (i.e., sick time, vacation time, retention, and service awards).

- F. During a Personal Leave, an employee may continue participation in the County's benefit programs by paying the current employee rate of those programs in which they are enrolled.
- G. The effective date of completion of an employee's probationary period, due date for performance appraisals and/ or eligibility for any salary adjustments while on a Personal Leave, will be adjusted to account for the break in service.
- H. Only extreme circumstances should be considered in granting a Personal Leave. All aspects of the employee's situation should be considered, including personal circumstances, length of employment, job performance, any prior disciplinary action, overall attendance, and probability of return.
- I. The Director of Human Resources, or designee, will make every effort to place the employee in their former position. Personal Leave does not guarantee the ability to return to a former position. If the position is not available, the employee may be restored to a position of like status and pay, if available. If this is not possible, the employee will be separated.
- J. Before returning to work, the employee who is out due to their own serious health condition must provide a written medical release from their physician with a specific return date noting any restrictions. If restrictions are noted, the Department Head and Director of Human Resources will determine whether and how the restrictions may be accommodated. If such certification is not received, their return to work will be delayed.

- 1. An employee must submit a written request for Personal Leave (available in the Human Resources Department) at least thirty (30) days in advance, where practical or where leave is foreseeable, stating both the purpose and the beginning and ending dates of the leave. If the need for leave is not foreseeable, or the employee does not receive thirty (30) days advance notice themselves, notice is required as soon as practicable, generally within one (1) to two (2) days of learning of the need for leave.
- 2. Requests for Personal Leave will be reviewed and approved or denied by the employee's Department Head and the Director of Human Resources, or designee, according to County policy. The employee's Department Head and the Director of Human Resources reserve the right to consider the operational needs of the department when reviewing the personal leave request.
- 3. A Personal Leave request of more than ninety (90) calendar days must be approved by the County Board Chair.
- 4. Personal Leave may be considered on an intermittent basis. The employee's Department Head and the Director of Human Resources reserve the right to consider the operational needs of the department when reviewing the personal leave request.
- 5. The County may require that the employee obtain appropriate medical certification or supporting documentation stating the need for the leave of absence and the dates of absence. The employee is responsible for providing updated medical information as requested by the County during the leave.

- 6. Special consideration may be granted for employees seeking to participate in federal, state, or local government-sponsored humanitarian initiatives. Documentation specific to the request of the leave will be required in order to determine the approval and duration.
- 7. Normally, during a Personal Leave, the workload of the employee on leave is absorbed by other employees. If this is not practical, the Department Head and Director of Human Resources, or designee, may jointly determine whether the employee must be temporarily replaced.
- 8. The Supervisor or Department Head should inform the employee that their return status from a Personal Leave is always subject to, and contingent upon, availability of their former position.
- 9. If an employee was on Personal Leave due to their own serious health condition, the employee must provide documentation from their treating health care provider indicating they are able to perform the essential functions of their position before returning to work. Documentation must include a list of restrictions that would impact their ability to perform their job.
- 10. Employees may be required to provide periodic updates of their status and intent to return to work while on Personal Leave.
- 11. If the employee does not return to active employment by the date agreed upon, the employee will be terminated.
- 12. Consistent with the County's policy regarding all types of leave, the following conduct is strictly prohibited in relation to Personal Leave:
 - a. Engaging in fraud, misrepresentation or providing false information to the County or any health care provider.
 - b. Having other employment during the leave, without prior written approval from the County.
 - c. Failure to comply with the employee's obligations under this policy.
 - d. Failure to timely return from the leave.
 - 13. Employees who engage in such conduct will be subject to loss of benefits, denial or termination of leave, and discipline, up to and including discharge.

Appendix E

BEREAVEMENT/FUNERAL LEAVE

POLICY

It is the policy of DuPage County to provide paid time off for employees to bereave the loss of an immediate family member.

ELIGIBILITY

•All full-time and part-time employees under County Board Jurisdiction who are budgeted to work a minimum of twenty (20) hours per week.

GUIDELINES

- A. Employees will be paid for up to three (3) days of Bereavement/Funeral time.
- B. Bereavement/funeral time should be taken consecutively but may be split at the discretion of the Supervisor and with the approval of the Department Head.
- C. If the death should occur during regularly scheduled time-off or holiday, eligible employees may still receive the full bereavement/funeral time.
- D. Eligible part-time employees will receive bereavement pay at a proportional rate, based on the number of hours they are regularly scheduled to work.
- E. Bereavement will be calculated at one-tenth (1/10) of the normally scheduled bi-weekly work hours.
- F. In the event of the death of a covered family member, refer to Personnel Policy 5.12: Family Bereavement Leave
- G. Members of the employee's immediate family include:

Mother Father Brother Sister	Spouse Mother-in-law Father-in-law Child	Grandparent Grandparent-in- law Grandchild Stepparent	Sister-in-law Brother-in-law Son-in-law Daughter-in-law

- The above also applies to a person who is legally acting as a guardian in one of the above capacities.
- Employee's immediate family member does not include a former spouse or a member of the former spouse's family.

- H. Written documentation may be required before payment is made declaring the relationship of the employee. Documents such as a dated obituary notice or notice from the funeral home may be required before bereavement pay can be processed.
- I. If an employee requests additional days off or additional time off with pay, accrued vacation, sick time, Paid Leave, or compensatory time may be scheduled and is subject to the approval of the Department Head or Supervisor.
- J. In the event of a death outside the immediate family, accrued vacation, Paid Leave, or compensatory time may be scheduled and is subject to the approval of the Department Head or Supervisor.
- K. Management discretion in handling bereavement/funeral time issues should reflect respect and sensitivity for the nature of the individual's circumstances, while ensuring consistency and fairness to other employees.

- 1. An employee shall notify their Department Head or Supervisor as soon as practical, immediately following the death of an immediate family member.
- 2. The Supervisor shall notify the employee of the duration of their time and be responsible for coding the time document accordingly.

Appendix F

FAMILY MEDICAL LEAVE (FMLA)

POLICY

It is the policy of DuPage County to comply with all Federal and State laws in granting Family Leave. This policy is meant to comply with the Family Medical Leave Act and is not intended to grant leave in addition to what the Act requires.

ELIGIBILITY

• All full-time and part-time employees who have worked at least 1,250 hours during the twelve (12) months preceding the leave and who have completed twelve (12) months of service are eligible to take Family Medical Leave (FMLA).

GUIDELINES

- A. An eligible employee will be entitled to a total of twelve (12) work weeks of unpaid leave during a designated twelve (12) month period for one or more of the following:
 - 1. The birth and care of the newborn child of the employee. (Leave to care for a newborn child or for a newly placed child must conclude within twelve (12) months after the birth or placement).
 - 2. The placement of a child with the employee for adoption or foster care. (Leave to care for a newborn child or for a newly placed child must conclude within twelve (12) months after the birth or placement).
 - 3. To care for an immediate family member (spouse, child, or parent), of the employee with a serious health condition.
 - 4. When the employee is unable to work because of a serious health condition.
 - 5. Qualified Exigency Leave related to a spouse, child, or parent called to active duty in the National Guard or Reserves.
- B. An eligible employee will be entitled to a total of twenty-six (26) work weeks of unpaid leave during a designated twelve (12) month period to care for an injured or ill military service member who is the employee's spouse, son or daughter, parent or "next of kin." The leave is applied on a per-service member, per-injury basis.
- C. DuPage County uses a rolling twelve (12) month calendar to calculate an employee's FMLA, measured backward from the date leave is taken. Each time an employee requests FMLA, DuPage County will compute the amount of available time based upon the date of the employee's previous leave, if applicable.
- D. In most circumstances, an employee may be required to use any accrued vacation, sick time, and compensatory time during any unpaid portion of FMLA granted, providing this does not interfere with

Workers' Compensation benefits, eligibility for IMRF disability benefits, or Parental Time. FMLA will run concurrently with any other applicable benefits. For instance, IMRF disability, Workers' Compensation benefits, or Parental Time, will be simultaneously designated as FMLA leave as well, if the leave is also FMLA qualifying.

- E. Employees may choose to use Paid Leave during any unpaid portion of a leave, or bank that time based on the requirements and provisions under Policy 5.2 Paid Leave.
- F. The County will provide basic life, medical and dental insurance coverage to an employee who is on FMLA at the current employee rate. If an employee is off work after exhausting their twelve (12) weeks of FMLA, the employee will continue to be responsible for the employee rate. If an employee fails to pay their share of the premium, coverage may be canceled.
- G. Under certain circumstances, an employee may take FMLA intermittently, which means taking leave in blocks of time, or by reducing the employee's normal weekly or daily work schedule.
- H. When leave is needed for planned medical treatment, the employee must make a reasonable effort to schedule treatment during non-working business hours so as not to unduly disrupt the operation of the department.
- I. An expectant mother is entitled to FMLA for incapacity due to pregnancy, for prenatal care, or for her own serious health condition following the birth of the child. Circumstances may require that FMLA begin before the actual date of birth of a child. An expectant mother may take FMLA before the birth of the child for prenatal care or if her condition makes her unable to work. The mother is entitled to leave for incapacity due to pregnancy even though she does not receive treatment from a health care provider during the absence, and even if the absence does not last for more than three (3) consecutive calendar days.
- J. An employee is entitled to FMLA if needed to care for their pregnant spouse who is incapacitated or if needed to care for her during her prenatal care, or if needed to care for the spouse following the birth of a child if the spouse has a serious health condition.
- K. Spouses employed by the County are entitled to FMLA if needed to care for a child, adopted child or foster child with a serious health condition if the requirements of the applicable FMLA regulations are met and provided they have not exhausted their entitlements during the applicable twelve (12) month FMLA period.
- L. An employee who expects to be absent from work due to personal illness or injury for more than thirty (30) days may be eligible for IMRF disability benefits. (Personnel Policy 6.2: Illinois Municipal Retirement Fund/IMRF)
- M. An employee with twelve (12) or more months of service who is eligible for FMLA and is absent on FMLA for twelve (12) work weeks or less will have the right to return to the same, or equivalent, position. However, an employee has no greater right to reinstatement or other benefits and conditions of employment than if they had not taken leave. If the employee does not return to work on the first business day after the approved FMLA leave ends, the employee will forfeit their right to be reinstated under the FMLA.

N. Certain "key" as defined by the Act may not be returned to their former or equivalent positions following a leave if reinstatement to employment will cause substantial economic injury to the County. The County will notify those who qualify as "key" employees and those who will be denied reinstatement, and it will also notify these employees of their rights.

O. Before returning to work, the employee must provide a written medical release from their physician before returning to work with a specific return date noting any restrictions. If restrictions are noted, the Department Head and Director of Human Resources will determine whether and how the restrictions may be accommodated. If such certification is not received, their return to work will be delayed.

P. Accrual of vacation and sick time will cease during any FMLA over thirty (30) calendar days. In addition, employees will not be eligible to receive jury duty/ court services pay or blood donation leave pay at any time during FMLA, and will not be eligible to receive holiday pay or Bereavement/Funeral time pay following thirty (30) calendar days of FMLA. Unpaid leave is defined as time off during which the employee is not receiving any compensation for previously accrued benefit time (sick, vacation, paid leave, or compensatory time).

- 1. An employee must contact human Resources to request FMLA, at least thirty (30) days in advance, where practical or where leave is foreseeable, stating both the purpose and the beginning and ending dates of the leave. If the need for leave is not foreseeable, or the employee does not receive thirty (30) days advance notice themselves, notice is required as soon as practicable, generally within one (1) to two (2) days of learning of the need for leave.
- 2. Requests for FMLA must be approved by the Director of Human Resources, or designee.
- 3. The County will require that the employee obtain a Certification of Healthcare Provider form and have it completed by a certified health care provider. The employee is responsible for providing updated medical re-certifications as requested by the County during the Leave.
- 4. The Human Resources Department may contact the healthcare provider directly to authenticate a certification or obtain clarification.
- 5. An employee will be required to provide their supervisor with a schedule or a one (1) to two (2) day notice of anticipated absences.
- 6. If an employee fails to provide a one (1) to two (2) day notice or a call on the same day of an absence, it may not be counted as FMLA time unless the absence is due to unforeseen circumstances. Instead, it may be treated as a regular absence and will be subject to the department's attendance policy unless it was an emergency or unforeseen circumstance; then the employee must have a doctor/facility note to verify the emergency or unforeseen circumstance.
- 7. The County, at its expense, may require an examination by a second health care provider designated by the County. If the second medical opinion differs from the employee's original certification form, the County, at its expense, may require that a third, mutually agreeable health care provider provide a final and binding opinion.
- 8. The Human Resources Department will notify the employee of the status of their request for FMLA by sending the employee a Notice of Eligibility and Rights & Responsibilities form and Designation Notice form.
- 9. Employees may be required to provide periodic updates of their status and intent to return to work while on FMLA.
- 10. If an employee was on FMLA due to their own serious health condition, the employee must provide medical documentation from their treating health care provider indicating they are able to perform the essential functions of their position before returning to work. The medical

- documentation must include a list of restrictions that would impact their ability to perform the essential job functions of the position.
- 11. If circumstances of a leave change, enabling the employee to return to work earlier than the date specified, the employee should notify their supervisor at least two (2) working days prior to returning.
- 12. If a reduced work schedule or intermittent leave for planned medical treatment is approved, the employee may be temporarily transferred to an available alternate position for which the employee is qualified. All salary and benefits status will remain the same.
- 13. If an employee fails to return from leave for reasons other than the continuation, recurrence or onset of a serious health condition or other circumstances beyond the control of the employee, the County may recover the premium that was paid for maintaining group health plan coverage.
- 14. If an employee fails to return from leave, the employee's supervisor should notify the Human Resources Department immediately.
- 15. Consistent with the County's policy regarding all types of leave, the following conduct is strictly prohibited in relation to FMLA:
 - a. Engaging in fraud, misrepresentation or providing false information to the County or any health care provider.
 - b. Having other employment during the leave, without prior written approval from the County.
 - c. Failure to comply with the employee's obligations under this policy.
 - d. Failure to timely return from the leave.
- 16. Employees who engage in such conduct will be subject to loss of benefits, denial or termination of leave, and discipline, up to and including discharge.

EXCEPTIONS

•An employee who is not eligible for Family Medical Leave may request a Personal Leave (Personnel Policy 5.5: Personal Leave).

Appendix G

JURY DUTY LEAVEPOLICY

It is the policy of DuPage County to follow all Federal and State laws regarding Jury Duty or Court Service such as being called to act as a subpoenaed witness.

ELIGIBILITY

- All full-time and part-time employees are eligible to serve on a jury, or as a result of their duties may appear before a court as a witness in response to a subpoena or other directive.
- Temporary employees are eligible to serve on a jury, but their time at jury duty will be unpaid time off.

GUIDELINES

- A. Employees are granted a leave of absence with pay for the time they are required to serve, less payment received for acting as a juror or a witness.
- B. All employee benefits will continue in effect during subpoenaed jury duty or performance of witness duties.
- C. Employees who appear as a subpoenaed witness for the County or are required to testify on behalf of the County, or as a juror will be paid for those hours they are required to testify, less payment received for witnessing.

PROCEDURES

- 1. Upon receipt, the employee shall present the court document, which gives instructions to report for jury duty or the subpoena or notice to testify to their supervisor.
- 2. If an employee is released as a witness or relieved from jury duty for any period during normal working hours, the employee shall immediately notify their supervisor. The employee may be instructed to report back to work.
- 3. The employee shall submit a copy of any witness or juror compensation to the Payroll Division. A deduction of the Jury Duty, minus any travel allowance, will be made on the next paycheck processed.

EXCEPTIONS

• Employees who appear in court as the plaintiff or defendant in any action not related to their official duty shall not be paid for time away from work unless that time is accrued vacation, personal business, or compensatory time.

Appendix H

MILITARY LEAVE

POLICY

It is the policy of DuPage County to comply with all applicable Federal and State laws in granting Military Leave to employees who voluntarily or involuntarily serve, or are reserve members of, the United States Army, Navy, Marine Corps, Air Force, Coast Guard, Army National Guard, Air National Guard, and/or the Commissioned Corps of the Public Health Service, and others designated by the President of the United States in time of war or emergency.

ELIGIBILITY

•All full-time and part-time employees under County Board Jurisdiction.

GUIDELINES

- A. In accordance with the Uniformed Services Employment and Reemployment Rights Act (USERRA), the County is obligated to release employees for service with the Armed Forces when the employee participates in:
 - 1. Annual Training (Summer Camp)
 - 2. Active Duty of Training (School)
 - 3. Inactive Duty Training Assemblies (Weekend drills)
 - 4. Extended leave of absence for voluntary active-duty service (Enlistment)
 - 5. Involuntary call-up
- B. Military leave of absence shall not result in a loss of seniority status or benefits, which would have normally accrued if the employee had not been absent for such purposes.
- C. In accordance with Federal law, a military leave of absence shall have a 5-year limit (with some exception) on the cumulative length of time an employee may serve in the military and remain eligible for reemployment.
- D. The County is not required to provide additional work hours to compensate for military leave.
- E. During time of war, the County Board will adopt a resolution indicating any special exemptions or considerations to be put into practice.

PROCEDURES

1. Any regular full-time or regular part-time employee who enlists, is drafted or is called to active/inactive duty shall immediately notify their supervisor verbally or in writing prior to departure for military service.

- 2. An employee who is called to uniformed service shall provide a copy of official orders as soon as available reflecting the length and character of the service to their Supervisor or Department Head or the Human Resources Department.
- 3. In accordance with applicable law(s), the employee shall be compensated for the difference between the payment received from the military and their compensation paid by the County. The employee may request the use of vacation, compensatory time, or leave without pay to supplement absences; however, they are not required to do so.
- 4. The employee's insurance benefits will continue through their military leave period, unless the employee decides to discontinue the benefits.
- 5. If the employee has discontinued their insurance benefits during military leave, coverage will be immediately reinstated, without a waiting period, following the employee's return.
- The employee will continue to accrue vacation and sick leave. Vacation, sick leave and floating holidays that were unused at the time the military service began will be resumed upon the employee's return.
- 7. In accordance with Federal law, upon completion of the period of military service, the returning employee shall notify their supervisor that they intend to return to employment. The employee will provide documentation to the length and character of their uniformed service. The length of time the employee has to contact their supervisor depends upon the amount of time spent in service as explained below:

Length of Absence from Employment Due to	Deadline for Applying for Re-employment				
Uniformed Service					
Less than 31 days or to take an exam to determine	Employees have <i>eight hours</i> following their return from				
fitness for military service	service to report for their next scheduled work period				
Between 31 and 180 days	Employees will have 14 days following their return from				
	service to apply for reemployment				
More than 181 days	Employees have <i>90 days</i> following their return from service				
	to apply for reemployment				

- 8. The employee shall submit to their supervisor their military pay voucher, or equivalent, which details the amount of payment received for the military leave as soon as possible.
- 9. An employee's compensation shall reflect any adjustments made to their classification during the leave, excluding merit increases.

Appendix I

PARENTAL TIME

POLICY

All employees are eligible to apply for up to twelve (12) work weeks of Family Medical Leave and/or Personal Leave to care for and bond with a newborn or newly adopted child. It is the policy of DuPage County to provide eligible employees up to twelve (12) work weeks of paid Parental Time during an approved leave to care for and bond with a newborn or newly adopted child.

ELIGIBILITY

• All full-time and part-time employees who are budgeted to work a minimum of twenty (20) hours per week, have worked at least 1,250 hours or twelve (12) months, and are not in a new hire probationary period at the time of birth or adoption of a child are eligible to receive up to twelve (12) work weeks of Parental Time.

GUIDELINES

- A. An eligible employee will be entitled up to a total of twelve (12) work weeks of Parental Time during a designated six (6) months and used within six (6) months following the event for one or more of the following:
 - 1. The birth and care of the newborn child of the employee.
 - 2. The placement of a child, younger than 18, with the employee for adoption. The adoption of a new spouse's child is excluded from this policy.
- B. The County uses a rolling twelve (12) month calendar to calculate an employee's eligibility for Parental Time, measured backward from the date of qualified event.
- C. All eligible employees must be covered on an approved leave of absence, either Family Medical Leave (Policy 5.9: Family Medical Leave) or Personal Leave (Policy 5.5 Personal Leave) to be eligible to receive Parental Time.
- D. Employees who qualify for Parental Time will be required to use Parental Time before other paid time.
- E. In most circumstances, an employee may be required to use any accrued vacation time, sick time, and compensatory time during any unpaid portion of a leave after Parental Time has exhausted, providing this does not interfere with eligibility for IMRF disability.
- F. Employees may choose to use Paid Leave during any unpaid portion of a leave, or bank that time based on the requirements and provisions under Policy 5.2 Paid Leave.
- G. Eligible employees will receive a maximum of twelve (12) work weeks of Parental Time per birth or adoption of child/children. The Parental Time must be taken in blocks of time and used

within six (6) months following the birth or adoption of the child/children. The fact that a multiple birth or adoption (e.g., the birth of twins or adoption of siblings) does not increase the twelve week total amount of paid Parental Time granted for that event. In addition, in no case will an employee receive more than twelve (12) weeks of Parental Time in a rolling 12-month period, regardless of whether more than one birth or adoption event occurs within that 12-month time frame.

- H. Each week of Parental Time is compensated at one hundred (100) percent of the employee's regularly scheduled, straight-time bi-weekly pay. Parental Time will be paid on a biweekly basis on regularly scheduled pay dates.
- I. Reinstatement or other benefits and conditions of employment while receiving Parental Time will be based on the requirements and provisions under Policy 5.9: Family Medical Leave (FMLA) or Policy 5.5 Personal Leave. However, an employee has no greater right to reinstatement or other benefits and conditions of employment than if they had not taken leave.

- 1. An employee must contact the Human Resources Department to request Parental Time, at least thirty (30) days in advance, where practical or where leave is foreseeable, stating both the purpose and the beginning and ending dates of the leave. If the need for leave is not foreseeable, or the employee does not receive thirty (30) days advance notice themselves, notice is required as soon as practicable, generally within one (1) to two (2) days of learning of the need for leave.
- 2. The Department Head and Director of Human Resources, or their designee will be notified of an employee's eligibility for Parental Time.
- 3. An employee will be required to provide their supervisor with a schedule or a one (1) to two (2) day notice of anticipated absences.
- 4. The Human Resources Department will notify the employee of the status of their request for Parental Time in writing.
- 5. Employees may be required to provide periodic updates of their status and intent to return to work while receiving Parental Time.
- 6. If circumstances of a leave change, and the employee would like to return to work earlier than the date specified, the employee should notify the Human Resources Department and their supervisor at least two (2) working days prior to returning. Any unused Parental Time will be forfeited.
- 7. If an employee fails to return from leave, the employee's supervisor should notify the Department Head and Human Resources Department immediately.

Appendix J

TUITION REIMBURSEMENT

POLICY

It is the policy of DuPage County to provide educational assistance for eligible employees who want to further their education in courses that are work-related. DuPage County is committed to the career growth and development of its employees by enhancing their knowledge and skills through further education.

ELIGIBILITY

• All full-time employees who have completed one (1) year of continuous employment with DuPage County.

GUIDELINES

- A. Funds for tuition reimbursement may be allocated at the discretion of the County Board at the beginning of the fiscal year. Funds are available on a first come first served basis.
- B. Approval for the course must be obtained in advance from the Department Head. Upon approval, tuition will be reimbursed if the course is directly related to the employee's present position, job family or part of a job-related degree or program. The Department Head and the Chief Human Resources Officer, or designee, will determine whether a course is directly related to an employee's current job duties or a foreseeable future position.
- C. The course must be taken for college credit at an accredited educational institution. The amount reimbursable is a maximum of \$2,500 per calendar year as determined by the last day of scheduled classes.
- D. Reimbursement for any non-credited courses must receive prior approval from the Department Head and the Chief Human Resources Officer.
- E. Funding for approved courses will be consolidated in the Human Resources Department Budget for overall County-wide distribution.
- F. Tuition will be reimbursed at 100%, up to the \$2,500 annual maximum, upon completion of the course, providing a grade of C or better is obtained.

- 1. Pre-approval for course eligibility must be obtained from the Department Head and the Chief Human Resources Officer or designee. Pre-Approval Forms for tuition reimbursement are available on the internet or in the Human Resources Department.
- 2. The request for pre-approval must be filled out by the employee, signed by the Department Head or Elected Official and submitted to the Human Resources Department prior to the start of the course.

- 3. Receipts for reimbursement must be turned into the Human Resources Department no more than (90) days after completion of the course.
- 4. Reimbursement will be paid to the employee upon submission of the required documentation on the next available pay date, in accordance with payroll deadlines.

EXCEPTIONS

The following are not covered under the tuition reimbursement policy:

- Books
- Lab fees
- Seminars
- Travel/Parking expenses
- Certifications and/or licenses required to meet the minimum requirements of a position.

The <u>Tuition Reimbursement form</u> is available on the internet under the Human Resources tab.

Appendix K

ADOPTION ASSISTANCE

POLICY

It is the policy of DuPage County to provide assistance to all employees who are building families by providing eligible employees with adoption benefits including financial assistance, paid time off, and a pretax reimbursement account.

ELIGIBILITY

• All full-time employees under County Board Jurisdiction who have been continuously employed with DuPage County for one (1) year.

GUIDELINES

A. Reimbursement

- 1. Eligible adoption-related expenses will be reimbursed to a maximum of \$1,500 per child per year.
- 2. Eligible expenses include:
 - a. Agency and placement fees
 - b. Medical expenses of the birth mother
 - c. Medical expenses of the child prior to adoption
 - d. Transportation and lodging expenses
 - e. Expenses to meet the needs of a special needs child are eligible in the case of U.S. special needs adoptions

B. Adoption Leave

Adoption leave time may be used either pre or post adoption and will be considered as part of the twelve (12) weeks allowed under the Family and Medical Leave Act (Personnel Policy 5.9: Family Medical Leave). For more information on adoption leave, please contact a Benefits Representative.

- 1. All reimbursements will be consistent with the provisions of Section 137 of the IRS code.
- 2. A portion of the reimbursement amount may be taxable for employees whose family income exceeds \$75,000 per year.

- 3. Within thirty (30) days of notification that a child will be placed in an employee's home, they should contact a Benefits Representative.
- 4. Documentation of the placement and adoption petition as well as itemized receipts for expenses incurred for reimbursement will be needed.

EXCEPTIONS

- Adopted children must be under eighteen (18) years of age to be considered for this benefit.
- This policy does not apply in the case of the adoption of a stepchild.

The <u>Adoption Assistance Reimbursement Request form</u> is available on the internet under the Human Resources tab.

Appendix L

EMPLOYEE RETENTION

POLICY

It is the policy of DuPage County to provide retention incentives in order to provide long-term employees additional income protection for retirement in the form of a capital accumulation program.

ELIGIBILITY

- All full-time and part-time employees who participated in the Illinois Municipal Retirement Fund and began their employment with DuPage County on or before November 30, 2002.
- Eligibility begins at age fifty-five (55) and ten (10) years of continuous service or twenty (20) years of continuous service independent of age.

GUIDELINES

A. At the time of voluntary separation or layoff, retention benefits will be paid based on the following schedule and eligibility:

Continuous Years of Service	Total Days
10 years	50 days
15 years	90 days
20 years	120 days

B. For purposes of this policy, continuous service will be calculated from the earlier date of hire with DuPage County unless there has been a gap of over one year, in which case the most recent date of employment would be used to calculate retention benefits. Last day worked will be considered the final day of service.

- 1. Payment for applicable days will be made upon formal notice of separation or upon submission of Request for Early Disbursement of Retention Benefits Non-Retiree form.
- 2. If gap in service is one (1) year or less, any retention paid previously will be deducted from future retention payouts.
- 3. Pay will be calculated by the same formula as sick days and vacation days.
- 4. Employees who sign a formal notice of separation may receive payment for retention benefits up to six (6) months prior to their separation date.
- 5. Early Distribution Payout: Effective August 13, 2024, employees who are eligible for retention benefits may request an Early Distribution payout of their retention benefits without submitting a notice of separation from the County on a one-time basis, per employee. Requests must be for the entire retention amount but will be allowed to elect payment in two separate partial payments, to

be paid within a six-month period. A Request for Early Disbursement of Retention Benefits-Non-Retiree form must be completed and submitted to receive this payout, and the amount of the payout(s) will be based upon the employee's payrate at the date of the actual payment(s). If an eligible employee receives the retention payout prior to separation of employment, such employee shall not be entitled to any additional retention benefit, regardless of the years of service completed after such payout.

EXCEPTIONS

- DuPage County Elected Officials are not eligible for this program.
- Employees who are involuntarily terminated are not eligible for this program.
- Employees who have voluntarily resigned due to a conviction are not eligible for this program.

Appendix M

FITNESS FOR DUTY

POLICY

DuPage County is committed to providing a safe working environment and to protecting the health and safety of all employees. If an employee lacks the essential physical and mental requirements necessary to perform the essential functions of the job, or poses a significant risk to their own safety, safety of coworkers or the safety of the public, they may be referred for a fitness for duty evaluation.

ELIGIBILITY

• All employees under County Board Jurisdiction regardless of employment status.

GUIDELINES

- A. Employees are responsible for managing their health in such a way that they can safely perform the essential functions of their job, with or without a reasonable accommodation.
- B. Employees must come to work fit for duty and must perform their job in a safe, secure, productive and effective manner during the entire time they are working.
- C. Employees are responsible for notifying their supervisor if they are not fit for duty.
- D. Employees are responsible for notifying their Supervisor, Human Resources Representative, Department Head or Chief Human Resources Officer when they observe a co-worker acting in a manner that indicates the co-worker may be unfit for duty.

- 1. A fitness for duty assessment may be requested when there is reasonable cause for serious concern about an employee's ability to perform their role and duties safely, when the employee's behavior is grossly inappropriate for the workplace, or if there is reasonable concern for workplace safety.
- 2. An impartial, independent healthcare evaluator with expertise in the disciplines of medical, psychological, alcohol, or other drug conditions will conduct a fitness for duty evaluation.
- 3. Referrals for Fitness for Duty assessments will be made by the Department Head and Chief Human Resources Officer.
- 4. Employees will be removed from the workplace while in the process of completing a fitness for duty assessment.
- 5. Employees who cooperate in a fitness for duty evaluation and are in compliance with recommendations for medical, psychological and/or chemical dependence treatment may be returned to work provided appropriate discipline, if warranted, has taken place.
- 6. Non-compliance with a request for a fitness for duty evaluation or a determination that an employee is unfit for duty may result in disciplinary action, not to exclude termination. (Personnel Policy 10.1: Disciplinary Guidelines)

Payment of Claims



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: 25-1577 Agenda Date: 7/8/2025 Agenda #: 8.B.

AP255 Date: 06/20/25 Time: 11:18 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 1

Pay Group: 1000 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062025 -Payment Numbers: Payment Code: 062025

AP255 Date 06/20/25 Time 11:19 Pay Group 1000 GENERAL FUND PAY GROUP USD Page Bank Account Payment History

> 06/20/25 thru 06/20/25 Payment Date Range

Cash Code 1414 Payment Code ACH Bank 071923909

Dace	1141190	00,20,23	CIII G	00,20,23	•	
				Payment	Currency	USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Date	e Scheduled Amount	Discount Amount	Net Pay	ment Amount
					ABBATACOLA, ROBERT 1,780.00 1,780.00			
Payment Nur 26753 1 26753 1 26753 1 26753 1	mber 535705 17KX-91WX-99HD 19MN-4X16-HNQV 1H4H-K3KF-KVT3 1VM9-1G9K-3PXV	Payment Date 06/20/	25 Vendor IX 100 IX 100 IX 100 IX 100 *** Page 1	26753 A 07/11/25 07/09/25 07/09/25 04/13/25 ayment Total	AMAZON CAPITAL SERVICE 53.72 29.95 123.53 517.89 725.09	ES Status 0.00 0.00 0.00 0.00 0.00 0.00	Issued	53.72 29.95 123.53 517.89 725.09
Payment Nur 22420 (mber 535706 061225 23DC596	Payment Date 06/20/			BARNES, KRISTIN 64.00 64.00			
Payment Nur 28996 6 28996 6	688 689	Payment Date 06/20/			JASER, EVA Y 260.20 260.20 520.40			
Payment Nur 11714 2	mber 535708 20CF2400	Payment Date 06/20/	25 Vendor IX 100 *** Pa	11714 N 07/05/25 ayment Total	NELSON, LISA M. 220.00 220.00	Status 0.00 0.00	Issued	220.00 220.00
Payment Nur 13957 (13957 2 13957 2 13957 (13957 (13957 (002079 257024 257133 257169 C001720 C001722 C001761	Payment Date 06/20/	IX 100 IX 100 IX 100 IX 100 IX 100 IX 100 IX 100 IX 100	03/28/25 02/19/25 04/27/25 05/07/25 01/08/25 01/08/25 02/27/24 ayment Total	RUNBECK ELECTION SERVE 2,441.41 69,140.17 61,644.88 3,958.00 33,075.00 13,224.00 25,000.00 208,483.46	0.00 0.00 0.00 0.00 0.00 0.00 0.00		2,441.41 69,140.17 61,644.88 3,958.00 33,075.00 13,224.00 25,000.00 208,483.46
Payment Nur 12540 (mber 535710 050225 23DC596	Payment Date 06/20/	25 Vendor IX 100 *** Pa	12540 S 07/13/25 ayment Total	STEFANI, LIDIA 24.00 24.00	Status 0.00 0.00	Issued	24.00 24.00
Payment Nur 12313 (mber 535711 061125 061725	Payment Date 06/20/	25 Vendor IX 100 *** Pa	12313 S 06/18/25 ayment Total	GULLIVAN, ANTHONY 800.00 800.00	Status 0.00 0.00	Issued	800.00 800.00
Payment Nur 44522 6 44522 6	mber 535712 6504022 6526158	Payment Date 06/20/	25 Vendor IX 100 IX 100 *** Pa	44522 T 04/02/25 05/01/25 ayment Total	COSHIBA AMERICA BUSINI 1,005.95 1,332.53 2,338.48	ESS Status 0.00 0.00 0.00	Issued	1,005.95 1,332.53 2,338.48
Payment Nur 29895 1	mber 535713 14829	Payment Date 06/20/	25 Vendor IX 100	29895 W 07/14/25	NELLSPRING CLOUD SOLUT 300.00	FIONS LLC Status 0.00	Issued	300.00

AP255 Date 06/20/25 Pay Group 1000 GENERAL FUND PAY GROUP USD Time 11:19

Bank Account Payment History

Payment Date Range 06/20/25 thru 06/20/25

Cash Code 1414 Bank 071923909 Payment Currency USD Payment Code ACH

Vendor Invoice Voucher Auth PL Due Date Dsc Date Scheduled Amount Discount Amount Net Payment Amount

Payment Number 535713 Payment Date 06/20/25 Vendor 29895 WELLSPRING CLOUD SOLUTIONS LLC Status Issued *** Payment Total 300.00 0.00 300.00

> *** Payment Code ACH Total 215,255.43 0.00 215,255.43 Payment Count 10

Page

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Payment Currency USD

06/20/25 thru 06/20/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code CHK

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	te Scheduled Amount	Discount Amount	Net Payr	ment Amount
Payment Number 21958 25		Date 06/20/25	IX 100	21958 06/30/25 syment Total	ALLIANCE TO END HOMEL 3,853.40 3,853.40	ESSNESS Status 0.00 0.00		3,853.40 3,853.40
Payment Numb 10671 18 10671 18	2673		IX 100 IX 100	10671 05/16/25 07/16/25 Lyment Total	ALPHAGRAPHICS 112.18 23.50 135.68	Status 0.00 0.00 0.00	Issued	112.18 23.50 135.68
Payment Number 10876 76			IX 100	10876 01/08/25 Nyment Total	AMERICAN MOBILE SHRED 910.00 910.00	DING & Status 0.00 0.00		910.00 910.00
Payment Number 10009 28	er 1213611 Payment 7296427626X04272025	Date 06/20/25	IX 100 *** Pa		AT&T MOBILITY 1,850.82 1,850.82			1,850.82
10009 28	er 1213612 Payment 7352291905X06082025 7352291929X06082025	Date 06/20/25	Vendor IX 100 IX 100 *** Pa	10009 06/30/25 06/30/25 Nyment Total	AT&T MOBILITY 893.10 522.90 1,416.00	Status 0.00 0.00 0.00		893.10 522.90 1,416.00
Payment Number 11059 04	er 1213613 Payment 0125	Date 06/20/25	Vendor IX 100 *** Pa	11059 05/01/25 yment Total	AUGUSTINO'S ROCK AND 1,904.37 1,904.37	ROLL DELI Status 0.00 0.00	Issued	1,904.37 1,904.37
Payment Number 10019 60	er 1213614 Payment 00109426		IX 100	10019 06/18/25 yment Total	CENTRAL DUPAGE HOSPIT 178.00 178.00		Issued	178.00 178.00
Payment Number 45524 EX	er 1213615 Payment P20250613	Date 06/20/25	IX 100	45524 06/16/25 yment Total	CHAPLIN, ELIZABETH M. 120.90 120.90		Issued	120.90 120.90
	er 1213616 Payment 4189003000	Date 06/20/25	IX 100	34516 04/30/25 syment Total	CHICAGO TRIBUNE COMPA 10,126.54 10,126.54	NY Status 0.00 0.00	Issued	10,126.54 10,126.54
Payment Number 12382 23	er 1213617 Payment 8897083	Date 06/20/25	IX 100	12382 05/15/25 Nyment Total	COMCAST 1,650.00 1,650.00	Status 0.00 0.00	Issued	1,650.00 1,650.00
Payment Number 21362 04	er 1213618 Payment 1425	Date 06/20/25	Vendor IX 100 *** Pa	21362 04/15/25 Nyment Total	CORPUS CHRISTI CATHOL 175.00 175.00	IC CHURCH Status 0.00 0.00	Issued	175.00 175.00
Payment Numb 19921 CK		Date 06/20/25	Vendor IX 100	19921 07/18/25	DUPAGE COUNTY SHERIFF 9,075.00	Status 0.00	Issued	9,075.00

AP255 Date 06/20/25 Time 11:19 Pay Group 1000 GENERAL FUND PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

06/20/25 thru 06/20/25 Payment Date Range

Cash Code 1414 Payment Code CHK Bank 071923909

Vendor	Invoice	Vo	ucher	Auth PL	Due Date Dsc Da	ate Scheduled Amount	Discount Amount	Net Paymen	t Amount
Payment Numbe	er 1213619	Payment Date	06/20/25	Vendor *** Pa	19921 yment Total	DUPAGE COUNTY SHERIFF 9,075.00	Status 0.00	Issued 9	,075.00
Payment Number 11348 116	er 1213620 577	Payment Date	06/20/25	Vendor IX 100 *** Pa	11348 06/16/25 yment Total	DUPAGE FEDERATION ON 2,079.27 2,079.27	HUMAN Status 0.00 0.00	2 2	,079.27 ,079.27
Payment Number 19875 002	er 1213621 201399-00	Payment Date	06/20/25	*** Pa		164.00		Issued	
Payment Number 12904 479		Payment Date	06/20/25	Vendor IX 100 *** Pa	12904 07/13/25 yment Total	ENCON SYSTEMS 1,339.83 1,339.83	Status 0.00 0.00	Issued 1 1	,339.83
Payment Number 12631 060)225	Payment Date		IX 100 *** Pa		FILKINS, JAMES MD JD 6,160.00 6,160.00			,160.00 ,160.00
Payment Numbe 46317 TRV	er 1213624 720250610	Payment Date	06/20/25	Vendor IX 100 *** Pa	46317 06/17/25 yment Total	HOLLEY, KRYSTEN 255.65 255.65	Status 0.00 0.00	Issued	255.65 255.65
Payment Number 36920 LGX	er 1213625 K-INV002810	Payment Date	06/20/25	Vendor IX 100 *** Pa	36920 05/17/25 yment Total	I3LOGIX, INC 6,047.00 6,047.00	Status 0.00 0.00	Issued 6 6	,047.00
Payment Number 10143 121		Payment Date	06/20/25	Vendor IX 100 *** Pa	10143 01/18/25 yment Total	IL ASSOC OF COUNTY CL 1,065.00 1,065.00	ERKS Status 0.00 0.00	1	,065.00
Payment Number 23403 193		Payment Date	06/20/25	IX 100	23403 04/02/25 yment Total	IMBERT INTERNATIONAL 9,288.00 9,288.00			,288.00 ,288.00
Payment Number 32771 TRV	er 1213628 720250115	Payment Date	06/20/25	TV 100	yment Iotai			Issued	352.53 352.53
Payment Number 32770 EXF	er 1213629 220250314	Payment Date	06/20/25	IX 100	32770 05/08/25 yment Total	KACZMAREK, JEAN 736.48 736.48	Status 0.00 0.00	Issued	736.48 736.48
Payment Numbe 10851 785		Payment Date	06/20/25	TX 100	10851 06/28/25 yment Total				133.50 133.50
Payment Numbe 37860 123	er 1213631 3525	Payment Date	06/20/25	Vendor IX 100	37860 07/07/25	MONTERREY SECURITY 21,840.42	Status 0.00	Issued 21	,840.42

AP255 Date 06/20/25 Time 11:19 Pay Group 1000 GENERAL FUND PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

06/20/25 thru 06/20/25 Payment Date Range

Cash Code 1414 Payment Code CHK Bank 071923909

Vendor In	voice	Voucher	Auth PL	Due Date Dsc Dat	e Scheduled Amount	Discount Amount	Net Pay	ment Amount
Payment Number	1213631 Payment	Date 06/20/25		37860 ayment Total	MONTERREY SECURITY 21,840.42		Issued	21,840.42
Payment Number 39145 1834	1213632 Payment	Date 06/20/25	IX 100	06/05/25	NEW TRADITION FUNERAL 13,525.00 13,525.00	Status 0.00 0.00	Issued	13,525.00 13,525.00
Payment Number 10212 127620	1213633 Payment 5	Date 06/20/25	IX 100	10212 06/18/25 ayment Total	NMS LABS 7,775.00 7,775.00	Status 0.00 0.00	Issued	7,775.00 7,775.00
Payment Number 39549 411645 39549 421216		Date 06/20/25	IX 100 IX 100	03/15/25	ODP BUSINESS SOLUTION 41.39 441.83 483.22	S, LLC Status 0.00 0.00 0.00	Issued	41.39 441.83 483.22
Payment Number 46180 1299	1213635 Payment	Date 06/20/25	IX 100	46180 01/22/25 ayment Total	PARTNERSHIP FOR LARGE 150.00 150.00	ELECTION Status 0.00 0.00	Issued	150.00 150.00
Payment Number 42756 I0525_	1213636 Payment 46	Date 06/20/25	IX 100	42756 06/30/25 ayment Total	PGLS LLC 602.89	Status 0.00 0.00	Issued	602.89 602.89
Payment Number 11406 618683	1213637 Payment 71		IX 100	11406 05/05/25 syment Total	QUADIENT, INC 3,015.03 3,015.03	Status 0.00 0.00	Issued	3,015.03 3,015.03
Payment Number 10540 299402	1213638 Payment 8B 2025	Date 06/20/25	IX 100	06/18/25	SECRETARY OF STATE 151.00 151.00	Status 0.00 0.00	Issued	151.00 151.00
Payment Number 10540 954761	1213639 Payment 2025	Date 06/20/25	IX 100	10540 07/17/25 ayment Total	SECRETARY OF STATE 171.00 171.00	Status 0.00 0.00	Issued	171.00 171.00
Payment Number 10540 BU5288	1213640 Payment 4 2025	Date 06/20/25	IX 100	10540 07/17/25 ayment Total	SECRETARY OF STATE 151.00 151.00	Status 0.00 0.00	Issued	151.00 151.00
Payment Number 10540 EH1320	1213641 Payment 7 2025	Date 06/20/25	IX 100		SECRETARY OF STATE 171.00 171.00	Status 0.00 0.00	Issued	171.00 171.00
Payment Number 10540 EH1320	1213642 Payment 8 2025	Date 06/20/25	IX 100		SECRETARY OF STATE 171.00 171.00	Status 0.00 0.00	Issued	171.00 171.00
Payment Number	1213643 Payment	Date 06/20/25	Vendor	10540	SECRETARY OF STATE	Status	Issued	

AP255 Date 06/20/25 Pay Group 1000 GENERAL FUND PAY GROUP USD Page 6
Time 11:19 Bank Account Payment History

Payment Date Range 06/20/25 thru 06/20/25

Cash Code 1414 Bank 071923909 Payment Code CHK Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	te Scheduled Amount	Discount Amount	Net Payment Amount
Payment Nun 10540 E	nber 1213643 Paymer EH13209 2025	nt Date 06/20/25	Vendor IX 100 *** Pa	10540 07/17/25 yment Total	SECRETARY OF STATE 171.00 171.00	Status 0.00 0.00	Issued 171.00 171.00
Payment Nun 10540 E	nber 1213644 Paymer EH13210 2025	nt Date 06/20/25	Vendor IX 100 *** Pa	10540 07/17/25 yment Total	SECRETARY OF STATE 171.00 171.00	Status 0.00 0.00	Issued 171.00 171.00
Payment Num 10750 8	nber 1213645 Paymer 3011092046	nt Date 06/20/25	Vendor IX 100 *** Pa	10750 07/13/25 yment Total	STERICYCLE INC 3,673.35 3,673.35	Status 0.00 0.00	Issued 3,673.35 3,673.35
Payment Num	nber 1213647 Paymer 84855593 053125 CB 84855593 053125 CS 84855593 053125 HR 84855593 053125 JC 84855593 053125 SHRF 84855593 053125 SOA 84855593 053125 TREAS	nt Date 06/20/25	Vendor IX 100 IX 100 IX 100 IX 100 IX 100 IX 100 IX 100 IX 100 *** Pa	11201 06/30/25 06/30/25 06/30/25 06/30/25 06/30/25 06/30/25 06/30/25 yment Total	UNITED STATES POSTAL 5.36 132.34 228.92 770.93 633.99 2,191.01 3,180.18 7,142.73	SERVICE Status	5.36 132.34 228.92 770.93 633.99 2,191.01 3,180.18 7,142.73
Payment Num 35959 8	nber 1213648 Paymer 8645	nt Date 06/20/25	Vendor IX 100 *** Pa	35959 12/12/24 yment Total	VR SYSTEMS, INC 33,090.00 33,090.00	Status 0.00 0.00	Issued 33,090.00 33,090.00
Payment Nun 37738 E	nber 1213649 Paymer EXP20250518	nt Date 06/20/25	Vendor IX 100 *** Pa	37738 06/18/25 yment Total	WHITE, WILLIAM F 220.00 220.00	Status 0.00 0.00	Issued 220.00 220.00
		*** Pa	yment Cod Pa	e CHK Total yment Count	152,691.61 42	0.00	152,691.61
				1414 Total yment Count		0.00	367,947.04
		*** Pay Gr	oup 1000 Pa	USD Total yment Count	367,947.04 52	0.00	367,947.04

AP255 Date: 06/20/25 Time: 11:19 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY Step Nbr: 2

Pay Group: 1100 Cash Code: 1414

Class C Accounts Payable

Payment Date: 062025 -Payment Numbers: Payment Code: 062025

AP255 Date 06/20/25 Time 11:20 Pay Group 1100 GENERAL GOVERNMENT PAY GROUP Bank Account Payment History USD Page

> 06/20/25 thru 06/20/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code ACH

Payment Currency USD

Vendor	Invoice	Voucher .	Auth PL	Due Date Dsc Da	te Scheduled Amount	Discount Amount Net	Payment Amount
Payment Numb 10579 PS 10579 PS	SI789623		Vendor IX 120 IX 120 *** Pa	10579 07/03/25 07/04/25 yment Total	1ST AYD CORPORATION 140.70 89.24 229.94	Status Iss 0.00 0.00 0.00	sued 140.70 89.24 229.94
	oer 535684 Payment 4CM-LJL7-T1VN JK1-KXT7-H67J		Vendor IX 120 IX 120 *** Pa	26753 07/06/25 07/05/25 yment Total	AMAZON CAPITAL SERVIC 60.64 33.41 94.05	ES Status Iss 0.00 0.00 0.00	sued 60.64 33.41 94.05
Payment Numb 44522 65			Vendor IX 120 *** Pa	44522 07/02/25 yment Total	TOSHIBA AMERICA BUSIN 225.28 225.28	ESS Status Iss 0.00 0.00	sued 225.28 225.28
		*** Pa		le ACH Total yment Count	549.27 3	0.00	549.27

AP255 Date 06/20/25 Time 11:20 Pay Group 1100 GENERAL GOVERNMENT PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

06/20/25 thru 06/20/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code CHK

Vendor Invoice	Voucher	Auth PL D	oue Date Dsc Date	Scheduled Amount	Discount Amount	Net Payment Amo	ount
Payment Number 1213508 1 12943 2291913 12943 2296365	_	Vendor IX 120 0 IX 120 0 *** Paym	12943 AN 6/21/25 7/03/25 Lent Total	NIMALS DESERVING OF 400.00 400.00 800.00	PROPER Status 0.00 0.00 0.00	400.	.00
Payment Number 1213509 1 10674 5516473071	Payment Date 06/20/25	Vendor IX 120 0 *** Paym	10674 A1 6/30/25 ment Total	IRGAS USA 25.65 25.65	Status 0.00 0.00		.65 .65
Payment Number 1213510 1 38086 TRV20250601	Payment Date 06/20/25	Vendor IX 120 0 *** Paym	38086 AM 6/16/25 ment Total	NDERSON, MADALYN 378.04 378.04	Status 0.00 0.00	Issued 378.	
Payment Number 1213511 1 46321 COM-ALT-24-00387	7	IX 170 0 *** Paym		SPEN GROUP 200.00 200.00		200.	
Payment Number 1213512 1 10009 287305363874X0608 10009 287305618495X0608	Payment Date 06/20/25 32025 32025	Vendor IX 170 0 IX 120 0 *** Paym	10009 AT 6/30/25 6/30/25 ent Total	T&T MOBILITY 598.20 555.94 1,154.14	Status 0.00 0.00 0.00	598.	.94
Payment Number 1213513 1 46322 RES-ACC-24-00366	Payment Date 06/20/25 4	Vendor IX 170 0 *** Paym	46322 CF 6/17/25 ment Total	HESTER, DAWN 100.00 100.00	Status 0.00 0.00	100.	
Payment Number 1213514 1 11863 4233044873	Payment Date 06/20/25	IX 120 0	11863 CI 7/09/25 ment Total	INTAS #344 45.05 45.05	Status 0.00 0.00	Issued 45.	
Payment Number 1213515 1 46323 RES-RRR-24-00389	7	Vendor IX 170 0 *** Paym	6/17/25	ELINE CONSTRUCTION I 100.00 100.00			
Payment Number 1213516 1 46324 RES-ACC-25-000619	Payment Date 06/20/25	Vendor IX 170 0 *** Paym		LLIS, ADAM 200.00 200.00			
Payment Number 1213517 1 46325 RES-RRR-25-00135	7	Vendor IX 170 0 *** Paym	46325 ES 6/17/25 ent Total	SPARZA, ISMAEL 100.00 100.00	Status 0.00 0.00	100.	
Payment Number 1213518 1 46326 RES-ALT-25-000346	Payment Date 06/20/25	Vendor IX 170 0 *** Paym	46326 FI 6/17/25 ent Total	LOW CHICAGO INC 100.00 100.00	Status 0.00 0.00		
Payment Number 1213519 1 46327 RES-ACC-24-00064	Payment Date 06/20/25 7	Vendor IX 170 0	46327 GF 6/17/25	RAMS, RUSSELL 100.00	Status 0.00	Issued 100.	.00

AP255 Date 06/20/25 Time 11:20 Pay Group 1100 GENERAL GOVERNMENT PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

Payment Date Range 06/20/25 thru 06/20/25

Cash Code 1414 Bank 071923909

Payment Code CHK

Payment Number

1213530 Payment Date 06/20/25 Vendor

	01111								
Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	e Scheduled Amount	Discount	Amount	Net Pay	ment Amount
Payment Numbe	er 1213519 Payment	Date 06/20/25	Vendor *** Pa	46327 ayment Total	GRAMS, RUSSELL 100.00		Status 0.00	Issued	100.00
Payment Number 11778 253 11778 253	er 1213520 Payment 3575186 3575189	Date 06/20/25	Vendor IX 120 IX 120 *** Pa	11778 07/11/25 07/11/25 ayment Total	HILL'S PET NUTRITION 658.70 304.00 962.70	SALES INC	Status 0.00 0.00 0.00	Issued	658.70 304.00 962.70
42785 SAG			IX 105 *** Pa	07/11/25 ayment Total	30,000.00 30,000.00		0.00		30,000.00
	er 1213522 Payment S-ACC-25-000536								
	er 1213523 Payment S-RRR-25-001105							Issued	100.00 100.00
Payment Numbe 46329 RES	er 1213524 Payment S-ACC-24-003552	Date 06/20/25	Vendor IX 170 *** Pa	46329 06/17/25 ayment Total	MURPHY LANDSCAPE & D 100.00 100.00	ESIGN	Status 0.00 0.00		100.00
	er 1213525 Payment 573852								
Payment Numbe 46330 RES	er 1213526 Payment S-ACC-25-001190P	Date 06/20/25	Vendor IX 170 *** Pa	46330 06/17/25 ayment Total	NAKIS, ADAM 400.00 400.00		Status 0.00 0.00	Issued	400.00 400.00
Payment Number 15756 RES	er 1213527 Payment S-DEM-25-000375	Date 06/20/25	Vendor IX 170 *** Pa	15756 07/16/25 ayment Total	PHOENIX RESTORATION 250.00 250.00	INC	Status 0.00 0.00	Issued	250.00 250.00
Payment Numbe 46331 CON 46331 CON 46331 CON 46331 CON	er 1213528 Payment M-ROOF-25-000940 M-ROOF-25-000942 M-ROOF-25-000943 M-ROOF-25-000944 M-ROOF-25-000945	Date 06/20/25	Vendor IX 170 IX 170 IX 170 IX 170 IX 170 IX 170	46331 06/17/25 07/17/25 07/17/25 06/17/25 06/17/25 ayment Total	R3 SERVICE LLC 200.00 200.00 200.00 200.00 200.00 1,000.00		Status 0.00 0.00 0.00 0.00 0.00	Issued	200.00 200.00 200.00 200.00 200.00 1,000.00
Payment Number 46332 RES	er 1213529 Payment S-ACC-24-003639	Date 06/20/25	Vendor IX 170 *** Pa	46332 06/17/25 ayment Total	RICE, ROSS 100.00 100.00		Status 0.00 0.00	Issued	100.00

46333

SAHARA, HALINA

Status Issued

AP255 Date 06/20/25 Pay Group 1100 GENERAL GOVERNMENT PAY GROUP USD Page Time 11:20 Bank Account Payment History

Payment Date Range 06/20/25 thru 06/20/25

Cash Code 1414 Bank 071923909 Payment Code CHK

Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Da	te Scheduled Amount	Discount Amount	Net Payr	ment Amount
Payment Numb 46333 RI	oer 1213530 Payment ES-ACC-24-000748	Date 06/20/25	Vendor IX 170 *** Pa	46333 06/17/25 ayment Total	SAHARA, HALINA 100.00 100.00	Status 0.00 0.00	Issued	100.00
Payment Numb 41021 RI	oer 1213531 Payment ES-RRR-25-000484	Date 06/20/25	Vendor IX 170 *** Pa	41021 06/17/25 ayment Total	SARGON CONSTRUCTION 100.00 100.00	Status 0.00 0.00	Issued	100.00 100.00
Payment Numb 26503 70	per 1213532 Payment 08703	Date 06/20/25	Vendor IX 120 *** Pa	26503 06/15/25 ayment Total	STATE SUPPLY COMPANY 82.64 82.64	Status 0.00 0.00	Issued	82.64 82.64
Payment Numb 11201 34	ber 1213533 Payment 4855593 053125 B&Z	Date 06/20/25	Vendor IX 170 *** Pa	11201 06/30/25 ayment Total	UNITED STATES POSTAL 1,486.23 1,486.23	SERVICE Status 0.00 0.00	Issued	1,486.23 1,486.23
Payment Numb 10068 59	oer 1213534 Payment 934874-0				166.20 166.20			166.20 166.20
Payment Numb 28304 12	oer 1213535 Payment 2511912	Date 06/20/25	Vendor IX 120 *** Pa	28304 05/21/25 ayment Total	WESTLAKE HARDWARE 186.92 186.92	Status 0.00 0.00	Issued	186.92 186.92
Payment Numb 46131 89	oer 1213536 Payment 9084				WOOD DALE PHARMACY LL 366.99 366.99			
Payment Numb 26603 90	oer 1213537 Payment 028131242	Date 06/20/25	Vendor IX 120 *** Pa	26603 07/10/25 ayment Total	ZOETIS US LLC 861.87 861.87	Status 0.00 0.00		861.87 861.87
		*** Pa	ayment Cod Pa	de CHK Total Ayment Count	40,222.23 30	0.00		40,222.23
		*** Ca	ash Code Pa	1414 Total ayment Count	40,771.50 33	0.00		40,771.50
				USD Total nyment Count		0.00		40,771.50

AP255 Date: 06/20/25 Time: 11:20 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY Step Nbr: 3

Pay Group: 1200 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062025 -Payment Numbers: Payment Code: 062025

AP255 Date 06/20/25 Pay Group 1200 HEALTH AND WELFARE PAY GROUP USD Page 1
Time 11:20 Bank Account Payment History

Payment Date Range 06/20/25 thru 06/20/25

Cash Code 1414 Bank 071923909 Payment Currency USD Payment Code ACH

Vendor	Invo	ice		V0	oucher	Auth PL	Due Date 1	Dsc Date	Scheduled Amount	Discount Amount	Net Payment Amount
Payment Numbe 10667 AE4		535686	Payment	Date	06/20/25	IX 100	10667 07/04/25 yment Tota		W GOVERNMENT INC 1,194.30 1,194.30	Status 0.00 0.00	Issued 1,194.30 1,194.30
					*** P		e ACH Tota yment Coun		1,194.30 1	0.00	1,194.30

AP255 Date 06/20/25 Time 11:20 Pay Group 1200 HEALTH AND WELFARE PAY GROUP Bank Account Payment History USD Page

> 06/20/25 thru 06/20/25 Payment Date Range

Cash Code 1414 Payment Code CHK

Bank 071923909 Payment Currency USD

Vendor I	nvoice	Voucher	Auth PL	Due Date Dsc Da	ite Scheduled	Amount Discount	Amount 1	Net Paym	nent Amount
						351.00 00			351.00 351.00
Payment Number 10008 63066	1213539 Payment 5656306 2025	Date 06/20/25	Vendor IX 100 *** Pa	10008 07/04/25 yment Total	AT&T 440.	440.95 95	Status 0.00 0.00	Issued	440.95 440.95
Payment Number 10009 28731	1213540 Payment 0519682X06082025	Date 06/20/25	Vendor IX 100 *** Pa	10009 06/30/25 Lyment Total	AT&T MOBILITY 1, 1,299.	7 299.91 .91	Status 0.00 0.00	Issued	1,299.91 1,299.91
Payment Number 44693 00000 44693 00000	1213541 Payment 22577 22627	Date 06/20/25	Vendor IX 100 IX 100 *** Pa	44693 07/06/25 07/13/25 yment Total	MCMAHON FOOD	CORPORATION 506.49 506.49 98	Status 0.00 0.00 0.00	Issued	506.49 506.49 1,012.98
						19.04 .62		Issued	77.58 19.04 96.62
Payment Number 29088 46558	1213543 Payment 12461	Date 06/20/25	Vendor IX 100 *** Pa	29088 07/17/25 Lyment Total	THE AMERICAN 759.	BOTTLING COMPANY 759.00	Status 0.00 0.00		759.00 759.00
Payment Number 14000 57881	1213544 Payment	Date 06/20/25	Vendor IX 100 *** Pa	14000 06/13/25 Lyment Total	THE FITNESS (CONNECTION 323.42 42	Status 0.00 0.00	Issued	323.42 323.42
Payment Number 11201 34855	1213545 Payment 593 053125 DCC	Date 06/20/25	Vendor IX 100 *** Pa	11201 06/30/25 Lyment Total	UNITED STATES 91.	S POSTAL SERVICE 91.11 .11	Status 0.00 0.00	Issued	91.11 91.11
Payment Number 41790 40168	1213546 Payment 497-13	Date 06/20/25	Vendor IX 100 *** Pa	41790 04/23/25 Lyment Total	WSP USA BUILD 3, 3,410.	DINGS INC JPM 410.00 00	Status 0.00 0.00	Issued	3,410.00 3,410.00
		*** P	ayment Cod Pa	le CHK Total Lyment Count	7,784. 9	.99	0.00		7,784.99
				1414 Total Lyment Count			0.00		8,979.29
				USD Total Lyment Count			0.00		8,979.29

AP255 Date: 06/20/25 Time: 11:20 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 4

Pay Group: 1300 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062025 -Payment Numbers: Payment Code: 062025

AP255 Date 06/20/25 Pay Group 1300 PUBLIC SAFETY PAY GROUP USD Page 1 Bank Account Payment History

Payment Date Range 06/20/25 thru 06/20/25 Payment Currency USD

Payment Count

Cash Code 1414 Bank 071923909

Payment Code ACH

Vendor	Invoi	ce 		V(oucher	Auth	PL 	Due Date Dsc I	Date	Scheduled Amount	Discount Ar	mount	Net Payment	Amount
Payment Numbe 10544 853 10544 853	705	535687	Payment	Date	06/20/25	IX I	ndor 120 120 ** Pa	10544 06/18/25 06/18/25 yment Total	TR	ADEMARK PRODUCTS IN 22.30 44.60 66.90		Status 0.00 0.00	Issued	22.30 44.60 66.90
					*** D;	avment	t Cod	e ACH Total		66 90	(0.00		66 90

AP255 Date 06/20/25 Pay Group 1300 PUBLIC SAFETY PAY GROUP USD Page Time 11:20 Bank Account Payment History

Payment Currency USD

22.10

22.10

1,442.31

1,509.21

1,509.21

6

0.00

0.00

0.00

0.00

0.00

Payment Date Range 06/20/25 thru 06/20/25

IX 120 06/30/25

*** Payment Code CHK Total

*** Cash Code 1414 Total

*** Pay Group 1300 USD Total

*** Payment Total

Payment Count

Payment Count

Payment Count

Cash Code 1414 Bank 071923909

11201 34855593 053125 COR

Payment Code CHK

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc D	Date Scheduled Amount Dis	scount Amount Ne	et Payment Amount
Payment Number		Date 06/20/25	IX 120	10379 06/18/25 yment Total	ACTION SCREEN PRINT INC 265.43 265.43	Status Is 0.00 0.00	265.43
Payment Number 10009 287	r 1213548 Payment 352291866X06082025	Date 06/20/25	IX 120	10009 06/18/25 yment Total	AT&T MOBILITY 806.53 806.53	Status Is 0.00 0.00	806.53
Payment Number 39549 427 39549 427		Date 06/20/25	IX 120 IX 120	39549 06/18/25 06/18/25 yment Total	ODP BUSINESS SOLUTIONS, I 50.98 10.37 61.35	LLC Status Is 0.00 0.00 0.00	50.98 10.37 61.35
Payment Number 11145 241	r 1213550 Payment 6681	Date 06/20/25	IX 120	11145 06/18/25 yment Total	RAY O'HERRON CO INC 162.10 162.10	Status Is 0.00 0.00	162.10 162.10
Payment Number 10750 801	r 1213551 Payment 0970071	Date 06/20/25	IX 120	10750 06/18/25 yment Total	STERICYCLE COMM SOLUTIONS 124.80 124.80	S Status Is 0.00 0.00	124.80
Payment Number	r 1213552 Payment	Date 06/20/25	Vendor	11201	UNITED STATES POSTAL SERV	/ICE Status Is	ssued

22.10

22.10

1,442.31

1,509.21

1,509.21

AP255 Date: 06/20/25 Time: 11:20 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 5

Pay Group: 1400 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062025 -Payment Numbers: Payment Code: 062025

AP255 Date 06/20/25 Time 11:20 Pay Group 1400 JUDICIAL PAY GROUP Bank Account Payment History

USD

			Payment Date Range	06/20/25	thru	06/20/25	
Cash Code 1414	Bank	071923909	_			Payment Currency	USD
Payment Code ACH							

Vendor	Invoice	Voucher	Auth PL I	Due Date Dsc Dat	te Scheduled Amount	Discount Amount Net Pa	yment Amount
Payment Numbe 26753 196	r 535688 Pay T-YDHY-XYLR	ment Date 06/20/25		26753 07/17/25 ment Total	AMAZON CAPITAL SERVIC 7.25 7.25	ES Status Issued 0.00 0.00	7.25 7.25
Payment Numbe 10932 251		ment Date 06/20/25		10932 07/17/25 ment Total	CONSCISYS CORPORATION 91,667.00 91,667.00	Status Issued 0.00 0.00	91,667.00 91,667.00
		*** Pa	yment Code Payı	ACH Total ment Count	91,674.25 2	0.00	91,674.25
		*** Ca		414 Total ment Count	91,674.25 2	0.00	91,674.25
		*** Pay Gr	_	SD Total ment Count	91,674.25 2	0.00	91,674.25

AP255 Date: 06/20/25 Time: 11:20 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 6

Pay Group: 1500 Cash Code: 1414

Class C Accounts Payable

Payment Date: 062025 -Payment Numbers: Payment Code: 062025

AP255 Date 06/20/25 Time 11:21 Pay Group 1500 HWY STREETS & BRIDGES PAY GRP Bank Account Payment History USD Page

> 06/20/25 thru 06/20/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code ACH

Payment Currency USD

Vendor Invo	oice Vouc	er Auth PL	Due Date Dsc Da	te Scheduled Amount	Discount Amount Net Pa	ayment Amount
Payment Number 11047 1200710	535690 Payment Date 06 768-12	IX 100	11047 05/08/25 ayment Total	HDR ENGINEERING, INC 1,180.42 1,180.42	Status Issued 0.00 0.00	1,180.42 1,180.42
Payment Number 10843 28422	535691 Payment Date 06	IX 100	10843 07/03/25 ayment Total	K-FIVE CONSTRUCTION C 3,090.42 3,090.42	ORP Status Issued 0.00 0.00	3,090.42 3,090.42
Payment Number 11199 257726	535692 Payment Date 06	IX 100	11199 07/14/25 ayment Total	PLOTE CONSTRUCTION IN 10,804.73 10,804.73	C D/B/A Status Issued 0.00 0.00	10,804.73 10,804.73
Payment Number 44522 6577977	535693 Payment Date 06	IX 100	44522 07/02/25 ayment Total	TOSHIBA AMERICA BUSIN 708.62 708.62	Status Issued 0.00 0.00	d 708.62 708.62
		4	de ACH Total ayment Count	15,784.19 4	0.00	15,784.19

AP255 Date 06/20/25 Time 11:21 Pay Group 1500 HWY STREETS & BRIDGES PAY GRP USD Page Bank Account Payment History

> 06/20/25 thru 06/20/25 Payment Date Range Payment Currency USD

Cash Code 1414 Bank 071923909

Payment Code CHK

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	e Scheduled Amount	Discount Amount	Net Payment Amount
10008 6302	1213553 Payment 250749406 2025 554853506 2025	Date 06/20/25	Vendor IX 100 IX 100 *** Pa	10008 07/01/25 07/04/25 ayment Total	AT&T 51.06 48.03 99.09	Status 0.00 0.00 0.00	Issued 51.06 48.03 99.09
Payment Number 10023 4126 10023 6853 10023 6853 10023 6853	1213554 Payment 5012222 051625 3352222 011425 3352222 041625 3352222 051625	. Date 06/20/25	Vendor IX 100 IX 100 IX 100 IX 100 *** Pa	10023 06/15/25 02/13/25 05/16/25 06/15/25 ayment Total	COM ED 336.07 945.97 1,010.72 1,108.98 3,401.74	Status 0.00 0.00 0.00 0.00 0.00	Issued 336.07 945.97 1,010.72 1,108.98 3,401.74
10023 0272	1213555 Payment 2242000 061225 0086000 061625	Date 06/20/25	Vendor IX 100 IX 100 *** Pa	10023 07/12/25 07/16/25 ayment Total	COM ED 218.66 49.58 268.24	Status 0.00 0.00 0.00	Issued 218.66 49.58 268.24
Payment Number 10030 8503	1213556 Payment	Date 06/20/25	Vendor IX 100 *** Pa	10030 07/12/25 Ayment Total	DUKANE ASPHALT COMPAN 7,280.65 7,280.65	Y Status 0.00 0.00	Issued 7,280.65 7,280.65
Payment Number 12084 3-20 12084 3	1213557 Payment 0895 0902 0904 0912 0930 0931 0933 0945 0946 0953	Date 06/20/25	Vendor IX 100	12084 06/27/25 06/27/25 06/27/25 06/26/25 06/28/25 06/28/25 06/28/25 06/28/25 06/29/25 06/29/25 07/03/25 07/04/25 07/04/25 ayment Total	HAGGERTY FORD 403.34 293.01 293.01 259.64 114.87 44.23 6.38 390.63 114.35 17.08 62.73 78.88 12.49 2,090.64	Status	1ssued 403.34 293.01 293.01 259.64 114.87 44.23 6.38 390.63 114.35 17.08 62.73 78.88 12.49 2,090.64
Payment Number 45312 GB-3	1213558 Payment 3188	Date 06/20/25	Vendor IX 100 *** Pa	45312 06/19/25 ayment Total	IMPERIAL LUBES & SUPP 1,312.30 1,312.30	LY Status 0.00 0.00	1,312.30 1,312.30
Payment Number 12101 871	c 1213559 Payment 702912	Date 06/20/25	Vendor IX 100 *** Pa	12101 07/01/25 ayment Total	KONE 520.05	Status 0.00 0.00	Issued 520.05 520.05
Payment Number 26307 0057	r 1213560 Payment 7946	Date 06/20/25	Vendor IX 100 *** Pa	26307 07/16/25 ayment Total	MDSOLUTIONS INC 47,232.00 47,232.00	Status 0.00 0.00	Issued 47,232.00 47,232.00

AP255 Date 06/20/25 Pay Group 1500 HWY STREETS & BRIDGES PAY GRP USD Page Time 11:21 Bank Account Payment History

Payment Date Range 06/20/25 thru 06/20/25 Payment Currency USD

Cash Code 1414 Bank 071923909 Payment Code CHK

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	te Scheduled Amount	Discount Amount	Net Payment Amount
Payment Number 10057 5727	1213561 Payment 3210005 060225	Date 06/20/25	IX 100	10057 07/02/25 Lyment Total	NICOR GAS 366.87 366.87	Status 0.00 0.00	Issued 366.87 366.87
Payment Number 10096 X101	1213562 Payment 692854:01	Date 06/20/25	IX 100	10096 07/03/25 yment Total	PATSON INC 1,364.10 1,364.10	Status 0.00 0.00	Issued 1,364.10 1,364.10
Payment Number 10363 1013		Date 06/20/25	IX 100	10363 06/18/25 Lyment Total	PRIORITY PRODUCTS INC 275.20 275.20	Status 0.00 0.00	Issued 275.20 275.20
Payment Number 45132 P041		Date 06/20/25	IX 100	45132 06/22/25 yment Total	FEDERAL SIGNAL CORPOR 103.00 103.00	ATION Status 0.00 0.00	Issued 103.00 103.00
Payment Number 11201 3485	1213565 Payment 5593 053125 DOT	Date 06/20/25	IX 100	11201 06/30/25 Lyment Total	UNITED STATES POSTAL 64.55	SERVICE Status 0.00 0.00	Issued 64.55 64.55
Payment Number 27170 8920	1213566 Payment 07097	Date 06/20/25	IX 100	27170 07/05/25 yment Total	VCNA PRAIRIE LLC 996.25 996.25	Status 0.00 0.00	Issued 996.25 996.25
Payment Number 10878 PN42		Date 06/20/25	IX 100	10878 06/20/25 yment Total	VERMEER-ILLINOIS INC 200.00 200.00	Status 0.00 0.00	Issued 200.00 200.00
Payment Number 10072 N692		Date 06/20/25	IX 100	10072 07/03/25 Lyment Total	WEST SIDE TRACTOR SAI 51.69 51.69	ES Status 0.00 0.00	Issued 51.69 51.69
		*** P		le CHK Total Lyment Count	65,626.37 16	0.00	65,626.37
		*** C		1414 Total	81,410.56 20	0.00	81,410.56
		*** Pay G		USD Total yment Count	81,410.56 20	0.00	81,410.56

AP255 Date: 06/20/25 Time: 11:21 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY Step Nbr: 7

Pay Group: 1600 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062025 -Payment Numbers: Payment Code: 062025

AP255 Date 06/20/25 Time 11:21 Pay Group 1600 CONSERV & RECREATION PAY GROUP USD Bank Account Payment History

> 06/20/25 thru 06/20/25 Payment Date Range

Cash Code 1414 Payment Code CHK Bank 071923909

Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Da	ate Scheduled Amount	Discount Amount Net	Payment Amount
Payment Nu 10008	mber 1213569 Payment 7955362014 2025	Date 06/20/25	Vendor IX 100 *** Pa	10008 07/01/25 Lyment Total	AT&T 1,895.11 1,895.11	Status Issu 0.00 0.00	ned 1,895.11 1,895.11
10008	mber 1213570 Payment 630295858605 2025 630295858606 2025	Date 06/20/25	Vendor IX 100 IX 100 *** Pa	10008 06/03/25 07/04/25 yment Total	AT&T 56.50 56.50 113.00	Status Issu 0.00 0.00 0.00	56.50 56.50 113.00
Payment Nu 10008	mber 1213571 Payment 0534711873001 060325	Date 06/20/25	Vendor IX 100 *** Pa	10008 07/03/25 Lyment Total	AT&T 49.63 49.63	Status Issu 0.00 0.00	49.63 49.63
Payment Nu 10023 10023 10023 10023 10023	mbor 1213572 Daymont		Vendor IX 100	10023 07/03/25 07/03/25 06/21/25 06/22/25 07/03/25 07/03/25 Lyment Total	COM ED 43.88 86.47 31.69 547.88 91.81 26.98 828.71	Status Issu 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0	43.88 86.47 31.69 547.88 91.81 26.98 828.71
Payment Nu 43318 43318	mber 1213573 Payment 7-6829 8-6829	Date 06/20/25	Vendor IX 100 IX 100 *** Pa	43318 07/11/25 07/12/25 Lyment Total	INDEPENDENT MECHANICA 309,375.00 123,879.60 433,254.60	L Status Issu 0.00 0.00 0.00	309,375.00 123,879.60 433,254.60
Payment Nu 11706	mber 1213574 Payment 0201280-IN	Date 06/20/25	Vendor IX 100 *** Pa	11706 04/12/25 Lyment Total	TAMELING INDUSTRIES I 63.28	NC Status Issu 0.00 0.00	ed 63.28 63.28
		*** Pa	ayment Cod Pa	le CHK Total Lyment Count	436,204.33 6	0.00	436,204.33
		*** Ca	ash Code Pa	1414 Total yment Count	436,204.33 6	0.00	436,204.33
		*** Pay G	roup 1600 Pa	USD Total yment Count	436,204.33	0.00	436,204.33

AP255 Date: 06/20/25 Time: 11:21 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 8

Pay Group: 2000 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062025 -Payment Numbers: Payment Code: 062025

AP255 Date 06/20/25 Pay Group 2000 PUBLIC WORKS PAY GROUP USD Page Time 11:21 Bank Account Payment History

Payment Date Range 06/20/25 thru 06/20/25

Cash Code 1414 Bank 071923909 Payment Currency USD Payment Code ACH

Vendor	Invoice	Voucher 2	Auth PL	Due Date Dsc Da	te Scheduled	Amount	Discount Amount	Net Payment	Amount
Payment Number 10716 849		nt Date 06/20/25		10716 05/28/25 yment Total	FLEET SAFETY	150.23	Status 0.00 0.00		150.23 150.23
		*** Pa		e ACH Total yment Count	150 1	.23	0.00		150.23

AP255 Date 06/20/25 Time 11:21 Pay Group 2000 PUBLIC WORKS PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

06/20/25 thru 06/20/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code CHK

Vendor	Invoice	Voucher	Auth PL Due I	Date Dsc Date	Scheduled Amount D	iscount Amount Net Pa	avment Amount
Payment Number 10309 HT88 10309 HT91	1213575 Payment				CLAS BOBCAT LLC 238.64 325.28 563.92		1 238.64
Payment Number 26212 BFF-	1213576 Payment 086183	Date 06/20/25	Vendor 26 IX 100 07/12 *** Payment	6212 BI 2/25 Total	AINS FARM & FLEET 150.00 150.00	Status Issued 0.00 0.00	150.00 150.00
Payment Number 10023 6332	1213577 Payment 192000 052825	Date 06/20/25	Vendor 10 IX 100 06/2 *** Payment	0023 CC 7/25 Total	DM ED 13,078.64 13,078.64	Status Issued 0.00 0.00	13,078.64 13,078.64
Payment Number 10023 1914	1213578 Payment 936000 060925		Vendor 10 IX 100 07/09 *** Payment		DM ED 2,371.78 2,371.78	Status Issued 0.00 0.00	2,371.78 2,371.78
Payment Number 12415 9999		Date 06/20/25	Vendor 12 IX 100 05/29 *** Payment	9/25	ERGUSON ENTERPRISES IN 189.45 189.45	C #1550 Status Issued 0.00 0.00	
Payment Number 46334 0617		Date 06/20/25	Vendor 46 IX 100 06/1 *** Payment	6334 GU 7/25 Total	TTIC, CINDY 97.19 97.19		97.19 97.19
Payment Number 12234 7099	1213581 Payment 860	Date 06/20/25	Vendor 12 IX 100 07/19 *** Payment	5/25	WKINS INC 30.00 30.00	Status Issued 0.00 0.00	30.00 30.00
Payment Number 11470 3439 11470 3456		. Date 06/20/25	Vendor 1: IX 100 05/2: IX 100 06/1: *** Payment	5/25 2/25	PDRAULIC SUPPLY COMPAN 82.02 81.13 163.15	0.00	
Payment Number 12373 LMK3		Date 06/20/25	Vendor 12 IX 100 07/02 *** Payment	2373 LM 2/25 Total	NK TECHNOLOGIES 656.25 656.25	Status Issued 0.00 0.00	d 656.25 656.25
Payment Number 27225 MNS3	1213584 Payment 27030	Date 06/20/25	Vendor 2' IX 100 07/13 *** Payment	3/25	ANSFIELD POWER AND GAS 7,522.10 7,522.10	0.00	
Payment Number 46339 0618		Date 06/20/25	Vendor 46 IX 100 06/18 *** Payment	6339 PE 8/25 Total	ETRY, MARGARET E. 361.54 361.54	Status Issued 0.00 0.00	
Payment Number 12422 SPI2	1213586 Payment 1088821	Date 06/20/25	Vendor 12 IX 100 06/14	2422 RU 4/25	JSSO POWER EQUIPMENT 55.98	Status Issued 0.00	fi 55.98

AP255 Date 06/20/25 Time 11:21 Pay Group 2000 PUBLIC WORKS PAY GROUP Bank Account Payment History

USD

06/20/25 thru 06/20/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code CHK

Payment Currency USD

Vendor In	nvoice 	Voucher	Auth PL	Due Date I	Osc Date	Scheduled Amount	Discount Amount	Net Payment Amount
Payment Number	1213586 Payment I	Date 06/20/25	Vendor *** Pay	12422 ment Total		SSO POWER EQUIPMENT 55.98	Status 0.00	Issued 55.98
		*** Pa	yment Code Pay	e CHK Tota ment Coun		25,240.00 12	0.00	25,240.00
		*** Ca		.414 Total		25,390.23 13	0.00	25,390.23
		*** Pay Gr	-	JSD Total ment Coun		25,390.23 13	0.00	25,390.23

AP255 Date: 06/20/25 Time: 11:21 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 9

Pay Group: 5000 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062025 -Payment Numbers: Payment Code: 062025

AP255 Date 06/20/25 Time 11:22 Pay Group 5000 DUPAGE COUNTY GRANTS PAY GROUP USD Bank Account Payment History

> 06/20/25 thru 06/20/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code ACH

Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	te Scheduled Amount	Discount Amount	Net Payment Amount
26753 160 26753 1K	er 535695 Payment GY-6H1Y-3C6Y TT-QTNT-VVHG VN-RRVK-36VD		IX 200 IX 202 IX 202 *** Pa	07/17/25 07/13/25 07/17/25 yment Total	47.75 86.08 161.84	0.00 0.00 0.00 0.00	28.01 47.75 86.08 161.84
	er 535696 Payment V20250505	Date 06/20/25	Vendor IX 202 *** Pa	22549 06/17/25 yment Total	CARNATE, AUDREY 118.53 118.53	Status 0.00 0.00	Issued 118.53 118.53
Payment Number 17853 MI	er 535697 Payment L20250513	Date 06/20/25	Vendor IX 101 *** Pa	17853 06/17/25 yment Total	CATHER, JANET 21.14 21.14	Status 0.00 0.00	Issued 21.14 21.14
Payment Number 23461 07 23461 ES	er 535698 Payment 53280 MIDAS 24-05#14	Date 06/20/25	Vendor IX 202 IX 103 *** Pa	23461 06/16/25 06/18/25 yment Total	DUPAGE COUNTY COMMUNIT 1,000.00 2,542.00 3,542.00	TY Status 0.00 0.00 0.00	Issued 1,000.00 2,542.00 3,542.00
Payment Number 14166 46	er 535699 Payment 751	Date 06/20/25	Vendor IX 100 *** Pa	14166 06/08/25 yment Total	HEALTHY AIR HEATING & 18,679.56 18,679.56	AIR INC Status 0.00 0.00	Issued 18,679.56 18,679.56
Payment Number 11821 TR	er 535700 Payment EASURY-A2-LF010	Date 06/20/25	Vendor IX 110 *** Pa	11821 07/16/25 yment Total	LOAVES AND FISHES COM 142,005.01 142,005.01	MUNITY Status 0.00 0.00	Issued 142,005.01 142,005.01
Payment Number 11548 22		Date 06/20/25	Vendor IX 103 *** Pa	11548 06/30/25 yment Total	OPTIMUM MANAGEMENT RE. 5,040.00 5,040.00	SOURCES Status 0.00 0.00	Issued 5,040.00 5,040.00
Payment Number 17827 EX	er 535702 Payment P20250608	Date 06/20/25	Vendor IX 105 *** Pa	17827 07/08/25 yment Total	SCHVACH, LISA 1,492.98 1,492.98	Status 0.00 0.00	Issued 1,492.98 1,492.98
Payment Number 43038 MI	er 535703 Payment L20250501	Date 06/20/25	Vendor IX 202 *** Pa	43038 06/18/25 yment Total	SMITH, MARCENIA 59.92 59.92	Status 0.00 0.00	Issued 59.92 59.92
		*** Pa	yment Cod Pa	e ACH Total yment Count	171,120.98 9	0.00	171,120.98

AP255 Date 06/20/25 Time 11:22

Pay Group 5000 DUPAGE COUNTY GRANTS PAY GROUP USD Bank Account Payment History

06/20/25 thru 06/20/25 Payment Date Range

Cash Code 1414 Payment Code CHK Bank 071923909

Payment Currency USD

Vendor Inv	voice Voucher	Auth PL Due Date Dsc I	Date Scheduled Amount Discount	Amount Net Pay	ment Amount
Payment Number 40972 RENT-JU		25 Vendor 40972 IX 105 07/17/25 *** Payment Total	2525 CABOT DRIVE LLC 26,538.52 26,538.52	Status Issued 0.00	26,538.52 26,538.52
Payment Number 43804 215772	1213588 Payment Date 06/20/	25 Vendor 43804 IX 209 07/17/25 *** Payment Total	ALOHA DOCUMENT SERVICES, INC 260.00	0.00	260.00 260.00
Payment Number 10959 239181		25 Vendor 10959 IX 101 06/18/25 *** Payment Total	CITY OF NAPERVILLE 5,197.00 5,197.00	Status Issued 0.00	5,197.00 5,197.00
Payment Number 10023 239182	1213590 Payment Date 06/20/	25 Vendor 10023 IX 101 07/18/25 *** Payment Total	COM ED - LIHEAP PAYMENTS 66,258.00 66,258.00	Status Issued 0.00	66,258.00 66,258.00
Payment Number 10811 DHS-176	1213591 Payment Date 06/20/50-25-2530		COMMUNITY HOUSING ADVOCACY & 1,000.00 1,000.00	Status Issued 0.00	1,000.00
Payment Number 10811 DHS-176	1213592 Payment Date 06/20/50-25-2531	25 Vendor 10811 IX 209 06/17/25 *** Payment Total	COMMUNITY HOUSING ADVOCACY & 750.00	Status Issued 0.00	750.00 750.00
Payment Number 20061 3204*17	1213593 Payment Date 06/20/ 734090-N-1	25 Vendor 20061 IX 101 06/17/25 *** Payment Total	CORT BUSINESS SERVICES CORP. 730.00	Status Issued 0.00	730.00 730.00
Payment Number 18599 TRV2025	1213594 Payment Date 06/20/ 50514	25 Vendor 18599 IX 208 06/22/25 *** Payment Total	DONALD, SHARON 360.20 360.20	Status Issued 0.00	360.20 360.20
Payment Number 43042 MIL2025	1213595 Payment Date 06/20/ 50502	25 Vendor 43042 IX 202 06/17/25 *** Payment Total	DURR, CIERA 47.39 47.39	Status Issued 0.00	47.39 47.39
Payment Number 14114 0617202	1213596 Payment Date 06/20/ 25-01	25 Vendor 14114 IX 101 07/17/25 *** Payment Total	CS FAMILY PHARMACY INC 1,243.00 1,243.00	Status Issued 0.00	1,243.00 1,243.00
Payment Number 18783 MIL2025	1213597 Payment Date 06/20/ 50501	25 Vendor 18783 IX 202 05/31/25 *** Payment Total	GAYDOS, AMY L 104.02 104.02	Status Issued 0.00	104.02 104.02
Payment Number 41901 MIL2025	1213598 Payment Date 06/20/ 50503	25 Vendor 41901 IX 202 06/17/25 *** Payment Total	JOHNSON, ASHLEY 98.91 98.91	Status Issued 0.00	98.91 98.91
Payment Number	1213599 Payment Date 06/20/	25 Vendor 31912	KNOWINK LLC	Status Issued	

AP255 Date 06/20/25 Time 11:22 Pay Group 5000 DUPAGE COUNTY GRANTS PAY GROUP USD Bank Account Payment History

> Daymont Date Pange $06/20/25 + h_{23} = 06/20/25$

Cash Code 1414 Bank 071923909

Payment Code CHK

Payment	Date	kange	06/20/25	tnru	06/20/2)	
					Payment	Currency	USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Da	te Scheduled Amount	Discount Amount	Net Payment Amount
Payment Numb	per 1213599 Paymen 425	t Date 06/20/25	Vendor IX 208 *** Pa	31912 06/28/25 ayment Total	KNOWINK LLC 714,000.00 714,000.00	Status 0.00 0.00	Issued 714,000.00 714,000.00
Payment Numb 11859 10	per 1213600 Paymen 0027635	t Date 06/20/25	Vendor IX 101 *** Pa	11859 07/15/25 ayment Total	HOME INSTEAD SENIOR 851.25 851.25	CARE Status 0.00 0.00	Issued 851.25 851.25
Payment Numb 19213 DH	per 1213601 Paymen IS-1760-25-2532	t Date 06/20/25	Vendor IX 209 *** Pa	19213 07/17/25 ayment Total	HESS, STEVE 1,100.00 1,100.00	Status 0.00 0.00	Issued 1,100.00 1,100.00
Payment Numb 10057 23	per 1213602 Paymen 19183	t Date 06/20/25	Vendor IX 200 *** Pa	10057 07/18/25 ayment Total	NICOR GAS 10,351.00 10,351.00	Status 0.00 0.00	Issued 10,351.00 10,351.00
Payment Numb 46176 24	per 1213603 Paymen 19	t Date 06/20/25	Vendor IX 200 *** Pa	46176 07/10/25 ayment Total	PLAN B FOUNDATION 600.00	Status 0.00 0.00	Issued 600.00 600.00
Payment Numb 46252 IA					SACHDEV, BHUMIKA 2,000.00 2,000.00		
Payment Numk 39976 32 39976 32	per 1213605 Paymen 1156 1157	t Date 06/20/25	Vendor IX 101 IX 101 *** Pa	39976 05/30/25 06/30/25 ayment Total	STANDARD HOME CARE, 350.88 259.65 610.53	INC. Status 0.00 0.00 0.00	Issued 350.88 259.65 610.53
Payment Numb 11201 34 11201 34 11201 34	per 1213606 Paymen 1855593 053125 LIHEAP 1855593 053125 SNR 1855593 053125 WIOA	t Date 06/20/25	Vendor IX 200 IX 202 IX 105 *** Pa	11201 06/30/25 06/30/25 06/30/25 ayment Total	UNITED STATES POSTAI 28.09 1,511.68 31.79 1,571.56	SERVICE Status 0.00 0.00 0.00 0.00	Issued 28.09 1,511.68 31.79 1,571.56
					VILLAGE OF ADDISON 570,000.00 570,000.00		
		*** P	ayment Cod Pa	de CHK Total ayment Count	1,403,671.38 21	0.00	1,403,671.38
		*** C	ash Code Pa	1414 Total ayment Count	1,574,792.36 30	0.00	1,574,792.36
		*** Pay G	roup 5000 Pa	USD Total ayment Count	1,574,792.36	0.00	1,574,792.36

Payment of Claims



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: 25-1584 Agenda Date: 7/8/2025 Agenda #: 8.C.

AP255 Date: 06/23/25 Time: 08:49 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: AP255-5000

Step Nbr: 1

Pay Group: 5000 Cash Code: 3910

Class C Account

062325

Payment Date: 062325 -Payment Numbers: Payment Code: AUT Auto Debit

AP255 Date 06/23/25 Time 08:49 Pay Group 5000 DUPAGE COUNTY GRANTS PAY GROUP USD Bank Account Payment History

Page

06/23/25 thru 06/23/25 Payment Date Range

Cash Code 3910 Bank 071000013 Payment Code AUT

Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc	Date Scheduled Amount	Discount Amount N	et Payment Amount
Payment Numk 10023 10		Payment Date 06/23/2	200	10023 07/18/25 ment Total	COMMONWEALTH EDISON 2,792.00 2,792.00	COMPANY Status I 0.00 0.00	ssued 2,792.00 2,792.00
Payment Numb 10057 10		Payment Date 06/23/2	200	10057 07/18/25 ment Total	NICOR GAS 76.00	Status I 0.00 0.00	ssued 76.00 76.00
		***	Payment Code Pay	e AUT Total ment Count	2,868.00	0.00	2,868.00
		***		3910 Total ment Count	2,868.00	0.00	2,868.00
		*** Pay	Group 5000 U Pay	JSD Total ment Count	2,868.00	0.00	2,868.00

Payment of Claims



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: 25-1596 Agenda Date: 7/8/2025 Agenda #: 8.D.

AP255 Date: 06/24/25 Time: 11:32 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 1

Pay Group: 1000 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062425 -Payment Numbers: Payment Code: 062425

AP255 Date 06/24/25 Time 11:33 Pay Group 1000 GENERAL FUND PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

06/24/25 thru 06/24/25 Payment Date Range

Cash Code 1414 Payment Code ACH Bank 071923909

Vendor I	nvoice	Voucher	Auth PL	Due Date Dsc Dat	te Scheduled Amount	Discount Amount	Net Payment Amount
26753 11L4-I 26753 14MH-I 26753 17JL-I 26753 1QK3-I 26753 1QRN-			IX 100 IX 100 IX 100 IX 100 IX 100 *** Pa	07/13/25 07/18/25 07/17/25 07/13/25 yment Total	AMAZON CAPITAL SERVICE 36.99 267.20 29.78 74.07 159.80 567.84	0.00 0.00 0.00 0.00 0.00	Issued 36.99 267.20 29.78 74.07 159.80 567.84
Payment Number 10667 AE3928	535715 Payment Da 8Q	ate 06/24/25	Vendor IX 100 *** Pa	10667 06/29/25 yment Total	CDW GOVERNMENT INC 2,514.05 2,514.05	Status 0.00 0.00	Issued 2,514.05 2,514.05
Payment Number 19717 CK6634 19717 CK663	535716 Payment Da 4 5	ate 06/24/25	Vendor IX 100 IX 100 *** Pa	19717 07/13/25 07/16/25 yment Total	DPCO STATE'S ATTY INV. 60.00 8.00 68.00	EST ACCT Status 0.00 0.00 0.00	Issued 60.00 8.00 68.00
Payment Number 26530 1082 26530 2025Mi	535717 Payment Da	ate 06/24/25	Vendor IX 100 IX 100 *** Pa	26530 07/11/25 07/16/25 yment Total	HARRIS, THERESA 27.50 218.50 246.00	Status 0.00 0.00 0.00	1ssued 27.50 218.50 246.00
Payment Number 27873 JI4153 27873 JI4166	535718 Payment Da 1 6	ate 06/24/25	Vendor IX 100 IX 100 *** Pa	27873 06/30/25 06/29/25 yment Total	JOURNAL TECHNOLOGIES, 6,465.96 860.00 7,325.96	INC Status 0.00 0.00 0.00	Issued 6,465.96 860.00 7,325.96
Payment Number 28996 692	535719 Payment Da	ate 06/24/25	IX 100	28996 07/16/25 yment Total	NASER, EVA Y 260.20 260.20	Status 0.00 0.00	Issued 260.20 260.20
Payment Number 10141 X11316	535720 Payment Da 65	ate 06/24/25	Vendor IX 100 *** Pa	10141 06/26/25 yment Total	PRCO 330.00 330.00	Status 0.00 0.00	330.00
Payment Number 14308 105588 14308 105620	8	ate 06/24/25	IX 100 IX 100 *** Pa	07/10/25 07/13/25 yment Total	PUBLIC SAFETY DIRECT 2,500.00 4,813.95 7,313.95	0.00 0.00 0.00	2,500.00 4,813.95 7,313.95
Payment Number 20395 05272		ate 06/24/25	Vendor IX 100 *** Pa	20395 07/12/25 yment Total	SAVIANO, FRAN 85.50 85.50	Status 0.00 0.00	Issued 85.50 85.50
Payment Number 13392 206403 13392 207940 13392 207943	0		Vendor		SENTINEL OFFENDER SER		Tagued

AP255 Date 06/24/25 Time 11:33 Pay Group 1000 GENERAL FUND PAY GROUP USD Page Bank Account Payment History

Payment Currency USD

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06/24/25 thru 06/24/25 Payment Date Range

Bank 071923909 Cash Code 1414

Payment Code ACH

Vendor Inv	oice 	Voucher	Auth PL	Due Date Dsc Dat	e Scheduled Amount	Discount Amount	Net Payment Amount
Payment Number	535723 Payment	Date 06/24/25		13392 ayment Total	SENTINEL OFFENDER SERV 14,813.83	VICES LLC Status	s Issued 14,813.83
Payment Number 10190 INV0000	535724 Payment 66966	Date 06/24/25	Vendor IX 100 *** Pa	10190 07/17/25 ayment Total	TAB PRODUCTS CO LLC 8,031.71 8,031.71	Status 0.00 0.00	8,031.71 8,031.71
Payment Number 44522 6577971 44522 6577976	535725 Payment	Date 06/24/25	Vendor IX 100 IX 100 *** Pa	44522 07/02/25 07/02/25 ayment Total	TOSHIBA AMERICA BUSINI 704.23 540.11 1,244.34	ESS Status 0.00 0.00 0.00	704.23 540.11 1,244.34
Payment Number 30797 3023000	535726 Payment 381	Date 06/24/25	IX 100	30797 07/13/25 ayment Total	TRINITY SERVICES GROUP 30,709.82 30,709.82	P INC Status 0.00 0.00	30,709.82 30,709.82
		*** Pa	ayment Cod	le ACH Total	73,511.20	0.00	73,511.20

Payment Count

AP255 Date 06/24/25 Time 11:33 Pay Group 1000 GENERAL FUND PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

06/24/25 thru 06/24/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code CHK

Vendor	Invoice	Voucher	Auth PL Due Date Dsc D	ate Scheduled Amount Discount	Amount Net Pay	ment Amount
Payment Number 19712 CK10 19712 CK10 19712 CK10)292)295	t Date 06/24/25	Vendor 19712 IX 100 06/28/25 IX 100 07/12/25 IX 100 07/12/25 *** Payment Total	DPCO SHERIFF EXTRADITION ACCT 955.87 170.82 51.00 1,177.69	Status Issued 0.00 0.00 0.00 0.00	955.87 170.82 51.00 1,177.69
Payment Number 12969 1819	n 1213651 Paymen 172505	t Date 06/24/25	IX 100 06/30/25	ACCURATE BIOMETRICS INC 1,085.00 1,085.00	Status Issued 0.00 0.00	1,085.00 1,085.00
Payment Number 45604 2025	: 1213652 Paymen SS-144	t Date 06/24/25	Vendor 45604 IX 100 07/17/25 *** Payment Total	ADVANCED POLICE CONCEPTS LLC 650.00 650.00	Status Issued 0.00 0.00	650.00 650.00
Payment Number 12398 1924	: 1213653 Paymen 12071		Vendor 12398 IX 100 05/20/25 *** Payment Total	ADVOCATE OCCUPATIONAL HEALTH 1,708.00 1,708.00	Status Issued 0.00 0.00	1,708.00 1,708.00
Payment Number 43804 2158	1213654 Paymen	t Date 06/24/25	5 Vendor 43804 IX 100 07/20/25 *** Payment Total	ALOHA DOCUMENT SERVICES, INC 1,477.58 1,477.58	Status Issued 0.00 0.00	1,477.58 1,477.58
Payment Number 10671 1837		t Date 06/24/25	Vendor 10671 IX 100 07/16/25 *** Payment Total	ALPHAGRAPHICS 16.00 16.00	Status Issued 0.00 0.00	16.00
Payment Number 10154 1218	: 1213656 Paymen 32700	t Date 06/24/25	Vendor 10154 IX 100 07/16/25 *** Payment Total	AMERICAN CORRECTIONAL ASSOC 7,250.00 7,250.00	Status Issued 0.00 0.00	7,250.00 7,250.00
Payment Number 10009 2873 10009 2873	1213657 Paymen 301188830X06082025 352264732X06082025	t Date 06/24/25	Vendor 10009 IX 100 06/30/25 IX 100 06/30/25 *** Payment Total	AT&T MOBILITY 1,885.88 176.05 2,061.93	Status Issued 0.00 0.00 0.00	1,885.88 176.05 2,061.93
Payment Number 13649 1189		t Date 06/24/25	Vendor 13649 IX 100 03/14/25 *** Payment Total	AWARDING YOU 15.00 15.00	Status Issued 0.00 0.00	15.00 15.00
Payment Number 26601 INUS	: 1213659 Paymen 3355015	t Date 06/24/25	Vendor 26601 IX 100 07/19/25 *** Payment Total	AXON ENTERPRISE INC 17,306.86 17,306.86	Status Issued 0.00 0.00	17,306.86 17,306.86
Payment Number 45479 INVU			5 Vendor 45479 IX 100 07/11/25 *** Payment Total		Status Issued 0.00 0.00	2,526.44 2,526.44
	: 1213661 Paymen 988453C7969		5 Vendor 27228 IX 100 06/13/25	CENTRAL DUPAGE EMERGENCY PHYS 47.83	Status Issued 0.00	47.83

AP255 Date 06/24/25 Time 11:33 Pay Group 1000 GENERAL FUND PAY GROUP USD Page Bank Account Payment History

> Daymont Date Pange 06/24/25 +bru 06/24/25

Cash Code 1414 Bank 071923909

Payment Code CHK

Payme	ent Date	Range	00/24/25	thru	00/24/2:)		
					Payment	Currency	USD	

Vendor Inv	<i>r</i> oice Vou	ucher Auth PL	Due Date Dsc Dat	e Scheduled Amount I	iscount Amount	Net Payment Amount
Payment Number 27228 CDEP890 27228 CDEP890 27228 CDEP900 27228 CDEP900	1213661 Payment Date (075C7969 701C8055 023C8055 067C8055	IX 100	06/16/25	CENTRAL DUPAGE EMERGENO 118.01 118.01 118.01 118.01 519.87	0.00	Issued 118.01 118.01 118.01 118.01 519.87
Payment Number 12097 0507551	1213662 Payment Date (1611	IX 100	12097 06/13/25 ayment Total	CIOX HEALTH LLC 120.88 120.88	Status 0.00 0.00	Issued 120.88 120.88
Payment Number 10074 321-017 10074 321-018		06/24/25 Vendor IX 100 IX 100 *** Page 1	10074 01/28/25 04/04/25 ayment Total	CITY OF WHEATON 2,925.68 2,925.68 5,851.36	Status 0.00 0.00 0.00	
Payment Number 12690 0148670 12690 0148713 12690 0148764	L	06/24/25 Vendor IX 100 IX 100 IX 100 *** Page 1	12690 07/11/25 07/13/25 07/16/25 ayment Total	COAST TO COAST CALIBRAT 2,994.60 466.30 136.50- 3,324.40	TIONS Status 0.00 0.00 0.00 0.00	2,994.60 466.30
Payment Number 12382 2437001	1213665 Payment Date (135	IX 100 *** Pa	12382 07/15/25 ayment Total	COMCAST 2,200.00 2,200.00	Status 0.00 0.00	Issued 2,200.00 2,200.00
Payment Number 12382 8771200 12382 8771200 12382 8771200	1213666 Payment Date () 0470301041060625 0470472388061025 0470648508060725	06/24/25 Vendor IX 100 IX 100 IX 100 *** Page 1	12382 07/06/25 07/10/25 07/07/25 ayment Total	COMCAST 315.40 283.82 167.40 766.62	Status 0.00 0.00 0.00 0.00	315.40 283.82 167.40
Payment Number 14186 437996	1213667 Payment Date (06/24/25 Vendor IX 100 *** Pa	14186 06/30/25 ayment Total	CORRA GROUP 204.75 204.75	Status 0.00 0.00	Issued 204.75 204.75
Payment Number 13342 15828	1213668 Payment Date (06/24/25 Vendor IX 100 *** Pa	13342 07/17/25 ayment Total	CURRENT TECHNOLOGIES CO 11,154.80 11,154.80	RP Status 0.00 0.00	Issued 11,154.80 11,154.80
Payment Number 10106 051525	1213669 Payment Date (TX 100	10106 06/14/25 ayment Total	DUPAGE CO BAR ASSOCIATI 7,440.00 7,440.00	0.00	Tssued 7,440.00 7,440.00
Payment Number 11348 11676	1213670 Payment Date (06/24/25 Vendor IX 100 *** Pa	11348 06/16/25 ayment Total	DUPAGE FEDERATION ON HU 310.75 310.75		310.75
Payment Number	1213671 Payment Date (06/24/25 Vendor	19875	EDWARD OCCUPATIONAL HEA	LTH Status	Issued

AP255 Date 06/24/25 Time 11:33 Pay Group 1000 GENERAL FUND PAY GROUP Bank Account Payment History USD Page

> 06/24/25 thru 06/24/25 Payment Date Range

Cash Code 1414 Payment Code CHK Bank 071923909

Payment Currency USD

Vendor Inv	oice	Voucher	Auth PL	Due Date Dsc Date	e Scheduled Amount	Discount Amount	Net Payment Amo	ount
Payment Number 19875 0020158	1213671 Payment -00	Date 06/24/25		19875 I 05/30/25 yment Total	EDWARD OCCUPATIONAL F 95.00 95.00	0.00	95	.00
Payment Number 11196 8-890-0	1213672 Payment 1058	Date 06/24/25	IX 100	11196 I 07/11/25 yment Total	FEDEX 150.01 150.01	Status 0.00 0.00	150	
Payment Number 11196 8-875-7 11196 8-889-9 11196 8-890-6	9532 4986		IX 100 IX 100 IX 100	11196 1 06/27/25 07/11/25 07/11/25 Lyment Total	FEDEX 16.07 60.53 53.08 129.68	Status 0.00 0.00 0.00 0.00	Issued 16 60 53 129	.53
Payment Number 34032 26439	1213674 Payment	Date 06/24/25	Vendor IX 100 *** Pa	34032 I 07/19/25 yment Total	FIRST RESPONDERS WELI 610.00 610.00	NESS Status 0.00 0.00	Issued 610 610	
Payment Number 39421 INV-673	1213675 Payment 87	Date 06/24/25	TY 100	39421 I 07/18/25 yment Total	FLOCK GROUP INC 500.00	Status 0.00 0.00	Issued 500 500	
Payment Number 10255 30271	1213676 Payment	Date 06/24/25	IX 100	10255 I 07/12/25 yment Total	HOLIDAY INN & SUITES 290.82 290.82	Status 0.00 0.00	Issued 290 290	
Payment Number 13368 721888	1213677 Payment	Date 06/24/25	Vendor IX 100 *** Pa	13368 : 07/17/25 yment Total	IDENTISYS INC 196.71 196.71	Status 0.00 0.00		.71
Payment Number 32019 14184 32019 14197	1213678 Payment	Date 06/24/25	IX 100 IX 100	32019 1 06/19/25 06/27/25 Lyment Total	MOSIER, JUDITH K. 266.50 295.20 561.70	Status 0.00 0.00 0.00	266 295	.20
Payment Number 11692 1162056		Date 06/24/25	IX 100	11692 1 06/18/25 yment Total	LANGUAGE LINE SERVICE 39.31 39.31	0.00	39	.31
Payment Number 46335 001	1213680 Payment	Date 06/24/25	IX 100	46335 I 07/09/25 Lyment Total	NELSON, TINAMARIE 52.50 52.50	Status 0.00 0.00	52	.50
Payment Number 22125 P744281 22125 P751740 22125 P751740 22125 P752234 22125 P752802	780 900 940		Vendor IX 100 IX 100 IX 100 IX 100 IX 100 IX 100		NORTHWESTERN MEDICAL 7.81 68.63 214.90 54.44 84.75	FACULTY Status 0.00 0.00 0.00 0.00 0.00 0.00	7 68 214 54	.63

AP255 Date 06/24/25 Pay Group 1000 GENERAL FUND PAY GROUP USD Page 6
Time 11:33 Bank Account Payment History

Payment Date Range 06/24/25 thru 06/24/25

Cash Code 1414 Bank 071923909

Payment Code CHK

Payment Currency USD

Payment Co	de Chk							
Vendor	Invoice	Vo1	ucher <i>F</i>	Auth PL	Due Date Dsc Dat	e Scheduled Amount	Discount Amount	Net Payment Amount
Payment Nu 22125	mber 1213681 P753001180	Payment Date	06/24/25	Vendor IX 100 *** Pa	22125 07/01/25 yment Total	NORTHWESTERN MEDICAL 45.71 476.24	FACULTY Status 0.00 0.00	Issued 45.71 476.24
Payment Nu 19217 19217 19217 19217 19217 19217 19217 19217 19217 19217 19217 19217 19217 19217 19217 19217 19217 19217	mber 1213682 P744618151 P744794901 P750791530 P750791540 P750791640 P750791650 P751205450 P751205450 P751205450 P751205490 P751205490 P752235100 P752235100 P752802500 P753001110 P753001160 P753504140 P753504140	Payment Date	06/24/25	Vendor IX 100	19217 06/09/25 06/10/25 06/10/25 06/22/25 06/12/25 06/26/25 06/26/25 06/27/25 06/27/25 06/25/25 06/28/25 06/29/25 07/01/25 07/02/25 07/02/25 07/02/25 07/03/25 07/03/25 yment Total	CENTRAL DUPAGE PHYSIC 78.19 74.94 118.68 78.19 78.19 86.42 78.19 51.97 74.94 118.68 51.97 78.19 78.19 78.19 118.68 78.19 78.19 118.68 78.19 118.68 78.19	IAN GROUP Status 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	Tssued 78.19 74.94 118.68 78.19 78.19 86.42 78.19 51.97 74.94 118.68 51.97 78.19 78.19 78.19 118.68 78.19 118.68 78.19 118.68 78.19 118.68
Payment Nu 39549 39549 39549 39549 39549 39549 39549 39549	423968479001 424063664001 424633635001 424633954001 425431786001 425486351001 426140157001 426143135001 426236606001 426942351001]]]]]]]]	IX 100	06/27/25 06/27/25 06/15/25 06/15/25 07/03/25 07/03/25 07/05/25 07/04/25 07/05/25 07/04/25 yment Total	99.81 4.72 12.60 18.58 503.72 57.36 19.64 12.04 57.93 90.89	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	99.81 4.72 12.60 18.58 503.72 57.36 19.64 12.04 57.93 90.89 877.29
Payment Nu 29508 29508 29508 29508 29508	mber 1213684 2025 #69 2025 #70 2025 #71 2025 #72 2025 #73 2025 #75	Payment Date	06/24/25	Vendor IX 100 *** Pa	29508 07/05/25 07/09/25 07/10/25 07/12/25 07/13/25 07/17/25 yment Total	OKUNSKAYA, TATIANA 260.86 180.86 401.72 361.72 180.86 180.86	Status 0.00 0.00 0.00 0.00 0.00 0.00	Issued 260.86 180.86 401.72 361.72 180.86 180.86 1,566.88

AP255 Date 06/24/25 Time 11:33 Pay Group 1000 GENERAL FUND PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

06/24/25 thru 06/24/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code CHK

Vendor Inv	voice	Voucher	Auth PL	Due Date Dsc Dat	e Scheduled Amount	Discount Amount	Net Paym	ment Amount
Payment Number 12742 77320	1213685 Payment	Date 06/24/25	Vendor IX 100 *** Pa	12742 07/15/25 yment Total	PEERLESS NETWORK, INC 85.40 85.40	. Status 0.00 0.00		85.40 85.40
Payment Number 10048 1027662		Date 06/24/25	Vendor IX 100 *** Pa	10048 07/19/25 yment Total	PITNEY BOWES INC 879.06 879.06	Status 0.00 0.00	Issued	879.06 879.06
Payment Number 20792 6561	1213687 Payment	Date 06/24/25	Vendor IX 100 *** Pa	20792 07/06/25 yment Total	PLUS PROFESSIONAL TRA 600.00 600.00	NSLATION Status 0.00 0.00	Issued	600.00 600.00
Payment Number 10313 15F0123		Date 06/24/25	IX 100	10313 07/12/25 yment Total	PRIMO BRANDS 84.53 84.53	Status 0.00 0.00	Issued	84.53 84.53
Payment Number 12151 277	1213689 Payment	Date 06/24/25	IX 100	12151 06/16/25 yment Total	PRUSAK, JUNE 190.00 190.00	Status 0.00 0.00	Issued	190.00 190.00
Payment Number 27657 CF500RN 27657 CF500RN 27657 CF500RN 27657 CF60000 27657 CF60001	IGRSNI IHRSNI IIRSNI OTRSNI		IX 100 IX 100 IX 100 IX 100 IX 100	06/13/25 06/13/25	RADIOLOGY SUBSPECIALI 14.35 11.05 55.29 14.19 132.50 227.38 SHERIFF ADMINISTRATIV	0.00		14.35 11.05 55.29 14.19 132.50 227.38
Payment Number 26479 CK10183 26479 CK10184		Date 06/24/25	IX 100 IX 100	26479 07/16/25 07/16/25 yment Total	SHERIFF ADMINISTRATIV 131.20 40.60 171.80	E ACCOUNT Status 0.00 0.00 0.00		131.20 40.60 171.80
Payment Number 45050 023	1213692 Payment	Date 06/24/25	Vendor IX 100 *** Pa	45050 07/17/25 yment Total	SIMPSON, LINDSAY 1,000.00 1,000.00	Status 0.00 0.00		1,000.00
Payment Number 30394 1225	1213693 Payment	Date 06/24/25	IX 100	30394 07/16/25 yment Total	SMAL, PAWEL 234.10 234.10	Status 0.00 0.00	Issued	234.10 234.10
Payment Number 18052 EXP2025	1213694 Payment 50508	Date 06/24/25	IX 100	18052 07/23/25 yment Total	SROKA, JENNIFER L 149.00 149.00	Status 0.00 0.00		149.00 149.00
Payment Number 40928 I176677 40928 I176677 40928 I176677	71 72	Date 06/24/25	Vendor IX 100 IX 100 IX 100	40928 07/12/25 07/12/25 07/12/25	STREICHER'S, INC. 1,470.00 1,470.00 1,470.00	Status 0.00 0.00 0.00	Issued	1,470.00 1,470.00 1,470.00

AP255 Date 06/24/25 Pay Group 1000 GENERAL FUND PAY GROUP USD Page 8
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Payment Date Range 06/24/25 thru 06/24/25

Cash Code 1414 Bank 071923909

Payment Code CHK

Payment Currency USD

Vendor Invoice	Voucher	Auth PL	Due Date Dsc Da	ate Scheduled Amount	Discount Amount	Net Payment Amount
Payment Number 1213695 40928 I1766774 40928 I1766775 40928 I1766776 40928 I1766777	Payment Date 06/24/25	Vendor IX 100 IX 100 IX 100 IX 100 *** Pa	40928 07/12/25 07/12/25 07/12/25 07/12/25 ayment Total	STREICHER'S, INC. 1,470.00 1,470.00 1,470.00 1,470.00 10,290.00	Status 0.00 0.00 0.00 0.00 0.00	Issued 1,470.00 1,470.00 1,470.00 1,470.00 1,470.00 10,290.00
Payment Number 1213696 13018 46850936	Payment Date 06/24/25	Vendor IX 100 *** Pa	13018 07/04/25 ayment Total	SURVEYMONKEY INC. 1,080.00 1,080.00	Status 0.00 0.00	1,080.00 1,080.00
Payment Number 1213697 12123 A61880MS	Payment Date 06/24/25	Vendor IX 100 *** Pa	12123 07/18/25 ayment Total	TELCOM INNOVATIONS GR 88,754.50 88,754.50	OUP LLC Status 0.00 0.00	Issued 88,754.50 88,754.50
Payment Number 1213698 11428 483426	Payment Date 06/24/25	Vendor IX 100 *** Pa	11428 07/13/25 ayment Total	UNIQUE PRODUCTS 287.92 287.92	Status 0.00 0.00	Issued 287.92 287.92
Payment Number 1213699 11201 34855593 053125 11201 34855593 053125	Payment Date 06/24/25 CU FIN	Vendor IX 100 IX 100 *** Pa	11201 06/30/25 06/30/25 ayment Total	UNITED STATES POSTAL 172.67 31.01 203.68	SERVICE Status 0.00 0.00 0.00	Issued 172.67 31.01 203.68
Payment Number 1213700 10597 6114862328 10597 6114862395	Payment Date 06/24/25	Vendor IX 100 IX 100 *** Pa	10597 07/01/25 07/01/25 ayment Total	VERIZON 79.78 21.96 101.74	Status 0.00 0.00 0.00	Tssued 79.78 21.96 101.74
Payment Number 1213701 37319 0002165043-IN	Payment Date 06/24/25	Vendor IX 100 *** Pa	37319 06/30/25 ayment Total	WEX HEALTH, INC. 810.00 810.00	Status 0.00 0.00	Issued 810.00 810.00
Payment Number 1213702 12471 WLCP00000098689 12471 WLCP00000098689 12471 WLCP00000098689 12471 WLCP00000098690 12471 WLCP00000098690 12471 WLCP00000098696 12471 WLCP00000098727 12471 WLCP00000098756 12471 WLCP00000098763 12471 WLCP00000098763 12471 WLCP00000098839 12471 WLCP00000098839 12471 WLCP00000098839 12471 WLCP00000098840 12471 WLCP00000098840	Payment Date 06/24/25 7E 8E 9E 0E 1E 9E 0E 4E 6E 7E			WINFIELD LABORATORY 13.66 4.37 8.78 11.96 25.38 11.33 16.86 5.20 14.77 26.27 20.60 9.12 11.09 21.02 2.87	Status	Issued 13.66 4.37 8.78 11.96 25.38 11.33 16.86 5.20 14.77 26.27 20.60 9.12 11.09 21.02 2.87

AP255 Date 06/24/25 Pay Group 1000 GENERAL FUND PAY GROUP USD Page 9
Time 11:33 Bank Account Payment History

Payment Date Range 06/24/25 thru 06/24/25

Cash Code 1414 Bank 071923909

Payment Code CHK

Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	ce Scheduled Amount	Discount Amount	Net Payment Amount
12471 12471 12471 12471 12471 12471 12471 12471 12471 12471 12471 12471 12471 12471	umber 1213702 Payment WLCP000000988402E WLCP000000988403E WLCP000000988428E WLCP000000988429E WLCP000000988494E WLCP00000098851E WLCP000000988970E WLCP000000989143E WLCP000000989120E WLCP000000989220E WLCP000000989220E WLCP000000990307E WLCP000000990307E WLCP000000990308E WLCP000000990308E WLCP000000991247E WLCP0000000991915E WLCP0000000991916E	Date 06/24/25	IX 100	12471 06/06/25 06/06/25 06/07/25 06/07/25 06/07/25 06/07/25 06/07/25 06/07/25 06/08/25 06/08/25 06/08/25 06/08/25 06/08/25 06/10/25 06/10/25 06/11/25 06/11/25 06/13/25 06/13/25 yment Total	WINFIELD LABORATORY 1.91 12.43 9.12 8.05 13.24 1.91 87.00 18.83 3.04 8.22 12.20 1.91 8.22 2.87 8.22 5.18 5.18 2.87 413.68	Status 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	Issued 1.91 12.43 9.12 8.05 13.24 1.91 87.00 18.83 3.04 8.22 12.20 1.91 8.22 2.87 8.22 5.18 5.18 2.87 413.68
12560	umber 1213703 Payment WPCA000000284724E WPCA000000286609E	Date 06/24/25	Vendor IX 100 IX 100		WINFIELD PATHOLOGY COI 48.65 24.20 72.85	NSULTANTS Status 0.00 0.00 0.00	Issued 48.65 24.20 72.85
		*** Pa		e CHK Total yment Count	179,995.29 54	0.00	179,995.29
		*** Ca		1414 Total yment Count	253,506.49 67	0.00	253,506.49
		*** Pay G		USD Total yment Count	253,506.49 67	0.00	253,506.49

AP255 Date: 06/24/25 Time: 11:33 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY Step Nbr: 2

Pay Group: 1100 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062425 -Payment Numbers: Payment Code: 062425

AP255 Date 06/24/25 Time 11:34 Pay Group 1100 GENERAL GOVERNMENT PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

06/24/25 thru 06/24/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code CHK

Vendor Invoice	Voucher Auth PL	Due Date Dsc Dat	e Scheduled Amount Disco	ount Amount Net Pay	ment Amount
Payment Number 1213704 Payment 12097 0508700243 12097 0508765013	Date 06/24/25 Vendo IX 102 IX 102 ***	r 12097 06/20/25 06/21/25 Payment Total	CIOX HEALTH LLC 238.56 36.40 274.96	Status Issued 0.00 0.00 0.00	238.56 36.40 274.96
Payment Number 1213705 Payment 16141 RES-ACC-25-000575	Date 06/24/25 Vendo IX 170 ***	r 16141 07/16/25 Payment Total	DEPENDABLE CONCRETE INC 100.00 100.00	Status Issued 0.00	100.00
Payment Number 1213706 Payment 12225 3177719797	Date 06/24/25 Vendo IX 120 ***	r 12225 07/12/25 Payment Total	IDEXX DISTRIBUTION INC 1,262.76 1,262.76	Status Issued 0.00	1,262.76 1,262.76
Payment Number 1213707 Payment 39090 INV0017281	Date 06/24/25 Vendo IX 120 ***	r 39090 07/17/25 Payment Total	VST, LLC 476.26 476.26	Status Issued 0.00	476.26 476.26
Payment Number 1213708 Payment 32531 224045	Date 06/24/25 Vendo IX 102 ***	r 32531 07/11/25 Payment Total	MOMKUS, LLC 340.00 340.00	Status Issued 0.00	340.00 340.00
Payment Number 1213709 Payment 28620 061625	Date 06/24/25 Vendo IX 120 ***	r 28620 07/16/25 Payment Total	NOAH'S ANIMAL HOSPITAL OF 205.00 205.00	Status Issued 0.00 0.00	205.00 205.00
Payment Number 1213710 Payment 46341 CAMP2025	Date 06/24/25 Vendo IX 120 ***	r 46341 07/12/25 Payment Total	PEGGY NOTEBAERT NATURE MUSE 300.00	Status Issued 0.00	300.00
Payment Number 1213711 Payment 12876 APR10048-I-0034	Date 06/24/25 Vendo IX 120 ***	r 12876 06/30/25 Payment Total	TRUSTED JOURNEY PET MEMORIA 404.75 404.75	L Status Issued 0.00	
Payment Number 1213712 Payment 11201 34855593 053125 AC	Date 06/24/25 Vendo IX 120 ***	r 11201 06/30/25 Payment Total	UNITED STATES POSTAL SERVIC 568.57 568.57	E Status Issued 0.00 0.00	568.57 568.57
	*** Payment C	ode CHK Total Payment Count	3,932.30	0.00	3,932.30
		1414 Total Payment Count	3,932.30	0.00	3,932.30
	*** Pay Group 110	0 USD Total Payment Count	3,932.30	0.00	3,932.30

AP255 Date: 06/24/25 Time: 11:34 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 3

Pay Group: 1200 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062425 -Payment Numbers: Payment Code: 062425

AP255 Date 06/24/25 Time 11:34 Pay Group 1200 HEALTH AND WELFARE PAY GROUP USD Page Bank Account Payment History

> 06/24/25 thru 06/24/25 Payment Date Range

Cash Code 1414 Bank 071923909

!	-	Payment	Currency	USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc	Date Scheduled Amount	Discount Amount Ne	t Payment Amount
	ber 535727 Payment VC00000009456687 VC00000009474420	Date 06/24/25	IX 100 IX 100	12992 07/08/25 07/15/25 Lyment Total	JDF SERVICES INC 1,290.00 2,203.75 3,493.75	Status Is 0.00 0.00 0.00	sued 1,290.00 2,203.75 3,493.75
*** Payment Code ACH Total Payment Count					3,493.75 1	0.00	3,493.75

AP255 Date 06/24/25 Time 11:34 Pay Group 1200 HEALTH AND WELFARE PAY GROUP Bank Account Payment History USD Page

> 06/24/25 thru 06/24/25 Payment Date Range

Cash Code 1414 Payment Code CHK Bank 071923909

Payment Currency USD

-							
Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Date	e Scheduled Amount	Discount Amount	Net Payment Amount
Payment Nu 10056	umber 1213713 2985870-IN	Payment Date 06/24/25	Vendor IX 100 *** Pay	10056 A 07/13/25 ment Total	ALCO SALES & SERVICE 476.61	CO. Status 0.00 0.00	Issued 476.61 476.61
24540 24540	umber 1213714 40019793 40019794 40019844	Payment Date 06/24/25	IX 100 IX 100 IX 100	24540 A 07/12/25 07/12/25 07/16/25 ment Total	ARXIUM, INC 234.60 122.51 60.25 417.36	Status 0.00 0.00 0.00 0.00	234.60 122.51 60.25 417.36
26602 26602 26602 26602 26602 26602 26602 26602 26602 26602 26602 26602 26602 26602	7426044633 7426044635 7426044637 7426044638 7426044639 7426044640 7426044641 7426238063 7426238064 7426423176 7426423177 7426423178 7426604655 7426604655 7426604659 7426782846	Payment Date 06/24/25	Vendor IX 100	26602 07/16/25 07/16/25 07/16/25 07/16/25 07/16/25 07/16/25 07/16/25 07/16/25 07/16/25 07/17/25 07/17/25 07/17/25 07/18/25 07/18/25 07/18/25 07/18/25 07/19/25 07/19/25 07/19/25 07/19/25 07/19/25 07/19/25 07/20/25 ment Total	CARDINAL HEALTH 110, 625.45 81.51 5,428.85 1,082.24 2,647.85 499.38 64.37 14.41 990.51 59.80 20.53 13.25 8,113.85 188.76 1.19 275.00 18.55 20,125.50	LLC Status 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	1ssued 625.45 81.51 5,428.85 1,082.24 2,647.85 499.38 64.37 14.41 990.51 59.80 20.53 13.25 8,113.85 188.76 1.19 275.00 18.55 20,125.50
Payment Nu 10019	umber 1213716 6000109790	1 d./	IX 100 *** Pay	07/11/25 ment Total	490.80 490.80	0.00	490.80 490.80
Payment Ni 30801 30801	umber 1213717 23889765 23892048	Payment Date 06/24/25	Vendor IX 100 IX 100 *** Pay	30801 P 07/10/25 07/10/25 ment Total	MCKESSON MEDICAL - SU 2,549.27 192.50 2,741.77	RGICAL Status 0.00 0.00 0.00	Issued 2,549.27 192.50 2,741.77
Payment Ni 44692	umber 1213718 9016634	Payment Date 06/24/25	Vendor IX 100 *** Pay	44692 I 07/09/25 ment Total	PRAIRIE FARMS ROCKFOR 403.72 403.72	D Status 0.00 0.00	1ssued 403.72 403.72
Payment Nu 34012	umber 1213719 RSTSCI-202907	Payment Date 06/24/25	Vendor IX 100 *** Pay	34012 F 07/04/25 ment Total	REDSAIL TECHNOLOGIES, 166.25 166.25	LLC Status 0.00 0.00	Issued 166.25 166.25
Payment Nu 27600	umber 1213720 15992560053625	Payment Date 06/24/25	Vendor IX 100	27600 07/02/25	SYMBRIA REHAB BILLING 44,583.48	Status 0.00	Issued 44,583.48

AP255 Date 06/24/25 Pay Group 1200 HEALTH AND WELFARE PAY GROUP USD Page Time 11:34 Bank Account Payment History

> Payment Date Range 06/24/25 thru 06/24/25

Cash Code 1414 Bank 071923909

Payment Code CHK

10555 824441266

10555 824441267

10555 824441268

10555 824441269

10555 824441270

10555 824441271

10555 824441272

Vendor	Invoice	Voucher A	uth PL	Due Date Dsc Date	Scheduled Amount	Discount Amount Net Pay	ment Amount
Payment Numbe 27600 MAY				27600 S 06/30/25 ment Total	YMBRIA REHAB BILLING 5,128.00 49,711.48	Status Issued 0.00 0.00	5,128.00 49,711.48
Payment Numbe 10555 124 10555 824 10555 824 10555 824	.A2902Z .430787 .430788 .432273	I: I: I: I:	Vendor X 100 X 100 X 100 X 100	06/13/25 07/19/25 07/19/25 07/19/25	YSCO FOOD SERVICES-CH 36.31 10.14 88.42 3,542.47	0.00 0.00 0.00 0.00	36.31 10.14 88.42 3,542.47
10555 824 10555 824 10555 824 10555 824 10555 824	.432275 .432276 .432277	I: I: I:	X 100 X 100 X 100	07/19/25 07/19/25 07/19/25 07/19/25 07/19/25	232.38 4,763.20 238.49 552.97 36.01	0.00 0.00 0.00 0.00 0.00	232.38 4,763.20 238.49 552.97 36.01

07/23/25

07/23/25

07/23/25

07/23/25

IX

IX

IX

IX

100

100

100

100

100 IX 07/23/25 2,701.66 0.00 2,701.66 100 07/23/25 IX54.87 0.00 54.87 IX 100 07/23/25 66.42 0.00 66.42 *** Payment Total 16,422.84 0.00 16,422.84 *** Payment Code CHK Total 90,956.33 90,956.33 0.00 Payment Count 9 *** Cash Code 1414 Total 94,450.08 0.00 94,450.08 Payment Count 10 *** Pay Group 1200 USD Total 94,450.08 0.00 94,450.08 Payment Count 10

345.33

66.57

184.26

3,503.34

0.00

0.00

0.00

0.00

Payment Currency USD

345.33

66.57

184.26

3,503.34

AP255 Date: 06/24/25 Time: 11:34 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 4

Pay Group: 1300 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062425 -Payment Numbers: Payment Code: 062425

AP255 Date 06/24/25 Pay Group 1300 PUBLIC SAFETY PAY GROUP USD Page 1 Bank Account Payment History

Payment Date Range 06/24/25 thru 06/24/25

Cash Code 1414 Bank 071923909

Payment Code ACH

Payment Currency USD

Vendor	Invoice	Voucher A	uth PL 	Due Date Dsc Da	ate Scheduled Amount	Discount Amount	Net Payment Amount
Payment Number 26753 1P	er 535728 Payment I 7N-VNDW-R7G6			26753 07/13/25 ment Total	AMAZON CAPITAL SERVIC 19.32 19.32	ES Status 0.00 0.00	Issued 19.32 19.32
		*** Pay		e ACH Total ment Count	19.32 1	0.00	19.32
		*** Cas		.414 Total ment Count	19.32 1	0.00	19.32
		*** Pay Gro	_	JSD Total ment Count	19.32 1	0.00	19.32

AP255 Date: 06/24/25 Time: 11:34 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 5

Pay Group: 1400 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062425 -Payment Numbers: Payment Code: 062425

AP255 Date 06/24/25 Pay Group 1400 JUDICIAL PAY GROUP USD Page Time 11:34 Bank Account Payment History

Payment Date Range 06/24/25 thru 06/24/25

Cash Code 1414 Bank 071923909

raymene bace mange	00/21/23	CIII a	00/21/23	
			Payment Currency	USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	ce Scheduled Amount	Discount Amount	Net Payment Amount
	er 535729 Payment TV-HQGC-CVGV D9-L3JL-13YC	Date 06/24/25	IX 104 IX 130	26753 07/08/25 06/18/25 yment Total	AMAZON CAPITAL SERVIC 68.40 62.90 131.30	Status 0.00 0.00 0.00	Issued 68.40 62.90 131.30
		*** P		e ACH Total yment Count	131.30	0.00	131.30

AP255 Date 06/24/25 Time 11:34 Pay Group 1400 JUDICIAL PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

06/24/25 thru 06/24/25 Payment Date Range

Cash Code 1414 Payment Code CHK Bank 071923909

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	ce Scheduled Amount Discount	Amount Net Payr	ment Amount
Payment Num 10593 2	ber 1213722 Paymen 35216	nt Date 06/24/25	Vendor IX 130 *** Pa	10593 06/18/25 ayment Total	AMERICAN PROBATION AND PAROLE 625.00 625.00	Status Issued 0.00	625.00 625.00
Payment Num 44316 M	ber 1213723 Paymer IL20250501				HALVORSON, JACOB 72.10 72.10		72.10 72.10
24015 E	ber 1213724 Paymen XP20250530				MENCONI, GINA 71.99 71.99		71.99 71.99
Payment Num 11337 2 11337 A	ber 1213725 Paymen 2JD43MAY2025 3JD327MAY2025 GR570.INDV.0530 GR572.INDV.0505 GR574.GRP.0506-0527 GR574.INDV.0527 GR578.GRP.0506-0520 GR584.INDV.0514 GR590.INDV.0517&0607 GR596.INDV.0506-0605 GR608.GRP.0506-0603 GR621.SOE.0410 GR622.GRP.0508-0605	nt Date 06/24/25	Vendor IX 130	07/09/25 07/09/25 07/09/25 07/09/25 07/09/25 07/09/25 07/09/25 07/09/25 07/09/25 05/30/25 07/09/25	NICKERSON & ASSOCIATES 290.00 410.00 72.00 72.00 67.50 45.00 67.50 72.00 144.00 216.00 180.00 2,000.00 180.00 3,816.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	290.00 410.00 72.00 72.00 67.50 45.00 67.50 72.00 144.00 216.00 180.00 2,000.00 180.00 3,816.00
Payment Num 39549 4 39549 4 39549 4 39549 4	ber 1213726 Paymer 25874197001 26113220001 27238471001 27969131001	IL Date 00/24/23	IX 130 IX 130 IX 130 IX 130 *** Pa	06/18/25 06/18/25 06/18/25 07/12/25 07/11/25 nyment Total	85.69 277.50 26.70 1,012.61 1,402.50	0.00 0.00 0.00 0.00 0.00	85.69 277.50 26.70 1,012.61 1,402.50
	ber 1213727 Paymer	nt Date 06/24/25	Vendor IX 131 *** Pa	26675 07/13/25 ayment Total	SLEPICKA, ELVA 80.00 80.00	Status Issued 0.00 0.00	80.00
		*** P;	ayment Cod Pa	de CHK Total Ayment Count	6,067.59 6	0.00	6,067.59
				1414 Total ayment Count		0.00	6,198.89
		*** Pay G	roup 1400 Pa	USD Total ayment Count	6,198.89 7	0.00	6,198.89

AP255 Date: 06/24/25 Time: 11:35 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY Step Nbr: 7

Pay Group: 1600 Cash Code: 1414 Class C Accounts Payable

062425

Payment Date: 062425 -Payment Numbers: Payment Code:

AP255 Date 06/24/25 Pay Group 1600 CONSERV & RECREATION PAY GROUP USD Bank Account Payment History

Page

Payment Date Range 06/24/25 thru 06/24/25

Cash Code 1414 Bank 071923909 Payment Code ACH Payment Currency USD

Vendor	Invoice	Voucher Auth	PL Due Date Dsc Da	te Scheduled Amount Discount	Amount Net Pay	ment Amount
	mber 535730 Payment 90230172 90236772	IX I	ndor 13295 100 04/20/25 100 07/13/25 ** Payment Total	CDM SMITH INC 3,121.77 799.23 3,921.00	Status Issued 0.00 0.00 0.00	3,121.77 799.23 3,921.00
Payment Num 10903 W	mber 535731 Payment W2427300.06	IX	ndor 10903 100 07/11/25 ** Payment Total	ENGINEERING RESOURCE ASSOC INC 5,232.68 5,232.68	Status Issued 0.00 0.00	5,232.68 5,232.68
	mber 535732 Payment 9342295122 9342295123	IX I	ndor 10124 100 07/04/25 100 07/04/25 ** Payment Total	GRAYBAR 46.06 5.42 51.48	Status Issued 0.00 0.00 0.00	46.06 5.42 51.48
		*** Paymen	t Code ACH Total Payment Count	9,205.16	0.00	9,205.16

AP255 Date 06/24/25 Pa Time 11:35 Ba

Pay Group 1600 CONSERV & RECREATION PAY GROUP USD Bank Account Payment History

Payment Date Range 06/24/25 thru 06/24/25

Cash Code 1414 Bank 071923909 Payment Code CHK Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Da	ate Scheduled Amount	Discount Amount	Net Payr	ment Amount
Payment Number 10008 6309	r 1213728 Payment 964095306 2025	Date 06/24/25	Vendor IX 100 *** Pa	10008 07/07/25 ayment Total	AT&T 55.49 55.49	Status 0.00 0.00	Issued	55.49 55.49
Payment Number 10023 1771 10023 7201	1213729 Payment 1842000 060325 1527000 060625	Date 06/24/25	Vendor IX 100 IX 100 *** Pa	10023 07/03/25 07/06/25 ayment Total	COM ED 52.70 46.36 99.06	Status 0.00 0.00 0.00	Issued	52.70 46.36 99.06
Payment Number 41888 102	1213730 Payment	Date 06/24/25	Vendor IX 100 *** Pa	41888 07/06/25 ayment Total	NAMEBADGES.COM 59.65 59.65	Status 0.00 0.00	Issued	59.65 59.65
Payment Number 10057 6353	2 1213731 Payment 35010001 061025	Date 06/24/25	Vendor IX 100 *** Pa	10057 07/10/25 ayment Total	NICOR GAS 164.95 164.95	Status 0.00 0.00	Issued	164.95 164.95
Payment Number 39549 4235 39549 4260	1213732 Payment 668356001 023132002	Date 06/24/25	Vendor IX 100 IX 100 *** Pa	39549 07/06/25 07/02/25 ayment Total	ODP BUSINESS SOLUTION 37.74 10.37 48.11	NS, LLC Status 0.00 0.00 0.00	Issued	37.74 10.37 48.11
					OUTDOOR WORLD INCENT: 119.94 119.94			
Payment Number 44039 P572	c 1213734 Payment 291	Date 06/24/25	Vendor IX 100 *** Pa	44039 04/25/25 ayment Total	PATEL, DEVARSHI 14,287.90 14,287.90	Status 0.00 0.00	Issued	14,287.90 14,287.90
Payment Number 28531 US_4	c 1213735 Payment 46452	Date 06/24/25	Vendor IX 100 *** Pa	28531 07/13/25 ayment Total	SIGNAL 88 LLC 175.00 175.00	Status 0.00 0.00	Issued	175.00 175.00
Payment Number 11201 3485	c 1213736 Payment 55593 053125 SW				UNITED STATES POSTAL 8.08 8.08			
		*** P	ayment Cod Pa	de CHK Total ayment Count	15,018.18 9	0.00		15,018.18
					24,223.34 12	0.00		24,223.34
		*** Pay G	roup 1600 Pa	USD Total ayment Count	24,223.34 12	0.00		24,223.34

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AP255 Date: 06/24/25 Time: 11:35 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 8

Pay Group: 2000 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062425 -Payment Numbers: Payment Code: 062425

AP255 Date 06/24/25 Time 11:35 Pay Group 2000 PUBLIC WORKS PAY GROUP USD Page Bank Account Payment History

Payment Currency USD

06/24/25 thru 06/24/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code	ACI						
Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Date	Scheduled Amount	Discount Amount	Net Payment Amount
Payment Numbe 41480 W17	r 535733 Payment D 56653	ate 06/24/25	IX 100	41480 # 07/18/25 syment Total	AL WARREN OIL COMPANY 20,711.25 20,711.25	INC Status 0.00 0.00	Issued 20,711.25 20,711.25
26753 1D9 26753 1DG 26753 1J9	r 535734 Payment D W-1XNK-PDCL 7-MKFP-H7CC 6-D169-9MMR Q-41KR-DRVJ	ate 06/24/25	IX 100 IX 100 IX 100 IX 100	26753 A 05/16/25 05/15/25 04/23/25 04/26/25 Nyment Total	AMAZON CAPITAL SERVIC 349.99 200.17 43.27 18.97 612.40	Status 0.00 0.00 0.00 0.00 0.00 0.00	Issued 349.99 200.17 43.27 18.97 612.40
Payment Numbe 11067 INO 11067 INO	0764400	ate 06/24/25	IX 100 IX 100	11067 F 05/15/25 05/15/25 yment Total	FOX VALLEY FIRE & SAF 382.78 497.88 880.66	ETY Status 0.00 0.00 0.00	Issued 382.78 497.88 880.66
		*** P		le ACH Total lyment Count	22,204.31	0.00	22,204.31

AP255 Date 06/24/25 Pay Group 2000 PUBLIC WORKS PAY GROUP USD Page 2 Bank Account Payment History

Payment Currency USD

Payment Date Range 06/24/25 thru 06/24/25

Cash Code 1414 Bank 071923909

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	te Scheduled Amount Dis	count Amount Net Pa	yment Amount
Payment Nun 10309 F 10309 F	nber 1213737 Payment HT8922 HT9002	Date 06/24/25	Vendor IX 100 IX 100 *** Pa	10309 06/05/25 06/07/25 ayment Total	ATLAS BOBCAT LLC 25.77 37.68 63.45	Status Issued 0.00 0.00 0.00	25.77 37.68 63.45
					ATLAS COPCO COMPRESSORS L 5,557.39 5,557.39		
					BLAINS FARM & FLEET 150.00 150.00		
Payment Num 12382 8	nber 1213740 Payment 3771201190721252061925	Date 06/24/25	Vendor IX 100 *** Pa	12382 07/19/25 ayment Total	COMCAST 253.85 253.85	Status Issued 0.00 0.00	253.85 253.85
Payment Num 14091 1	nber 1213741 Payment 1000830236	Date 06/24/25	Vendor IX 100 *** Pa	14091 07/12/25 ayment Total	ENVIRONMENTAL EXPRESS INC 57.78	Status Issued 0.00 0.00	57.78 57.78
Payment Num 12234 7	nber 1213742 Payment 7042253	Date 06/24/25	Vendor IX 100 *** Pa	12234 05/16/25 ayment Total	HAWKINS INC 1,189.19 1,189.19	Status Issued 0.00 0.00	1,189.19 1,189.19
					KARDON ENTERPRISES INC 1,025.00 1,025.00		
Payment Num 10200 I 10200 I 10200 I	nber 1213744 Payment IL0028398 (A) 2025 IL0031844 (A) 2025 IL0065188 (A) 2025	Date 06/24/25	Vendor IX 100 IX 100 IX 100 *** Pa	10200 07/18/25 07/18/25 07/18/25 ayment Total	ILLINOIS EPA 7,500.00 52,500.00 50,000.00 110,000.00	Status Issued 0.00 0.00 0.00 0.00	7,500.00 52,500.00 50,000.00 110,000.00
Payment Num	nber 1213745 Payment 14807940	Date 06/24/25	Vendor IX 100 *** Pa	10139 05/29/25 ayment Total	MCMASTER-CARR 46.31 46.31	Status Issued 0.00 0.00	46.31 46.31
Payment Num 11215 2 11215 2 11215 2	nber 1213746 Payment 247716A 247791A 248139A	Date 06/24/25	Vendor IX 100 IX 100 IX 100 *** Pa	11215 06/01/25 06/04/25 06/08/25 ayment Total	MID AMERICAN WATER INC 2,028.01 3,121.16 4,290.20 9,439.37	Status Issued 0.00 0.00 0.00 0.00	2,028.01 3,121.16 4,290.20 9,439.37
Payment Num 10185 8 10185 8 10185 8	nber 1213747 Payment 3771988 3773563	Date 06/24/25	Vendor IX 100		NEUCO INC 104.98 86.44 93.94		104.98 86.44

AP255 Date 06/24/25 Time 11:35 Pay Group 2000 PUBLIC WORKS PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

06/24/25 thru 06/24/25 Payment Date Range

Cash Code 1414 Bank 071923909

Vendor	Invoice	Voucher	Auth PL Due Date Dsc D	ate Scheduled Amount Discount	Amount Net Pa	yment Amount
Payment Numb	er 1213747 Payment	Date 06/24/25	Vendor 10185 *** Payment Total	NEUCO INC 285.36	Status Issued	285.36
10057 25	er 1213748 Payment 892110005 051625 185400007 052725	Date 06/24/25		156.77 75.69 232.46		156.77 75.69
Payment Numb 10070 17 10070 17 10070 C7 10070 C7	4583 4860 7791	Date 06/24/25	Vendor 10070 IX 100 06/05/25 IX 100 07/02/25 IX 100 05/31/25 IX 100 06/04/25 *** Payment Total	PACKEY WEBB FORD 121.25 134.92 219.23 1,491.83 1,967.23	Status Issued 0.00 0.00 0.00 0.00 0.00	121.25 134.92
Payment Numb 19699 00	er 1213750 Payment 54564	Date 06/24/25		PEREGRINE CORPORATION 462.00		462.00 462.00
Payment Numb 39476 14		Date 06/24/25	Vendor 39476 IX 100 06/15/25 *** Payment Total	ROWELL CHEMICAL CORPORATION 6,276.20 6,276.20	Status Issued 0.00 0.00	6,276.20 6,276.20
Payment Numb 43687 P2	er 1213752 Payment 5074-00-PL	Date 06/24/25	Vendor 43687 IX 100 05/10/25 *** Payment Total	SAVECO NORTH AMERICA INC. 362.96 362.96	Status Issued 0.00 0.00	
Payment Numb 46336 20	er 1213753 Payment 0/50003425	Date 06/24/25		TROJAN TECHNOLOGIES CORP 1,492.30 1,492.30	Status Issued 0.00 0.00	1,492.30
Payment Numb 11201 34	er 1213754 Payment 855593 053125 PW	Date 06/24/25	Vendor 11201 IX 100 06/30/25 *** Payment Total	UNITED STATES POSTAL SERVICE 20.01 20.01	Status Issued 0.00 0.00	
10597 61	er 1213755 Payment 09858278 PW 12353110 PW		Vendor 10597 IX 100 05/01/25 IX 100 05/31/25 *** Payment Total	VERIZON 796.81 797.05 1,593.86	Status Issued 0.00 0.00 0.00	796.81 797.05 1,593.86
Payment Numb 26490 35 26490 36		Date 06/24/25		VULCAN CONSTRUCTION MATERIALS	Status Issued 0.00 0.00 0.00	2.053.17
		*** P	ayment Code CHK Total Payment Count	143,033.78 20	0.00	143,033.78

AP255 Date 06/24/25 Time 11:35	Pay Group 2000 PUBLIC WORKS PAY GROUP Bank Account Payment History	USD		Page 4
Cash Code 1414 Bank	Payment Date Range 06/24/25 thru 071923909 *** Cash Code 1414 Total Payment Count	06/24/25 Payment Currency USD 165,238.09 23	0.00	165,238.09
	*** Pay Group 2000 USD Total	165,238.09	0.00	165,238.09

AP255 Date: 06/24/25 Time: 11:35 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 9

Pay Group: 5000 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062425 -Payment Numbers: Payment Code: 062425

AP255 Date 06/24/25 Pay Group 5000 DUPAGE COUNTY GRANTS PAY GROUP USD
Time 11:36 Bank Account Payment History

Payment Date Range 06/24/25 thru 06/24/25

Cash Code 1414 Bank 071923909

Payment Code ACH

Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	e Scheduled Amount	Discount Amount Net	Payment Amount
Payment Num 12531 3 12531 3 12531 3	85851 85853	Date 06/24/25	Vendor IX 105 IX 105 IX 105 *** Pa	12531 07/12/25 07/12/25 07/12/25 Lyment Total	CTS, INC. 3,795.00 2,397.00 3,690.00 9,882.00	Status Issu 0.00 0.00 0.00 0.00	3,795.00 2,397.00 3,690.00 9,882.00
Payment Num 23461 D	ber 535737 Payment HS-1760-25-2545	Date 06/24/25	Vendor IX 209 *** Pa	23461 06/23/25 Lyment Total	DUPAGE COUNTY COMMUNI 300.00 300.00	TY Status Issu 0.00 0.00	300.00 300.00
Payment Num 41966 0	ber 535738 Payment 52325-061325.LM	Date 06/24/25	Vendor IX 104 *** Pa	41966 06/18/25 Lyment Total	MCLAUGHLIN, LAUREN MA 645.00 645.00	E Status Issu 0.00 0.00	ed 645.00 645.00
		*** Pa	4	le ACH Total yment Count	10,827.00	0.00	10,827.00

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AP255 Date 06/24/25 Time 11:36 Pay Group 5000 DUPAGE COUNTY GRANTS PAY GROUP USD Bank Account Payment History Page

Payment Currency USD

06/24/25 thru 06/24/25 Payment Date Range

Cash Code 1414 Bank 071923909

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Date	e Scheduled Amount	Discount Amount	Net Payr	ment Amount
Payment Numk 46320 10	per 1213757 Pa 0718	ayment Date 06/24/25	Vendor IX 209 *** Pa	46320 S 06/07/25 yment Total	SANCHEZ, JAMES 2,000.00 2,000.00	Status 0.00 0.00	Issued	2,000.00
Payment Numk 43513 55	per 1213758 Pa 5045	ayment Date 06/24/25	Vendor IX 101 *** Pa	43513	ACTION SCREEN PRINT & 236.70 236.70	Status 0.00 0.00	Issued	236.70 236.70
Payment Numb 40619 20	per 1213759 Pa)8	ayment Date 06/24/25	Vendor IX 105 *** Pa	40619 C 06/20/25 yment Total	CDL AMERICA INC 6,050.00 6,050.00	Status 0.00 0.00		6,050.00
22065 20 22065 20 22065 20 22065 20 22065 20	Der 1213760 Pa 02506AG-01 02506GS-04 02506JA-04 02506NM-01 02506NW-01 02506TL-04	ayment Date 06/24/25	Vendor IX 105 IX Pa	22065 07/09/25 07/05/25 07/05/25 07/11/25 07/09/25 07/09/25 yment Total	COMNET GROUP INC 2,351.00 2,140.25 1,852.20 3,834.40 3,368.00 1,467.00 15,012.85	Status 0.00 0.00 0.00 0.00 0.00 0.00	Issued	2,351.00 2,140.25 1,852.20 3,834.40 3,368.00 1,467.00 15,012.85
			Vendor IX 209 *** Pa	41837 W 07/11/25 yment Total	NEB 4 HALF LLC 1,737.60 1,737.60	Status 0.00 0.00	Issued	1,737.60 1,737.60
Payment Numb 18752 EX	per 1213762 Pa KP20250508	ayment Date 06/24/25	Vendor IX 108 *** Pa	18752 E 06/07/25 yment Total	ELGES, JOY 256.04 256.04	Status 0.00 0.00	Issued	256.04 256.04
Payment Numb 12156 20	per 1213763 Pa 025-09	ayment Date 06/24/25	Vendor IX 105 *** Pa	12156 I 07/05/25 yment Total	ILLINOIS WELDING SCHO 10,000.00 10,000.00	OL Status 0.00 0.00	Issued	10,000.00
Payment Numb 24836 06	per 1213764 Pa 5162025	ayment Date 06/24/25	Vendor IX 104 *** Pa	24836 I 06/18/25 yment Total	LCFS-BEST START FOR F. 3,900.00 3,900.00	AMILIES Status 0.00 0.00	Issued	3,900.00
	per 1213765 Pa NV-4485R	ayment Date 06/24/25	Vendor IX 209 *** Pa	46342 M 07/17/25 yment Total	MEMORYFOX, INC 3,000.00 3,000.00	Status 0.00 0.00	Issued	3,000.00
Payment Numk 46319 20	per 1213766 Pa 03013837	ayment Date 06/24/25	Vendor IX 209 *** Pa	46319 M 07/15/25 yment Total	MR JIM'S AUTOMOTIVE 613.08 613.08	Status 0.00 0.00		613.08 613.08
Payment Numb 13781 06	per 1213767 Pa 5182025001	ayment Date 06/24/25	Vendor IX 101 *** Pa	13781 t 07/18/25 yment Total	UNIVERSAL INDUSTRIES 385.19 385.19	INC Status 0.00 0.00	Issued	385.19 385.19

AP255 Date 06/24/25 Time 11:36

Pay Group 5000 DUPAGE COUNTY GRANTS PAY GROUP USD Bank Account Payment History

Payment Date Range

06/24/25 thru 06/24/25

Payment Currency USD

Cash Code 1414	Bank	071923909	Layi
Payment Code C	HK		

Vendor	Invoice	Voucher	Auth PL I	Due Date Dsc Date	Scheduled Amount	Discount Amount	Net Payment Amount
		***	Payment Code Paym	CHK Total ment Count	43,191.46 11	0.00	43,191.46
		***	Cash Code 14	414 Total ment Count	54,018.46 14	0.00	54,018.46
		*** Pay	Group 5000 US Paym	SD Total ment Count	54,018.46 14	0.00	54,018.46

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Payment of Claims



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: 25-1629 Agenda Date: 7/8/2025 **Agenda #:** 8.E.

AP255 Date: 06/26/25 Time: 10:35 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: AP255-5000

Step Nbr: 1

Pay Group: 5000 Cash Code: 3910

Class C Account

Payment Date: 062725 -Payment Numbers: Payment Code: AUT 062725

Auto Debit

AP255 Date 06/26/25 Pay Group 5000 DUPAGE COUNTY GRANTS PAY GROUP USD Bank Account Payment History

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Payment Date Range 06/27/25 thru 06/27/25

Cash Code 3910 Bank 071000013 Payment Code AUT

Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc	Date Scheduled Amount	Discount Amount	Net Payment Amount
Payment Num 10023 1		Payment Date 06/27/2	200	10023 07/25/25 ayment Total	COMMONWEALTH EDISON 3,805.00 3,805.00		Issued 3,805.00 3,805.00
Payment Num 10057 1		Payment Date 06/27/2	200	10057 07/25/25 ayment Total	NICOR GAS 609.00 609.00		Issued 609.00 609.00
		***	4	de AUT Total ayment Count	4,414.00	0.00	4,414.00
		***		3910 Total ayment Count	4,414.00	0.00	4,414.00
		*** Pay	Group 5000 Pa	USD Total	4,414.00	0.00	4,414.00

Payment of Claims



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

AP255 Date: 06/27/25 Time: 11:41 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 1

Pay Group: 1000 Cash Code: 1414

Class C Accounts Payable

Payment Date: 062725 -Payment Numbers: Payment Code: 062725

AP255 Date 06/27/25 Pay Group 1000 GENERAL FUND PAY GROUP USD Page 1 Bank Account Payment History

Payment Currency USD

Payment Date Range 06/27/25 thru 06/27/25

Cash Code 1414 Bank 071923909

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	e Scheduled Amount	Discount Amount 1	Net Payment Amount
Payment Nu 11557	mber 535745 P 061825 062425	ayment Date 06/27/25	Vendor IX 100 *** Pa	11557 06/25/25 yment Total	ABBATACOLA, ROBERT 1,080.00 1,080.00	Status 3 0.00 0.00	1,080.00 1,080.00
Payment Nu 26753 26753 26753 26753 26753 26753 26753 26753 26753	mber 535746 P. 17G3-HJW3-RRMH 17VM-RKQG-TNQY 1FK9-NYP6-7JJY 1GK7-RFXK-3FCC 1KTP-WJV4-HR97 1PN1-6GWD-46DJ 1XC7-NDQF-7J1C 1YJJ-H6C9-RWKL 1YVN-RKMW-JK9R	ayment Date 06/27/25	Vendor IX 100	26753 07/25/25 07/06/25 07/03/25 07/03/25 07/05/25 06/26/25 07/23/25 07/17/25 07/24/25 yment Total	AMAZON CAPITAL SERVIO 31.98 29.98 48.90 90.65 29.27 486.69 113.05 20.90 139.99 991.41	CES Status 3 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	31.98 29.98 48.90 90.65 29.27 486.69 113.05 20.90 139.99 991.41
Payment Nu 10667 10667	mber 535747 P AE37H4E AE4Z43R	ayment Date 06/27/25	Vendor IX 100 IX 100 *** Pa	10667 06/29/25 07/05/25 yment Total	CDW GOVERNMENT INC 171.61 436.49 608.10	Status 3 0.00 0.00 0.00	Issued 171.61 436.49 608.10
Payment Num 25213	mber 535748 P 2023CM1584 101620	ayment Date 06/27/25 24	Vendor IX 100 *** Pa	25213 07/26/25 yment Total	CUDA, PEGGY 84.00	Status 1 0.00 0.00	84.00 84.00
Payment Num	mber 535749 P. IN00772167 IN00772173 IN00772177 IN00772223 IN00773852 IN00773855 IN00773856 IN00773856 IN00773858 IN00773861 IN00773861 IN00773863 IN00773864 IN00773864 IN00773865 IN00773865 IN00773869 IN00773870 IN00773870 IN00773871 IN00773871 IN00774135 IN00774142	ayment Date 06/27/25	Vendor IX 100	11067 06/13/25 06/13/25 06/13/25 06/13/25 06/21/25	84.00 FOX VALLEY FIRE & SAI 300.00 500.00 400.00 600.00 1,083.90 932.10 325.85 165.15 141.60 119.60 171.90 87.30 154.65 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 500.00 500.00	FETY Status 3 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	300.00 500.00 400.00 600.00 1,083.90 932.10 325.85 165.15 141.60 119.60 171.90 87.30 154.65 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00 38.00

AP255 Date 06/27/25 Time 11:42 Pay Group 1000 GENERAL FUND PAY GROUP Bank Account Payment History USD Page

> 06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Payment Code ACH Bank 071923909

Payment Currency USD

rayment ex	046 11011						
	Invoice	Voucher	Auth PL	Due Date Dsc Dat	te Scheduled Amount	Discount Amount	Net Payment Amount
11067 11067 11067 11067 11067 11067 11067 11067 11067	umber 535749 IN00774145 IN00774147 IN00774148 IN00774823 IN00774830 IN00774846 IN00774849 IN00774852 IN00774854 IN00774857 IN00774885	Payment Date 06/27/25	Vendor IX 100	11067 06/26/25 06/26/25 06/26/25 06/28/25 06/28/25 06/28/25 06/28/25 06/28/25 06/28/25 06/28/25 06/28/25 06/28/25	FOX VALLEY FIRE & SAF 300.00 300.00 350.00 225.00 300.00 500.00 150.00 400.00 400.00 350.00 250.00	Status 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	Issued 300.00 300.00 350.00 225.00 300.00 500.00 150.00 400.00 400.00 350.00 250.00 10,398.05
Payment Nu 10157 10157 10157 10157 10157 10157	9520430308 9527077870 9529663065 9529663073 9532662393 9534408423	Payment Date 06/27/25	Vendor IX 100 IX 100 IX 100 IX 100 IX 100 IX 100	10157 06/26/25 07/03/25 07/04/25 07/04/25 07/06/25 07/10/25	GRAINGER 338.62 54.15 65.88 1,486.56 404.01 41.84	Status 0.00 0.00 0.00 0.00 0.00	338.62 54.15 65.88 1,486.56 404.01 41.84
Payment No 10124 10124 10124 10124 10124 10124 10124 10124 10124 10124	umber 535751 9342228836 9342240637 9342270302 9342309299 9342310002 9342310005 9342310006 9342310007 9342356818 9342362574	Payment Date 06/27/25	Vendor IX 100	10124 06/28/25 06/28/25 07/02/25 07/05/25 07/05/25 07/05/25 07/05/25 07/05/25 07/05/25 07/10/25 07/11/25 ayment Total	GRAYBAR 33.00 419.15 672.06 109.68 215.52 627.78 172.39 434.23 5,371.46 360.00 5,177.28 13,592.55	Status 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	33.00 419.15 672.06 109.68 215.52 627.78 172.39 434.23 5,371.46 360.00 5,177.28 13,592.55
Payment Nu 45849	umber 535752 061725 062025	Payment Date 06/27/25	Vendor IX 100 *** Pa	45849 07/25/25 ayment Total	JOSIC, STJEPAN 280.00 280.00	Status 0.00 0.00	1ssued 280.00 280.00
Payment Nu 39480	umber 535753 674345B9-0004	Payment Date 06/27/25	Vendor IX 100 *** Pa	39480 07/25/25 ayment Total	JUSTICETEXT INC. 50,000.00 50,000.00	Status 0.00 0.00	Issued 50,000.00 50,000.00
Payment Ni 28996 28996 28996	675 694	Payment Date 06/27/25	Vendor IX 100 IX 100 IX 100	28996 05/30/25 07/17/25 07/18/25	NASER, EVA Y 240.20 360.20 300.00	Status 0.00 0.00 0.00	Issued 240.20 360.20 300.00

AP255 Date 06/27/25 Time 11:42 Pay Group 1000 GENERAL FUND PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Bank 071923909

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Vendor In	voice 	Voucher	Auth PL Du	ie Date Dsc Date	e Scheduled Amount Di	iscount Amount Net Pa 	yment Amount
Payment Number 28996 696 28996 697	535754 Payment 1		Vendor IX 100 07 IX 100 07 *** Payme	28996 I 7/20/25 7/23/25 ent Total	NASER, EVA Y 610.20 610.20 2,120.80	Status Issued 0.00 0.00 0.00	610.20 610.20 2,120.80
Payment Number 11154 130175 11154 130175	535755 Payment 1 45-00 45-01	Date 06/27/25	Vendor IX 100 06 IX 100 06 *** Payme	11154 I 5/27/25 5/28/25 ent Total	PORTER PIPE & SUPPLY 1,171.45 602.57 1,774.02	Status Issued 0.00 0.00 0.00	1,171.45 602.57 1,774.02
Payment Number 14308 105652	535756 Payment 1	Date 06/27/25	Vendor	14308	PUBLIC SAFETY DIRECT INC 7,534.52 7,534.52	Status Issued	
Payment Number 20395 061125	535757 Payment 1 23DN129	Date 06/27/25	Vendor IX 100 07 *** Payme	20395 \$ 7/23/25 ent Total	SAVIANO, FRAN 80.00 80.00	Status Issued 0.00 0.00	80.00
Payment Number 10159 D13786	535758 Payment 1 31	Date 06/27/25	Vendor IX 100 07 *** Payme	10159 \$ 7/13/25 ent Total	SOUND INCORPORATED 750.00 750.00	Status Issued 0.00 0.00	750.00 750.00
Payment Number 12540 2021TR	535759 Payment 1 40452 05282025	Date 06/27/25	Vendor IX 100 07 *** Payme	12540 \$ 7/18/25 ent Total	STEFANI, LIDIA 16.00 16.00	Status Issued 0.00 0.00	16.00
Payment Number 12313 061825	535760 Payment 1 062425	Date 06/27/25	Vendor IX 100 06 *** Payme	12313 \$ 5/25/25 ent Total	SULLIVAN, ANTHONY 700.00 700.00	Status Issued 0.00 0.00	
Payment Number 44522 641678 44522 643697 44522 657757 44522 657799 44522 659020	4 9 4		Vendor IX 100 12 IX 100 01 IX 100 06 IX 100 07 IX 100 07 *** Payme	2/02/24 2/01/25 5/20/25 7/02/25 7/10/25 ent Total	TOSHIBA AMERICA BUSINES: 186.00 176.74 150.52 215.02 5,724.97 6,453.25	0.00 0.00 0.00 0.00 0.00	186.00 176.74 150.52 215.02 5,724.97 6,453.25
Payment Number 10544 853752	535762 Payment 1	Date 06/27/25		10544 7/06/25	FRADEMARK PRODUCTS INC 56.70	Status Issued 0.00	
Payment Number 29895 14830	535763 Payment	Date 06/27/25	Vendor IX 100 07 *** Payme	29895 \\7/21/25 ent Total	WELLSPRING CLOUD SOLUTION 700.00 700.00	DNS LLC Status Issued 0.00 0.00	700.00
		*** Pa	yment Code A Payme	ACH Total ent Count	99,610.46 19	0.00	99,610.46

AP255 Date 06/27/25 Pay Group 1000 GENERAL FUND PAY GROUP USD Page Time 11:42 Bank Account Payment History

Payment Currency USD

06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Bank 071923909

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	e Scheduled Amount	Discount Amount	Net Pay	ment Amount
Payment Numl 27507 7		Date 06/27/25	Vendor IX 100 *** Pa				Issued	2,825.00 2,825.00
	ber 1213769 Payment 516472476	Date 06/27/25	IX 100	10674 06/30/25 ayment Total	AIRGAS USA 112.65 112.65	Status 0.00 0.00		112.65 112.65
33755 II	ber 1213770 Payment N1-910426263 N1-910426460		Vendor IX 100 IX 100 *** Pa	33755 07/12/25 07/13/25 ayment Total	ALLIED UNIVERSAL TECHN 1,375.97 825.00 2,200.97	NOLOGY Status 0.00 0.00 0.00		
Payment Numl 43804 23		Date 06/27/25	IX 100	07/26/25	ALOHA DOCUMENT SERVICE 45.00 45.00	0.00	Issued	45.00
10008 7 10008 7	ber 1213772 Payment 08Z86003706 2025 08Z86117606 2025 08Z86675906 2025	Date 06/27/25	IX 100 IX 100 IX 100	10008 07/16/25 07/16/25 07/16/25 ayment Total	AT&T 8,420.30 3,434.42 1,186.83 13,041.55	Status 0.00 0.00 0.00 0.00	Issued	8,420.30 3,434.42 1,186.83 13,041.55
Payment Numl 10009 23 10009 23	ber 1213773 Payment 87306099963X06082025 87352264996X06082025	Date 06/27/25	Vendor IX 100 IX 100 *** Pa	10009 06/18/25 06/30/25 ayment Total	AT&T MOBILITY 7,058.83 417.14 7,475.97	Status 0.00 0.00 0.00	Issued	7.058.83
Payment Numl	ber 1213774 Payment NV7558324	Date 06/27/25	Vendor IX 100	27468	BARCODES LLC 93.65 93.65		Issued	93.65 93.65
Payment Numl 45852 03		Date 06/27/25	IX 100	07/19/25	BLUE CAN TRAINING SOLU 180.00 180.00		Issued	180.00 180.00
	ber 1213776 Payment 2040055752	Date 06/27/25	IX 100	20166 07/03/25 ayment Total	BRAY SALES MIDWEST 444.06 444.06	Status 0.00 0.00	Issued	444.06 444.06
Payment Numl 24086 E	ber 1213777 Payment XP20250623	Date 06/27/25	Vendor IX 100 *** Pa	24086 06/26/25 ayment Total	BUCKARDT, MELISSA 16.00 16.00	Status 0.00 0.00	Issued	16.00 16.00
Payment Numl 36027 1	ber 1213778 Payment 247	Date 06/27/25	Vendor IX 100 *** Pa	36027 07/09/25 ayment Total	CAROL STREAM FPD 17,782.81 17,782.81	Status 0.00 0.00	Issued	17,782.81 17,782.81
Payment Numl	ber 1213779 Payment	Date 06/27/25	Vendor	10019	CENTRAL DUPAGE HOSPITA	AL Status	Issued	

AP255 Date 06/27/25 Pay Group 1000 GENERAL FUND PAY GROUP USD Page 5
Time 11:42 Bank Account Payment History

Payment Currency USD

2,366.00

856.00

190.00

164.00

2,366.00

EDWARD OCCUPATIONAL HEALTH

0.00

0.00

0.00

0.00

Status Issued

0.00

Payment Date Range 06/27/25 thru 06/27/25

Cash Code 1414 Bank 071923909

Payment Code CHK

12307 910127935

19875 00201397-00

19875 00202594-00

19875 00202596-00

Payment Number

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	ce Scheduled Amount Discount	Amount Net Pa	yment Amount
10019 10019 10019 10019 10019 10019	umber 1213779 6797991800 6825292200 6859060700 6859778800 6867398500 6874117500	Payment Date 06/27/25	Vendor IX 100	10019 06/01/25 06/05/25 06/22/25 06/22/25 06/28/25 07/03/25 ayment Total	CENTRAL DUPAGE HOSPITAL 647.10 23,176.57 34,419.22 9,225.11 463.50 848.47 68,779.97	Status Issued 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	647.10 23,176.57 34,419.22 9,225.11 463.50 848.47 68,779.97
Payment No 27228 27228 27228	umber 1213780 CDEP89391C8122 CDEP89722C8121 CDEP90496C8121	Payment Date 06/27/25	Vendor IX 100 IX 100 IX 100 *** Pa	27228 06/18/25 06/20/25 06/25/25 ayment Total	CENTRAL DUPAGE EMERGENCY PHYS 135.80 81.43 125.61 342.84	Status Issued 0.00 0.00 0.00 0.00	135.80 81.43 125.61 342.84
Payment No 10074 10074	umber 1213781 321-016307A 321-018414A	Payment Date 06/27/25	Vendor IX 100 IX 100 *** Pa	10074 09/09/24 04/03/25 ayment Total	CITY OF WHEATON	Status Issued 0.00 0.00 0.00	1,009.98 2,292.33 3,302.31
					CNA SURETY 30.00 30.00		
					COM ED 265,947.41 265,947.41		
Payment Nu 10023	umber 1213784 2947232000 05192	Payment Date 06/27/25	Vendor IX 100 *** Pa	10023 06/18/25 ayment Total	COM ED 87.78	Status Issued 0.00 0.00	87.78 87.78
Payment Nu 12382	umber 1213785 241191512	Payment Date 06/27/25	Vendor IX 100 *** Pa	12382 06/14/25 ayment Total	COMCAST 426.86 426.86	Status Issued 0.00 0.00	426.86 426.86
Payment Nu 39693	umber 1213786 061325	Payment Date 06/27/25	Vendor IX 100 *** Pa	39693 07/13/25 ayment Total	DEMLING, JOHN W. 277.50 277.50	Status Issued 0.00 0.00	277.50 277.50
Payment Nu	umber 1213787	Payment Date 06/27/25	Vendor	12307	EATON CORPORATION	Status Issued	

IX 100

IX 100

IX 100

IX 100

Vendor

1213788 Payment Date 06/27/25

06/26/25

05/30/25

07/23/25

06/30/25

19875

*** Payment Total

2,366.00

2,366.00

856.00

190.00

164.00

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Payment Date Range 06/27/25 thru 06/27/25

Cash Code 1414 Bank 071923909 Payment Code CHK Payment Currency USD

Vendor	Invoice	Voucher	Auth PL Due Date Dsc Da	ate Scheduled Amount Discount	Amount Net Pay	yment Amount
Payment Numbe	er 1213788 Payme	nt Date 06/27/25	Vendor 19875 *** Payment Total	EDWARD OCCUPATIONAL HEALTH 1,210.00	Status Issued	
Payment Number 11196 8-8	er 1213789 Payme: 397-24907	nt Date 06/27/25	Vendor 11196 IX 100 07/18/25 *** Payment Total	FEDEX 37.74 37.74	Status Issued 0.00	
Payment Number 11196 8-8		nt Date 06/27/25	Vendor 11196 IX 100 07/18/25 *** Payment Total	FEDEX 34.84 34.84	Status Issued 0.00	34.84 34.84
Payment Number 14369 315		nt Date 06/27/25	Vendor 14369 IX 100 05/31/25 *** Payment Total	GALAXY DIGITAL 2,756.25 2,756.25	Status Issued 0.00	2,756.25
Payment Number 12091 E35		nt Date 06/27/25	Vendor 12091 IX 100 06/23/25 *** Payment Total	GENESIS ORTHOPEDICS & SPORTS 426.00	Status Issued 0.00	426.00 426.00
Payment Number 41453 342		nt Date 06/27/25	Vendor 41453 IX 100 06/18/25 *** Payment Total	GRAMMARLY, INC 1,728.00 1,728.00	Status Issued 0.00 0.00	1.728.00
Payment Number 14023 020	er 1213794 Payme: 0325 031425	nt Date 06/27/25	Vendor 14023 IX 100 06/22/25 *** Payment Total	HANLON, DANIEL F 518.00 518.00	Status Issued 0.00	518.00
Payment Number 30498 801	er 1213795 Payme: 1552-H	nt Date 06/27/25	Vendor 30498 IX 100 07/11/25 *** Payment Total	HEARTLAND BUSINESS SYSTEMS 147,606.25 147,606.25	Status Issued 0.00 0.00	147,606.25 147,606.25
Payment Number 32002 EXE		nt Date 06/27/25	Vendor 32002 IX 100 06/26/25 *** Payment Total	HESTER, JUSTIN T. 59.00 59.00	Status Issued 0.00	59.00
Payment Number 10432 462		nt Date 06/27/25	Vendor 10432 IX 100 06/20/25 *** Payment Total	HILTI INC 587.46 587.46	Status Issued 0.00 0.00	587.46 587.46
Payment Number 19150 971	er 1213798 Payme: 11713	nt Date 06/27/25	Vendor 19150 IX 100 06/29/25 *** Payment Total	IL OFFICE OF THE STATE 70.00	Status Issued 0.00	
Payment Number 10809 110		nt Date 06/27/25	Vendor 10809 IX 100 06/16/25 *** Payment Total	INSIGHT PUBLIC SECTOR 205.42 205.42	Status Issued 0.00	205.42 205.42
Payment Number 12833 319		nt Date 06/27/25	Vendor 12833 IX 100 05/14/25	ROSELL, LUIS B, PSY.D. 3,000.00	Status Issued 0.00	3,000.00

AP255 Date 06/27/25 Time 11:42 Pay Group 1000 GENERAL FUND PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Bank 071923909

Vendor Invoi	ce Voucher	Auth PL Due Date Dsc D	ate Scheduled Amount Discount	Amount Net Pay	ment Amount
Payment Number 1: 12833 3204B	213800 Payment Date 06/27/2	5 Vendor 12833 IX 100 05/29/25 *** Payment Total	ROSELL, LUIS B, PSY.D. 3,500.00 6,500.00	Status Issued 0.00 0.00	
Payment Number 1: 43736 MIL202505	213801 Payment Date 06/27/2 06	5 Vendor 43736 IX 100 06/13/25 *** Payment Total	MCDONNELL, THOMAS 57.12 57.12		57.12 57.12
Payment Number 1: 37860 123722	213802 Payment Date 06/27/2		MONTERREY SECURITY 21,638.00 21,638.00		21,638.00 21,638.00
Payment Number 1 10057 120198180 10057 552269000 10057 679732100	213803 Payment Date 06/27/2 58 050525 03 051425 07 060225	5 Vendor 10057 IX 100 06/04/25 IX 100 06/13/25 IX 100 07/02/25 *** Payment Total	NICOR GAS 1,131.12 335.21 19,509.26 20,975.59	Status Issued 0.00 0.00 0.00 0.00	1.131.12
Payment Number 1: 10177 380416 10177 380458 10177 380526 10177 380745 10177 380746 10177 380894	213804 Payment Date 06/27/2		NORTH EAST MULTI REGIONAL		375.00 375.00 350.00 510.00 255.00 350.00 2,215.00
Payment Number 1: 22125 P75443576 22125 P75443581 22125 P75560444	0	5 Vendor 22125	NORTHWESTERN MEDICAL FACULTY	Status Issued 0.00 0.00	32.80
Payment Number 1: 39549 422609581	213806 Payment Date 06/27/2 001		ODP BUSINESS SOLUTIONS, LLC 95.98 95.98	Status Issued 0.00 0.00	95.98 95.98
Payment Number 1: 29508 2025 #76 29508 2025 #77	213807 Payment Date 06/27/2	5 Vendor 29508 IX 100 07/18/25 IX 100 07/23/25 *** Payment Total	OKUNSKAYA, TATIANA 180.86 180.86 361.72	Status Issued 0.00 0.00 0.00	180.86 180.86 361.72
Payment Number 1. 10369 339558	213808 Payment Date 06/27/2	5 Vendor 10369 IX 100 07/16/25 *** Payment Total	PADDOCK PUBLICATIONS INC 59.80 59.80	Status Issued 0.00 0.00	59.80 59.80
Payment Number 1. 11673 MIP INV.	213809 Payment Date 06/27/2 1 JUNE25	5 Vendor 11673 IX 100 07/16/25	PARENTS ALLIANCE EMPLOY PROJ 6,986.88	Status Issued 0.00	6,986.88

AP255 Date 06/27/25 Time 11:42 Pay Group 1000 GENERAL FUND PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Bank 071923909

Vendor Inv	voice	Voucher	Auth PL Due Date Dsc I	Date Scheduled Amount Discount	Amount Net Payr	ment Amount
Payment Number	1213809 Payment	Date 06/27/25	Vendor 11673 *** Payment Total	PARENTS ALLIANCE EMPLOY PROJ 6,986.88	Status Issued 0.00	6,986.88
Payment Number 11114 273761	1213810 Payment	Date 06/27/25	TTT 100 0F/10/0F	PET SUPPLIES PLUS 132.94 132.94	Status Issued 0.00 0.00	132.94 132.94
Payment Number 46337 2506063		Date 06/27/25		ENERGY & ENVIRONMENTAL 1,225.00 1,225.00	Status Issued 0.00 0.00	1,225.00 1,225.00
Payment Number 11145 2417873 11145 2418033 11145 2418033 11145 2418033 11145 2418033 11145 2418033 11145 2418033 11145 2418043 11145 2418043 11145 2418043 11145 2418043 11145 2418043 11145 2418043 11145 2418043 11145 2418043 11145 2418043 11145 2418043 11145 2418043 11145 2418043 11145 2418043 11145 2418043 11145 2418043 11145 2418043	3 5 2 3 4 4 5 6 7 8 0 1 1 2 2 3 4 4 5 5		IX 100 07/18/25	RAY O'HERRON CO INC 28.08 600.00 299.36 90.94 584.71 1,231.56 200.08 2.89 457.20 195.17 141.19 409.67 305.12 89.18 31.71 35.75 67.14 4,769.75	Status Issued 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	28.08 600.00 299.36 90.94 584.71 1,231.56 200.08 2.89 457.20 195.17 141.19 409.67 305.12 89.18 31.71 35.75 67.14 4,769.75
Payment Number 39453 21177	1213813 Payment	Date 06/27/25	Vendor 39453 IX 100 07/10/25 *** Payment Total	REVIZE LLC 1,250.00 1,250.00	Status Issued 0.00 0.00	1,250.00 1,250.00
Payment Number 10034 S162400 10034 S16250		Date 06/27/25	Vendor 10034 IX 100 06/27/25 IX 100 06/27/25 *** Payment Total	ROYAL PIPE & SUPPLY CO. 95.26 170.74 266.00	Status Issued 0.00 0.00 0.00	95.26 170.74 266.00
Payment Number 12422 SPI211	1213815 Payment 11823	Date 06/27/25	Vendor 12422 IX 100 06/27/25 *** Payment Total	RUSSO POWER EQUIPMENT 360.99 360.99	Status Issued 0.00 0.00	360.99 360.99
Payment Number 10540 A57982	1213816 Payment 2025	Date 06/27/25	Vendor 10540 IX 100 06/24/25 *** Payment Total	SECRETARY OF STATE 165.00 165.00	Status Issued 0.00 0.00	165.00 165.00
Payment Number	1213817 Payment	Date 06/27/25	Vendor 10540	SECRETARY OF STATE	Status Issued	

AP255 Date 06/27/25 Time 11:42 Pay Group 1000 GENERAL FUND PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Bank 071923909

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Date	e Scheduled Amount	Discount Amount	Net Payment Amount
Payment Nun 10540 A	nber 1213817 A58649 2025	Payment Date 06/27/	25 Vendor IX 100 *** Pay	10540 S 06/24/25 yment Total	SECRETARY OF STATE 165.00 165.00	Status 0.00 0.00	Issued 165.00 165.00
Payment Num 30394 1	mber 1213818	Payment Date 06/27/	25 Vendor IX 100 *** Pay	30394 S 07/18/25 yment Total	SMAL, PAWEL 234.10 234.10	Status 0.00 0.00	Issued 234.10 234.10
Payment Num 10580 9 10580 9	mber 1213819 90307186 90307187	Payment Date 06/27/	25 Vendor IX 100 IX 100 *** Pay	10580 S 06/27/25 06/27/25 yment Total	SMITHS DETECTION INC. 2,700.00 5,781.66 8,481.66	Status 0.00 0.00 0.00	Issued 2,700.00 5,781.66 8,481.66
Payment Num 10643 S	mber 1213820 S101024605.001	Payment Date 06/27/	IX 100 *** Pay	06/14/25 yment Total	SOUTH SIDE CONTROL SU 470.84 470.84	0.00	470.84 470.84
40928 1 40928 1	I1767381 I1767382	Payment Date 06/27/			STREICHER'S, INC. 1,788.00 1,788.00 3,576.00		Issued 1,788.00 1,788.00 3,576.00
Payment Nun 29839 E	mber 1213822 EXP20250622	Payment Date 06/27/	25 Vendor IX 100 *** Pay	29839 T 06/23/25 yment Total	THOMPSON, KATHERINE 12.19 12.19	Status 0.00 0.00	Issued 12.19 12.19
11169 6	mber 1213823 5167522202 351984223	Payment Date 06/27/	25 Vendor IX 100 IX 100 *** Pay	11169 T 07/18/25 06/29/25 yment Total	THOMSON REUTERS-WEST 376.20 627.84 1,004.04	Status 0.00 0.00 0.00	Issued 376.20 627.84 1,004.04
11201 3 11201 3 11201 3	34855593 053125 34855593 053125 34855593 053125		IX 100 IX 100 IX 100 *** Pay	06/30/25 06/30/25 06/30/25 yment Total	JNITED STATES POSTAL 5.63 .69 467.15 473.47	0.00 0.00 0.00 0.00	5.63 .69 467.15 473.47
Payment Num 43511 4	mber 1213825 456789	Payment Date 06/27/	25 Vendor IX 100 *** Pay	43511 U 07/20/25 yment Total	JS GAS 1,820.00 1,820.00	Status 0.00 0.00	Issued 1,820.00 1,820.00
Payment Num 10068 5	mber 1213826 5947825-0	Payment Date 06/27/	25 Vendor IX 100 *** Pay	10068 W 07/23/25 yment Total	NAREHOUSE DIRECT, INC 34.64 34.64		
Payment Num 10989 1 10989 3	mber 1213827 1014073 37242TO	Payment Date 06/27/	25 Vendor IX 100 IX 100	10989 W 06/29/25 06/26/25	NATER ONE 29.85 50.45	Status 0.00 0.00	Issued 29.85 50.45

AP255 Date 06/27/25 Pay Group 1000 GENERAL FUND PAY GROUP USD Page 10 Bank Account Payment History

Payment Date Range 06/27/25 thru 06/27/25

Cash Code 1414 Bank 071923909

Payment Code CHK

Payment Currency USD

Vendor Inv	oice	Voucher	Auth PL	Due Date Dsc Dat	ce Scheduled Amount	Discount Amount Net Pa	yment Amount
Payment Number	1213827 Payment D	Date 06/27/25	Vendor *** Pa	10989 yment Total	WATER ONE 80.30	Status Issued 0.00	80.30
10037 027567- 10037 027573- 10037 027575- 10037 027577- 10037 036669- 10037 036675- 10037 036681- 10037 036741- 10037 037333-			IX 100 IX Pa	06/22/25 06/22/25 06/22/25 06/22/25 06/22/25 06/22/25 06/22/25 06/22/25 06/22/25 06/22/25 yment Total	49.08 13.00 17.51 13.00 2,800.64 20,135.46 852.00 504.68 1,095.58 17.51 25,498.46	0.00 0.00 0.00 0.00 0.00 0.00 0.00	49.08 13.00 17.51 13.00 2,800.64 20,135.46 852.00 504.68 1,095.58 17.51 25,498.46
			Vendor IX 100 IX 100 *** Pa	46347 07/23/25 07/23/25 yment Total	WICKLANDER-ZULAWSKI & 1,725.00 1,155.00 2,880.00	Status Issued 0.00 0.00 0.00	
Payment Number 12471 WLCP000 12471 WLCP000	1213830 Payment D 000993901E 000996292E	Pate 06/27/25	Vendor IX 100 IX 100 *** Pa	12471 06/16/25 06/20/25 yment Total	WINFIELD LABORATORY 8.05 19.81 27.86	Status Issued 0.00 0.00 0.00	8.05 19.81 27.86
Payment Number 12560 WPCA000	1213831 Payment D 000276841E	Date 06/27/25	Vendor IX 100 *** Pa	12560 03/26/25 yment Total	WINFIELD PATHOLOGY CO 24.45 24.45	ONSULTANTS Status Issued 0.00 0.00	24.45
		*** Pa	ayment Cod Pa	e CHK Total yment Count	652,938.10 64	0.00	652,938.10
		*** Ca	ash Code Pa	1414 Total yment Count	752,548.56 83	0.00	752,548.56
				USD Total yment Count		0.00	752,548.56

AP255 Date: 06/27/25 Time: 11:42 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY Step Nbr: 2

Pay Group: 1100 Cash Code: 1414

Class C Accounts Payable

Payment Date: 062725 -Payment Numbers: Payment Code: 062725

AP255 Date 06/27/25 Time 11:42 Pay Group 1100 GENERAL GOVERNMENT PAY GROUP USD Page Bank Account Payment History

> 06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Currency USD Payment Code ACH

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	e Scheduled Amount	Discount Amount	Net Payment Amount
	oer 535764 Payment J3Y-JDGW-MVNF NLM-F9XG-43TQ	Date 06/27/25	Vendor IX 120 IX 150 *** Pa	26753 07/16/25 06/08/25 yment Total	AMAZON CAPITAL SERVIC 35.63 39.99 75.62	ES Status 0.00 0.00 0.00	Issued 35.63 39.99 75.62
Payment Numb 11487 21		Date 06/27/25	IX 120	11487 07/11/25 yment Total	IMAGING SYSTEMS INC 1,198.13 1,198.13	Status 0.00 0.00	Issued 1,198.13 1,198.13
		*** P		le ACH Total yment Count	1,273.75 2	0.00	1,273.75

AP255 Date 06/27/25 Time 11:42 Pay Group 1100 GENERAL GOVERNMENT PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Payment Code CHK Bank 071923909

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Da	ate Scheduled Amount	Discount Amount Net Pay	ment Amount
Payment Num 30600 6	nber 1213832 5105546621	Payment Date 06/27/25	Vendor IX 120 *** Pa	30600 07/12/25 ayment Total	BOEHRINGER INGELHEIM 15.20	ANIMAL Status Issued 0.00 0.00	15.20 15.20
Payment Num 13020 0						NC Status Issued 0.00 0.00 0.00	
Payment Num 28492 E	nber 1213834 EXP20250508	Payment Date 06/27/25	Vendor IX 120 *** Pa	28492 06/25/25 ayment Total	FLAMION, LAURA 816.26 816.26	Status Issued 0.00	816.26 816.26
Payment Num 10299 2	nber 1213835 2367119223	Payment Date 06/27/25	Vendor IX 120 *** Pa	10299 05/18/25 ayment Total	MEDLINE INDUSTRIES IN 170.16 170.16	Status Issued 0.00 0.00	170.16 170.16
Payment Num 41839 6 41839 6	nber 1213836 51713289 51762919 51769079	Payment Date 06/27/25	Vendor IX 120 IX 120 IX 120 *** Pa	41839 07/13/25 07/17/25 07/17/25 ayment Total	MWI ANIMAL HEALTH 98.74 298.73 642.75 1,040.22	Status Issued 0.00 0.00 0.00 0.00	98.74 298.73 642.75 1,040.22
Payment Num 10057 4	nber 1213837 41473210007 061	Payment Date 06/27/25 325	Vendor IX 120 *** Pa	10057 07/13/25 ayment Total	NICOR GAS 1,511.68 1,511.68	Status Issued 0.00	1,511.68 1,511.68
Payment Num 26603 9	nber 1213838 9028203852	Payment Date 06/27/25	Vendor IX 120 *** Pa	26603 07/16/25 ayment Total	ZOETIS US LLC 494.00 494.00	Status Issued 0.00	494.00 494.00
					10,047.33	0.00	
		*** (ash Code Pa	1414 Total ayment Count	11,321.08	0.00	11,321.08
					11,321.08	0.00	11,321.08

AP255 Date: 06/27/25 Time: 11:42 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 3

Pay Group: 1200 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062725 -Payment Numbers: Payment Code: 062725

AP255 Date 06/27/25 Time 11:43 Pay Group 1200 HEALTH AND WELFARE PAY GROUP Bank Account Payment History USD

> 06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Payment Code ACH Bank 071923909

Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc	Date Scheduled Amo	unt Discount	Amount Net	Payment Amount
Payment Number 26753 1GTG	535766 Payment : -H6XW-6GM4	Date 06/27/25	IX 100	26753 07/23/25 yment Total	AMAZON CAPITAL S 897 897.00		Status Iss 0.00 0.00	ued 897.00 897.00
	535767 Payment : 0000009281345	Date 06/27/25	IX 100	12992 04/29/25 yment Total	JDF SERVICES INC 945 945.00		Status Iss 0.00 0.00	ued 945.00 945.00
Payment Number 37419 NS65 37419 NS65	066	Date 06/27/25	IX 100 IX 100	37419 07/12/25 07/19/25 yment Total	NOVASTAFF HEALTH 9,718 9,082 18,800.50		Status Iss 0.00 0.00 0.00	ued 9,718.50 9,082.00 18,800.50
Payment Number 44522 6590		Date 06/27/25	IX 100	44522 07/10/25 yment Total	TOSHIBA AMERICA 2,408 2,408.95		Status Iss 0.00 0.00	ued 2,408.95 2,408.95
		*** Pa		e ACH Total yment Count	23,051.45 4		0.00	23,051.45

AP255 Date 06/27/25 Time 11:43 Pay Group 1200 HEALTH AND WELFARE PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code CHK

Vendor	Invoice		Voucher	Auth PL	Due Date Dsc Dat	e Scheduled Amount	Discount Amount	Net Paym	ment Amount
Payment Nu 10674	mber 1213839 9162268726	Payment Dat	e 06/27/25	Vendor IX 100 *** Pa	10674 07/19/25 yment Total	AIRGAS USA 210.60 210.60	Status 0.00 0.00	Issued	210.60 210.60
Payment Nu 40931	mber 1213840 EXP20250526	Payment Dat	e 06/27/25	Vendor IX 100 *** Pa	40931 06/24/25 yment Total	APIT, EDWIN 50.00	Status 0.00 0.00	Issued	50.00 50.00
26602 26602 26602 26602 26602 26602	mber 1213841 7426044634 7426238068 7426238069 7426604660 7426782843 7426782845	Payment Dat	e 06/27/25	Vendor IX 100 IX Pa	26602 07/16/25 07/17/25 07/17/25 07/19/25 07/20/25 07/20/25 yment Total	CARDINAL HEALTH 110, 13.76 1,256.58 119.20 268.87 1,031.00 165.17 2,854.58	LLC Status 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	Issued	13.76 1,256.58 119.20 268.87 1,031.00 165.17 2,854.58
Payment Nu 25914	mber 1213842 L251301151	Payment Dat	e 06/27/25	Vendor IX 100 *** Pa	25914 06/11/25 yment Total	CLIFTONLARSONALLEN LI 3,500.00 3,500.00	P Status 0.00 0.00	Issued	3,500.00 3,500.00
Payment Nu 22534	mber 1213843 88641	Payment Dat	e 06/27/25	Vendor IX 100 *** Pa	22534 07/19/25 yment Total	CUTTING EDGE DOCUMENT 143.00 143.00	Status 0.00 0.00	Issued	143.00 143.00
Payment Nu 10586 10586 10586	mber 1213844 34339547 34339582 34340102	Payment Dat	e 06/27/25	Vendor IX 100 IX 100 IX 100 *** Pa	10586 07/13/25 07/13/25 07/13/25 yment Total	DIRECT SUPPLY INC 58.00- 58.00 319.98 319.98	Status 0.00 0.00 0.00 0.00	Issued	58.00- 58.00 319.98 319.98
19875						EDWARD OCCUPATIONAL F 132.00 132.00			
Payment Nu 10566	mber 1213846 20250503647	Payment Dat	e 06/27/25	Vendor IX 100 *** Pa	10566 05/31/25 yment Total	ILLINOIS STATE POLICE 3,000.00 3,000.00	Status 0.00 0.00	Issued	3,000.00
						INOVALON PROVIDER, IN 81.03			
Payment Nu 28606	mber 1213848 33385923	Payment Dat	e 06/27/25	Vendor IX 100 *** Pa	28606 06/30/25 yment Total	KCI USA INC 231.84 231.84	Status 0.00 0.00	Issued	231.84 231.84
Payment Nu 30801	mber 1213849 23850223	Payment Dat	e 06/27/25	Vendor IX 100	30801 07/02/25	MCKESSON MEDICAL - SU 2,594.43	JRGICAL Status 0.00	Issued	2,594.43

AP255 Date 06/27/25 Time 11:43 Pay Group 1200 HEALTH AND WELFARE PAY GROUP USD Page Bank Account Payment History

> 06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code CHK

rayment Date Kange	00/21/23	CIII u	00/21/23		
			Payment Currency	USD	

Vendor	Invoice	Voucher	Auth PL Di	ue Date Dsc Dat	e Scheduled Amount	Discount Amount	Net Payme	ent Amount
30801 23 30801 23 30801 23 30801 23 30801 23	3872453 3892298 3896152 3896176 3921702	ayment Date 06/27/25	IX 100 0° *** Paymo	7/06/25 7/10/25 7/11/25 7/11/25 7/17/25 ent Total	MCKESSON MEDICAL - SU 446.55 1.11 25.51 576.80 2,052.17 5,696.57	0.00 0.00 0.00 0.00 0.00		446.55 1.11 25.51 576.80 2,052.17 5,696.57
	per 1213850 Pa 375020607	ayment Date 06/27/25	Vendor IX 100 0 *** Paymo	10299 7/14/25 ent Total	MEDLINE INDUSTRIES IN 388.35 388.35	Status 0.00 0.00	Issued	388.35 388.35
					ODP BUSINESS SOLUTION 55.96 55.96			
Payment Numk 40964 EX					PATEL, NILAM M 50.00 50.00		Issued	50.00 50.00
	per 1213853 Pa (P20250608	ayment Date 06/27/25	Vendor IX 100 0 *** Payme	40932 6/24/25 ent Total	PATEL, PARUL 50.00 50.00	Status 0.00 0.00	Issued	50.00 50.00
Payment Numb 43749 39	per 1213854 Pa 9742	ayment Date 06/27/25	Vendor IX 100 0 *** Paymo	43749 7/17/25 ent Total	RCM TECHNOLOGIES INC 262.50	Status 0.00 0.00		
10555 82 10555 82 10555 82	per 1213855 Pa 24432279 24432280 24435528 24441273	ayment Date 06/27/25	Vendor IX 100 0 IX 100 0 IX 100 0 IX 100 0 *** Paymo	10555 7/19/25 7/19/25 7/20/25 7/23/25 ent Total	SYSCO FOOD SERVICES-C 36.73 21.26 535.50 1,214.12 1,807.61	HICAGO Status 0.00 0.00 0.00 0.00 0.00 0.00	Issued	36.73 21.26 535.50 1,214.12 1,807.61
Payment Numb 11772 19	per 1213856 Pa 94509555	ayment Date 06/27/25	Vendor IX 100 0	11772 7/23/25 ent Total	ULINE 995.13 995.13	Status 0.00 0.00	Issued	995.13 995.13
36338 10)1509	ayment Date 06/27/25	Vendor IX 100 0	36338 7/11/25 ent Total	VALDES, LLC 532.35 532.35	Status 0.00 0.00		532.35 532.35
Payment Numk 20890 30 20890 30	per 1213858 Pa 0006035174 0006050228	ayment Date 06/27/25	Vendor IX 100 0 IX 100 0 *** Paymo	20890 7/11/25 7/11/25 ent Total	WAYSTAR INC. 194.17 45.00 239.17	Status 0.00 0.00 0.00	Issued	194.17 45.00 239.17
					WHEATON SANITARY DIST			

AP255 Date 06/27/25 Time 11:43 Pay Group 1200 HEALTH AND WELFARE PAY GROUP Bank Account Payment History

Payment Date Range

*** Pay Group 1200 USD Total

USD

48,162.72

26

0.00

06/27/25 thru 06/27/25 Payment Currency USD

Cash Code 1414 Bank 071923909

Payment Code CHK

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc 1	Date Scheduled Amount	Discount Amount Ne	et Payment Amount
Payment Numbe	r 1213859 Payment D 673-000 052325		Vendor IX 100 *** Pay	10037 06/22/25 yment Total	WHEATON SANITARY DIST 4,460.60 4,460.60	RICT Status Is 0.00 0.00	4,460.60 4,460.60
Payment Numbe 37242 EXP			Vendor IX 100 *** Pay	37242 06/24/25 yment Total	ZIGAS, ELMA B 50.00 50.00	Status Is 0.00 0.00	50.00 50.00
		*** Pa	4	e CHK Total yment Count	25,111.27 22	0.00	25,111.27
		*** Ca		1414 Total yment Count	48,162.72 26	0.00	48,162.72

Payment Count

Page

48,162.72

AP255 Date: 06/27/25 Time: 11:43 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 4

Pay Group: 1300 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062725 -Payment Numbers: Payment Code: 062725

AP255 Date 06/27/25 Pay Group 1300 PUBLIC SAFETY PAY GROUP Bank Account Payment History

U

USD Page 1

Payment Date Range 06/27/25 thru 06/27/25

Cash Code 1414 Bank 071923909 Payment Code CHK Payment Currency USD

Vendor	Invoice	Voucher	Auth PL D	Due Date Dsc I	Date Scheduled Amount	Discount Amount	Net Payment Amount
Payment Numb 45663 TR	per 1213861 RV20250513	Payment Date 06/27/2	IX 120 0	45663 06/25/25 nent Total	LUKAS, JUDITH M. 660.70 660.70	Status 0.00 0.00	Issued 660.70 660.70
		***	Payment Code Paym	CHK Total ment Count	660.70 1	0.00	660.70
		***		114 Total ment Count	660.70 1	0.00	660.70
		*** Pay	Group 1300 US Paym	D Total ment Count	660.70 1	0.00	660.70

AP255 Date: 06/27/25 Time: 11:43 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 5

Pay Group: 1400 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062725 -Payment Numbers: Payment Code: 062725

AP255 Date 06/27/25 Time 11:43 Pay Group 1400 JUDICIAL PAY GROUP Bank Account Payment History

USD

06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Bank 071923909 Payment Code ACH

Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Da	te Scheduled Amount	Discount Amount	Net Payment Amount
Payment Number 26753 1HS	er 535770 Payment 01-RMQ4-KKKX	Date 06/27/25	IX 130	26753 06/18/25 yment Total	AMAZON CAPITAL SERVICE 248.58 248.58	ES Status 0.00 0.00	Issued 248.58 248.58
Payment Numbe 44522 65 44522 65 44522 65	77975 77979	Date 06/27/25	IX 107 IX 130 IX 131	44522 07/02/25 06/20/25 06/20/25 yment Total	TOSHIBA AMERICA BUSINI 197.99 1,385.63 51.80 1,635.42	ESS Status 0.00 0.00 0.00 0.00	197.99 1,385.63 51.80 1,635.42
		*** P		e ACH Total yment Count	1,884.00	0.00	1,884.00

AP255 Date 06/27/25 Time 11:43 Pay Group 1400 JUDICIAL PAY GROUP Bank Account Payment History

> 06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Payment Code CHK Bank 071923909

Payment Currency USD

USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	e Scheduled Amount	Discount Amount	Net Payment Amount
10041	mber 1213862 SI301702238 SI301702307	Payment Date 06/27/25	IX 107 IX 107	10041 06/28/25 06/29/25 yment Total	IICLE - IL INSTITUTE 33.75 135.00 168.75	FOR Status 0.00 0.00 0.00	
	mber 1213863 427234727001	Payment Date 06/27/25	IX 130	39549 07/12/25 yment Total	ODP BUSINESS SOLUTION 471.78 471.78	IS, LLC Status 0.00 0.00	s Issued 471.78 471.78
11169 11169	mber 1213864 852009764 852011287 852087089	Payment Date 06/27/25	IX 107 IX 107 IX 107	11169 07/01/25 07/01/25 07/01/25 yment Total	THOMSON REUTERS-WEST 2,553.01 5,961.40 8,599.00 17,113.41	Status 0.00 0.00 0.00 0.00	5,961.40
		*** Pa		e CHK Total yment Count	17,753.94 3	0.00	17,753.94
		*** Ca		1414 Total yment Count	19,637.94 5	0.00	19,637.94
		*** Pay G		USD Total yment Count	19,637.94 5	0.00	19,637.94

AP255 Date: 06/27/25 Time: 11:43 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 6

Pay Group: 1500 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062725 -Payment Numbers: Payment Code: 062725

AP255 Date 06/27/25 Time 11:43 Pay Group 1500 HWY STREETS & BRIDGES PAY GRP USD Page Bank Account Payment History

Payment Currency USD

06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code ACH

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Da	ate Scheduled Amount	Discount Amount Ne	et Payment Amount
26753 : 26753 : 26753 : 26753 : 26753 :	mber 535772 14J9-JTN6-LC7Y 179N-PLYG-3VLK 1C31-TL1G-D9XJ 1FM3-49GN-MCNX 1JYF-XLVK-4L4R 1RM3-9MRY-916V	Payment Date 06/27/25	IX 100 IX 100 IX 100 IX 100 IX 100 IX 100	26753 07/09/25 07/17/25 07/11/25 07/09/25 07/23/25 07/11/25 yment Total	AMAZON CAPITAL SERVICE 8.48 335.74 57.98 547.62 337.39 40.39 1,327.60	Status Is 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	8.48 335.74 57.98 547.62 337.39 40.39
	mber 535773 IN00774824	Payment Date 06/27/25	IX 100	11067 06/28/25 yment Total	FOX VALLEY FIRE & SAFE 225.00 225.00	0.00	225.00
38961 38961	mber 535774 5635-06 WO6 5635-11 WO2 5635-11 WO4	Payment Date 06/27/25	IX 100 IX 100 IX 100	07/12/25 07/12/25	SINGH & ASSOCIATES, IN 15,087.46 2,019.36 1,533.39 18,640.21	0.00 0.00	15,087.46 2,019.36 1,533.39
	mber 535775 6448-06 WO1	Payment Date 06/27/25	IX 100	41569 07/06/25 yment Total	TECMA ASSOCIATES, INC 12,033.00 12,033.00	Status Is 0.00 0.00	12,033.00
		*** Pa		e ACH Total yment Count	32,225.81 4	0.00	32,225.81

AP255 Date 06/27/25 Time 11:43 Pay Group 1500 HWY STREETS & BRIDGES PAY GRP USD Page Bank Account Payment History

> 06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code CHK

. 0.7	_ 0.00	 00, 2., 20	0111 01	00,,	•	
				Payment	Currency	USD

Vendor	Invoice	Voucher A	uth PL	Due Date Dsc Da	te Scheduled Amount	Discount Amount	Net Payment Amount
10008 10008 10008 10008 10008	umber 1213865 Payment 630322896406 2025 630323005306 2025 630372418606 2025 630462996506 2025 630737063506 2025 630739105106 2025	Date 06/27/25	Vendor IX 100 IX 100 IX 100 IX 100 IX 100 IX 100 IX 100 IX Pay	10008 07/04/25 07/13/25 07/16/25 07/16/25 07/13/25 07/16/25 yment Total	AT&T 58.45 46.53 48.03 58.45 58.50 48.03	Status 0.00 0.00 0.00 0.00 0.00 0.00	Issued 58.45 46.53 48.03 58.45 58.50 48.03 317.99
10023 10023 10023	umber 1213866 Payment 4126012222 061725 6770332000 061225 6853352222 061725	Date 06/27/25 I I I	Vendor IX 100 IX 100 IX 100 *** Pag	10023 07/17/25 07/12/25 07/17/25 yment Total	COM ED 337.85 84.96 1,095.51 1,518.32	Status 0.00 0.00 0.00 0.00	Issued 337.85 84.96 1,095.51 1,518.32
Payment Nt 10023 10023 10023 10023 10023 10023	umber 1213867 Payment 2206413000 061825 3246612000 061725 4504632222 061825 5087615000 061825 6212964000 061825 8286853000 061825	Date 06/27/25 I I I I I I I I	Vendor (X 100	10023 07/18/25 07/17/25 07/18/25 07/18/25 07/18/25 07/18/25 yment Total	COM ED 56.12 93.79 58.63 74.72 61.57 35.89 380.72	Status 0.00 0.00 0.00 0.00 0.00 0.00 0.00	56.12 93.79 58.63 74.72 61.57 35.89 380.72
Payment No 12084	umber 1213868 Payment 3-20966	Date 06/27/25 I	Vendor X 100 *** Pay	12084 07/02/25 yment Total	HAGGERTY FORD 19.54 19.54	Status 0.00 0.00	Issued 19.54 19.54
Payment No 10222	umber 1213869 Payment 25-JUNLUNCH-DP	Date 06/27/25 I	Vendor X 100 *** Pay	10222 07/16/25 yment Total	ILLINOIS SECTION-IT 160.00 160.00	E Status 0.00 0.00	Issued 160.00 160.00
Payment No 24397	umber 1213870 Payment 7290717P	Date 06/27/25 I	Vendor X 100 *** Pay	24397 07/20/25 yment Total	LAKESIDE INTERNATIO 85.20 85.20	NAL LLC Status 0.00 0.00	Issued 85.20 85.20
10045 10045 10045 10045 10045	umber 1213871 Payment ARV/64908279 ARV/64910861 ARV/64919505 ARV/64923149 ARV/64984796 ARV/65014015	Date 06/27/25 I I I I I I I I	Vendor X 100 *** Pay	10045 07/09/25 07/09/25 07/10/25 07/10/25 07/17/25 07/19/25 yment Total	SNAP-ON INDUSTRIAL 1,126.14 4,309.95 587.22 5,000.08 798.28 268.43 12,090.10	Status 0.00 0.00 0.00 0.00 0.00 0.00	1,126.14 4,309.95 587.22 5,000.08 798.28 268.43 12,090.10
Payment No 10597 10597	umber 1213872 Payment 6109858278 6114862328A	Date 06/27/25 I	Vendor IX 100 IX 100	10597 05/01/25 07/01/25	VERIZON 548.90 864.30	Status 0.00 0.00	Issued 548.90 864.30

AP255 Date 06/27/25 Pay Group 1500 HWY STREETS & BRIDGES PAY GRP USD Page Time 11:43 Bank Account Payment History

Payment Currency USD

Payment Date Range 06/27/25 thru 06/27/25

Cash Code 1414 Bank 071923909 Payment Code CHK

Bank 071923909

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Da	ate Scheduled Amount	Discount Amount Net Pay	ment Amount
Payment Numbe	er 1213872	Payment Date 06/27/25		10597 yment Total	VERIZON 1,413.20	Status Issued 0.00	1,413.20
Payment Numbe 26490 368 26490 368 26490 368	35524 35578	Payment Date 06/27/25	IX 100 IX 100 IX 100	26490 07/17/25 07/17/25 07/17/25 yment Total	VULCAN CONSTRUCTION M 415.06 1,076.74 765.38 2,257.18	NATERIALS Status Issued 0.00 0.00 0.00 0.00 0.00	415.06 1,076.74 765.38 2,257.18
Payment Numbe 11099 000 11099 000	274164	Payment Date 06/27/25	IX 100 IX 100	11099 06/06/25 07/02/25 yment Total	WHOLESALE DIRECT INC 1,186.53 3,678.87 4,865.40	Status Issued 0.00 0.00 0.00	1,186.53 3,678.87 4,865.40
		*** P		e CHK Total yment Count	23,107.65 10	0.00	23,107.65
		*** C		1414 Total yment Count	55,333.46 14	0.00	55,333.46
		*** Pay G	roup 1500 Pa	USD Total yment Count	55,333.46 14	0.00	55,333.46

AP255 Date: 06/27/25 Time: 11:43 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY Step Nbr: 7

Pay Group: 1600 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062725 -Payment Numbers: Payment Code: 062725

AP255 Date 06/27/25 Time 11:43 Pay Group 1600 CONSERV & RECREATION PAY GROUP USD Bank Account Payment History

Page

06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Bank 071923909 Payment Code ACH

Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Da	te Scheduled Amount	Discount An	mount Net P	ayment Amount
Payment Numb 11452 #2	er 535776 Payment -NAPERVILLE PARK	Date 06/27/25	IX 100	11452 06/07/25 ayment Total	EARTHWERKS LAND IMPRO 89,745.00 89,745.00		Status Issue 0.00 0.00	d 89,745.00 89,745.00
Payment Numb 10903 W2	per 535777 Payment 427300.05	Date 06/27/25	IX 100	10903 06/22/25 ayment Total	ENGINEERING RESOURCE 1,918.35 1,918.35		Status Issue 0.00 0.00	d 1,918.35 1,918.35
		*** P		de ACH Total	91,663.35 2	(0.00	91,663.35

AP255 Date 06/27/25 Time 11:43 Pay Group 1600 CONSERV & RECREATION PAY GROUP USD Bank Account Payment History Page

> 06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Payment Code CHK Bank 071923909

Invoice Voucher Auth PL Due Date Dsc Date Scheduled Amount Discount Amount Net Payment A	Joue	CIIIC						
		Invoice	Voucher	Auth PL	Due Date Dsc Date	Scheduled Amount	Discount Amount	Net Payment Amou

Payment Currency USD

Vendor	Invoice	Voucher			ate Scheduled Amount		
44540 44540 44540	mber 1213875 P JA00022098 LO00116933 OD00000349 OD000000499	Payment Date 06/27/25	TV 100	07/11/25	A BLOCK MULCH & MARKE 40.00 40.00 40.00 40.00 160.00	0 00	Issued 40.00 40.00 40.00 40.00 160.00
Payment Nu 10008	umber 1213876 P 630668216106 2025	Payment Date 06/27/25	Vendor	10008	AT&T		Issued 84.39 84.39
		Payment Date 06/27/25	IX 100		AUTOZONE INC 4.89 4.89	Status 0.00 0.00	Issued 4.89 4.89
	umber 1213878 P 346510	Payment Date 06/27/25	IX 100	11703 06/12/25 yment Total	BUTTREY RENTAL SERVIC 71.50 71.50	0 00	Issued 71.50 71.50
Payment Nu 10023 10023	umber 1213879 P 6487746000 052925 8163896000 060925	Payment Date 06/27/25	IX 100 IX 100	10023 06/28/25 07/09/25 yment Total	COM ED 40.00 159.31 199.31	Status 0.00 0.00 0.00	1ssued 40.00 159.31 199.31
Payment Nu 11041	mber 1213880 P 6441602	Payment Date 06/27/25	IX 100	11041	CONSERV FS INC 112.50 112.50		112.50
Payment Nu 11470	umber 1213881 P 3485890	Payment Date 06/27/25	T37 100	11470 07/11/25 yment Total	HYDRAULIC SUPPLY COMP. 127.07 127.07	ANY Status 0.00 0.00	127.07
Payment Nu 10851		Payment Date 06/27/25		10851 07/09/25 yment Total	MENARDS - GLENDALE HE 100.14 100.14	IGHTS Status 0.00 0.00	100.14
Payment Nu 38796	mber 1213883 P 10239	Payment Date 06/27/25	Vendor IX 100 *** Pa	38796 10/31/24 yment Total	SCADACORE INC. 360.00 360.00	Status 0.00 0.00	Issued 360.00 360.00
		Payment Date 06/27/25	Vendor IX 100 *** Pa	28531 07/13/25 yment Total	SIGNAL 88 LLC 1,040.00 1,040.00	Status 0.00 0.00	1,040.00
		*** P	ayment Cod Pa	e CHK Total yment Count	2,259.80 10	0.00	2,259.80

AP255 Date 06/27/25 Time 11:43		Pay Group 1600 CONSERV & RECREATION PAY GROUP USD Bank Account Payment History	Page 3
Cash Code 1414 Bar	nk 071923909	Payment Date Range 06/27/25 thru 06/27/25 Payment Currency USD *** Cash Code 1414 Total 93,923.15 0.00 Payment Count 12	93,923.15
		*** Pay Group 1600 USD Total 93,923.15 0.00 Payment Count 12	93,923.15

AP255 Date: 06/27/25 Time: 11:43 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 8

Pay Group: 2000 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062725 -Payment Numbers: Payment Code: 062725

AP255 Date 06/27/25 Time 11:44 Pay Group 2000 PUBLIC WORKS PAY GROUP Bank Account Payment History USD

> 06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Payment Code ACH Bank 071923909

Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc	Date Schedu	ıled Amount	Discount Amount	Net Payment Amount
Payment Numb 22995 30		nt Date 06/27/25	Vendor IX 100 *** Pa	22995 07/05/25 yment Total		ELECTRIC INC 581,786.10 ,786.10	Status 0.00 0.00	Issued 581,786.10 581,786.10
10124 93	per 535779 Paymer 841909160 841980508 842041863	nt Date 06/27/25	Vendor IX 100 IX 100 IX 100 *** Pa	10124 06/01/25 06/07/25 06/13/25 yment Total	GRAYBAR 2,	193.86 1,704.27 244.16	Status 0.00 0.00 0.00 0.00	Issued 193.86 1,704.27 244.16 2,142.29
		*** Pa		e ACH Total yment Count	583,	,928.39 2	0.00	583,928.39

AP255 Date 06/27/25 Time 11:44 Pay Group 2000 PUBLIC WORKS PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Payment Code CHK Bank 071923909

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Date	Scheduled Amount	Discount Amou	nt Net Pay	ment Amount
Payment Num	mber 1213885 113830	Payment Date 06/27/25	Vendor IX 100 *** Pa	43718 A 07/10/25 ayment Total	QUATIC INFORMATICS 5,156.00 5,156.00	INC. St 0 0.0	atus Issued .00	5,156.00 5,156.00
Payment Num 41621	mber 1213886 37624-1	Payment Date 06/27/25	IX 100 *** Pa	07/13/25 ayment Total	DWARDS ENGINEERING, 5,214.00 5,214.00	0.0	.00	5,214.00 5,214.00
Payment Num 46345		' Payment Date 06/27/25			AXLINER, LLC 1,769.79 1,769.79			
Payment Num	86263 87269 87272 87343		Vendor IX 100	10851 M 06/06/25 06/27/25 06/27/25 06/28/25 06/28/25 ayment Total	ENARDS 104.78 40.94 209.98 131.36 463.87 950.93	St 0 0 0 0 0	atus Issued .00 .00 .00 .00 .00	104.78 40.94 209.98 131.36 463.87 950.93
Payment Nu 11932	mber 1213889 521215	Payment Date 06/27/25	Vendor IX 100 *** Pa	11932 N 07/13/25 ayment Total	CL OF WISCONSIN INC 343.47 343.47	St 0 0.0	atus Issued .00 0	343.47 343.47
Payment Num 12715	mber 1213890 256289	Payment Date 06/27/25	Vendor IX 100 *** Pa	12715 R 07/05/25 ayment Total	ECYCLE TECHNOLOGIES 500.25 500.25	, INC St 0 0.0	atus Issued .00	500.25 500.25
12464	mber 1213891 53070560 53102872	. Payment Date 06/27/25	Vendor IX 100 IX 100 *** Pa	12464 U 07/05/25 07/18/25 ayment Total	NIVAR USA INC 1,778.49 2,540.70 4,319.19	St 0 0 0.0	atus Issued .00 .00	1,778.49 2,540.70 4,319.19
Payment Nu 10597	mber 1213892 6114862329 PW	Payment Date 06/27/25	Vendor IX 100 *** Pa	10597 V 07/01/25 ayment Total	ERIZON 796.79 796.79	St 0 0.0	atus Issued .00 0	796.79
		*** E	ayment Coo Pa	de CHK Total ayment Count	19,050.42	0.0	0	19,050.42
				1414 Total ayment Count			0	602,978.81
		*** Pay 6	roup 2000 Pa	USD Total ayment Count	602,978.81	0.0	0	602,978.81

AP255 Date: 06/27/25 Time: 11:44 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 9

Pay Group: 5000 Cash Code: 1414 Class C Accounts Payable

Payment Date: 062725 -Payment Numbers: Payment Code: 062725

AP255 Date 06/27/25 Time 11:44 Pay Group 5000 DUPAGE COUNTY GRANTS PAY GROUP USD Bank Account Payment History

Payment Date Range 06/27/25 thru 06/27/25

Cash Code 1414 Bank 071923909 Payment Code ACH Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	ce Scheduled Amount	Discount	Amount	Net Pay	ment Amount
26753	1RTT-QDCC-963Q	Payment Date 06/27/25	IX 101 *** Pa	07/22/25 ayment Total	AMAZON CAPITAL SERVIC 98.50 98.50				
Payment Nu 27175	mber 535781 MIL20250519	Payment Date 06/27/25	Vendor IX 202 *** Pa	27175 06/23/25 Ayment Total	BONDI, LINDSEY 176.40 176.40		Status 0.00 0.00	Issued	176.40 176.40
Payment Nu 28463	mber 535782 CCDOJ-011	Payment Date 06/27/25	Vendor IX 110 *** Pa	28463 07/12/25 syment Total	CATHOLIC CHARITIES OF 88,013.52 88,013.52	THE ARCH	Status 0.00 0.00	Issued	88,013.52 88,013.52
Payment Nu 28463	umber 535783 CCDOJ-012A	Payment Date 06/27/25	TY 110	28463 07/12/25 syment Total	CATHOLIC CHARITIES OF 32,358.97 32,358.97	THE ARCH	Status 0.00 0.00	Issued	32,358.97 32,358.97
Payment Nu 23461 23461	umber 535784 283354 SPEEDWAY DHS-1760-25-254	Payment Date 06/27/25	Vendor IX 209 IX 209 *** Pa	23461 07/17/25 06/24/25 ayment Total	DUPAGE COUNTY COMMUNI 1,493.00 300.00 1,793.00	ГҮ	Status 0.00 0.00 0.00	Issued	1,493.00 300.00 1,793.00
Payment Nu 14166 14166	mber 535785 44416	Payment Date 06/27/25	Vendor	14166		ATR INC	Status	Tasued	
		Payment Date 06/27/25	Vendor IX 202 *** Pa	24646 06/25/25 ayment Total	JIARDINA, CHRISTINA 37.10 37.10		Status 0.00 0.00	Issued	37.10 37.10
Payment Nu 11821	mber 535787 TREASURY-A2-LF0	Payment Date 06/27/25 11	Vendor IX 110 *** Pa	11821 07/20/25 ayment Total	LOAVES AND FISHES COM 131,262.34 131,262.34	MUNITY	Status 0.00 0.00	Issued	131,262.34 131,262.34
Payment Nu 11959	mber 535788 OCMERAP019AO	Payment Date 06/27/25	Vendor IX 110 *** Pa	11959 07/20/25 ayment Total	OUTREACH COMMUNITY MI 5,445.35 5,445.35	NISTRIES	Status 0.00 0.00		
Payment Nu 11959	umber 535789 OCMERAP025AO	Payment Date 06/27/25	Vendor IX 110 *** Pa	11959 07/20/25 ayment Total	OUTREACH COMMUNITY MI: 4,261.65 4,261.65	NISTRIES	Status 0.00 0.00		4,261.65
Payment Nu 11959		Payment Date 06/27/25	Vendor IX 110 *** Pa	11959 07/11/25 ayment Total	OUTREACH COMMUNITY MI 15,281.00 15,281.00	NISTRIES	Status 0.00 0.00		15,281.00 15,281.00
	mber 535791 OCMERAP028R	Payment Date 06/27/25	Vendor IX 110	11959 07/19/25	OUTREACH COMMUNITY MI 6,088.08		Status 0.00		6,088.08

AP255 Date 06/27/25 Pay Group 5000 DUPAGE COUNTY GRANTS PAY GROUP USD Bank Account Payment History

Payment Date Range 06/27/25 thru 06/27/25

Cash Code 1414 Bank 071923909

Payment Code ACH

Payment Currency USD

Vendor	Invoice	Voucher Aut	th PL Due Date Dsc Da	ate Scheduled Amount Discount	Amount Net Pa	yment Amount
Payment Number	535791 Payment		Vendor 11959 *** Payment Total	OUTREACH COMMUNITY MINISTRIES 6,088.08	Status Issued	6,088.08
Payment Number 10348 PRC		IX	Vendor 10348 110 07/18/25 *** Payment Total	PEOPLES RESOURCE CENTER 50,403.46 50,403.46	Status Issued 0.00 0.00	50,403.46 50,403.46
Payment Number 10348 PRC		IX	Vendor 10348 110 07/20/25 *** Payment Total	PEOPLES RESOURCE CENTER 28,897.00 28,897.00	Status Issued 0.00 0.00	28,897.00 28,897.00
Payment Number 10544 8539		IX	Vendor 10544 101 07/18/25 *** Payment Total	TRADEMARK PRODUCTS INC 19.80 19.80	Status Issued 0.00 0.00	19.80 19.80
		*** Payme	ent Code ACH Total Payment Count	378,268.97 15	0.00	378,268.97

AP255 Date 06/27/25 Time 11:44

Pay Group 5000 DUPAGE COUNTY GRANTS PAY GROUP USD Bank Account Payment History

06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Bank 071923909 Payment Code CHK

Payment Currency USD

Vendor In	voice	Voucher	Auth PL	Due Date Dsc Dat	te Scheduled Amount	Discount .	Amount Net	Payment Amount
Payment Number 45696 TREASU	1213893 Payment Dat RY-A2-2556	e 06/27/25	Vendor IX 110 *** Pa	45696 07/25/25 ayment Total	ABBEY CAPITAL PARTNER 6,910.00 6,910.00	S, LLC	Status Issu 0.00 0.00	ed 6,910.00 6,910.00
Payment Number 45696 TREASU	1213894 Payment Dat RY-A2-2557	e 06/27/25	Vendor IX 110 *** Pa	45696 07/25/25 ayment Total	ABBEY CAPITAL PARTNER 220.00 220.00	S, LLC	Status Issu 0.00 0.00	ed 220.00 220.00
Payment Number 25011 008478		e 06/27/25	IX 101	25011 06/23/25 ayment Total	ALDEN ESTATES OF NAPE 2,000.00 2,000.00	RVILLE	Status Issu 0.00 0.00	2,000.00
Payment Number 43804 214912 43804 214913			IX 101 IX 202	43804 06/06/25 06/06/25 ayment Total	ALOHA DOCUMENT SERVIC 225.00 225.00 450.00	ES, INC	Status Issu 0.00 0.00 0.00	ed 225.00 225.00 450.00
Payment Number 17710 TREASU	1213897 Payment Dat RY-A2-2540	e 06/27/25	IX 110	17710 06/23/25 ayment Total	B & A PROPERTY GROUP 6,060.00 6,060.00	LLC	Status Issu 0.00 0.00	ed 6,060.00 6,060.00
Payment Number 37264 INV-00	1213898 Payment Dat 9	e 06/27/25	Vendor IX 101 *** Pa	37264 07/06/25 ayment Total	TRUJILLO, BENITA 1,500.00 1,500.00		Status Issu 0.00 0.00	ed 1,500.00 1,500.00
Payment Number 15258 061825	1213899 Payment Dat		Vendor IX 105 *** Pa	15258 07/18/25 ayment Total	BORTER HEATING AND 22,638.00 22,638.00		Status Issu 0.00 0.00	ed 22,638.00 22,638.00
Payment Number 44078 051325		e 06/27/25	Vendor IX 105 *** Pa	44078 06/12/25 ayment Total	CAMEO MOLD CORP 2,475.00 2,475.00		Status Issu 0.00 0.00	ed 2,475.00 2,475.00
Payment Number 10959 239248	1213901 Payment Dat	e 06/27/25	IX 101	10959 06/25/25 ayment Total	CITY OF NAPERVILLE 1,958.00 1,958.00		Status Issu 0.00 0.00	ed 1,958.00 1,958.00
Payment Number 10023 239249	1213902 Payment Dat	e 06/27/25	IX 101	10023 07/25/25 ayment Total	COM ED - LIHEAP PAYME 52,216.00 52,216.00	NTS	Status Issu 0.00 0.00	ed 52,216.00 52,216.00
Payment Number 10811 TREASU	1213903 Payment Dat RY-A2-2550	e 06/27/25	Vendor IX 110 *** Pa	10811 06/23/25 ayment Total	COMMUNITY HOUSING ADV 4,411.50 4,411.50	OCACY &	Status Issu 0.00 0.00	4,411.50
Payment Number 46346 1367	1213904 Payment Dat	e 06/27/25	Vendor IX 101 *** Pa	46346 07/16/25 ayment Total	COMPASSION CARE STAFF 140.00 140.00	ING	Status Issu 0.00 0.00	ed 140.00 140.00

AP255 Date 06/27/25 Time 11:44 Pay Group 5000 DUPAGE COUNTY GRANTS PAY GROUP USD Bank Account Payment History

> 06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code CHK

Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Da	te Scheduled Amount Discount	Amount Net Pay	ment Amount
Payment Nui 46355	mber 1213905 Payment 06172025-12	Date 06/27/25	Vendor IX 101 *** Pay	46355 07/19/25 yment Total	CHELMINIAK, JERRY 2,350.00 2,350.00	Status Issued 0.00 0.00	2,350.00
Payment Nu 34438 34438	mber 1213906 Payment 11914 11916	Date 06/27/25	Vendor IX 101 IX 101 *** Pay	34438 07/25/25 07/25/25 yment Total	EUROPEAN SERVICE LLC 630.00 735.00 1,365.00	Status Issued 0.00 0.00 0.00	630.00 735.00 1,365.00
					G&I X GREEN TRAILS LLC 7,180.00 7,180.00		
Payment Nu 42164 '	mber 1213908 Payment TREASURY-A2-2553	Date 06/27/25	Vendor IX 110 *** Pay	42164 07/23/25 yment Total	G&I X GREEN TRAILS LLC 46.11 46.11	Status Issued 0.00	46.11 46.11
Payment Num 46340	mber 1213909 Payment 060725	Date 06/27/25	Vendor IX 101 *** Pay	46340 07/16/25 yment Total	GOOD MOVE MOVERS 742.50 742.50	Status Issued 0.00 0.00	742.50
Payment Nu 39914 39914 39914 39914	mber 1213910 Payment 05132025 060225 061325 TRV20250413 TRV20250413 999A	Date 06/27/25	Vendor IX 207 IX 207 IX 207 207 *** Pay	39914 06/12/25 07/14/25 05/13/25 05/13/25 yment Total	HIGHTOWER, DIANA 277.60 1,400.00 1,671.71- 1,671.71 1,677.60	Status Issued 0.00 0.00 0.00 0.00 0.00	1 400 00
Payment Nu	mber 1213911 Payment	Date 06/27/25	Vendor IX 101 *** Pay	43186 07/13/25 yment Total	DAVIS HOME CARE LLC 702.00 702.00	Status Issued 0.00	702.00 702.00
Payment Nui 39254	mber 1213912 Payment 061725	Date 06/27/25	Vendor IX 105 *** Pay	39254 07/17/25 yment Total	HYDAC 2,083.00 2,083.00	Status Issued 0.00 0.00	2,083.00 2,083.00
Payment Nur 46343	mber 1213913 Payment EXP20250509	Date 06/27/25	Vendor IX 101 *** Pay	46343 06/24/25 yment Total	MCFARLAND, CHRISTOPHER 99.00 99.00	Status Issued 0.00 0.00	99.00 99.00
Payment Nur 28379	mber 1213914 Payment 010883 062425	Date 06/27/25	Vendor IX 101 *** Pay	28379 06/25/25 yment Total	MEADOWBROOK MANOR BOLINGBROOK 2,000.00 2,000.00	Status Issued 0.00 0.00	2,000.00
Payment Nui 10057	mber 1213915 Payment 239250	Date 06/27/25	Vendor IX 200 *** Pay	10057 07/25/25 yment Total	NICOR GAS 11,901.00 11,901.00	Status Issued 0.00 0.00	11,901.00 11,901.00
Payment Nu	mber 1213916 Payment	Date 06/27/25	Vendor	43572	PALOS, ROBERT	Status Issued	

AP255 Date 06/27/25 Time 11:44

Pay Group 5000 DUPAGE COUNTY GRANTS PAY GROUP USD Bank Account Payment History

06/27/25 thru 06/27/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code CHK

Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc	Date Sche	eduled Amount	Discount Amo	ount Ne	t Payment Amount
Payment Numl 43572 TI	oer 1213916 Payment RV20250602	Date 06/27/25	Vendor IX 200 *** Pa	43572 06/25/25 ayment Total	PALOS,	ROBERT 1,190.56 1,190.56	S 0.	Status Is 0.00 00	1,190.56 1,190.56
Payment Numl 46348 TI	oer 1213917 Payment REASURY-A2-2551	Date 06/27/25	Vendor IX 110 *** Pa	46348 07/23/25 ayment Total	PATEL,	NIRAV 7,087.50 7,087.50	0.	Status Is 0.00 00	7,087.50 7,087.50
Payment Numl 46262 VI	oer 1213918 Payment K5LO8C56AXE0RUL	Date 06/27/25	IX 103	46262 07/18/25 ayment Total	TDA CON	NSULTING, INC 695.00 695.00	0.	Status Is 0.00 00	sued 695.00 695.00
Payment Numl 28615 Ti	oer 1213919 Payment REASURY-A2-2542	Date 06/27/25	Vendor IX 110 *** Pa	28615 06/24/25 ayment Total	TOWERS	FOUR LAKES CAP 131.27 131.27		Status Is 0.00 00	sued 131.27 131.27
Payment Numl 28615 TI	oer 1213920 Payment REASURY-A2-2543	Date 06/27/25	Vendor IX 110 *** Pa	28615 06/24/25 ayment Total	TOWERS	FOUR LAKES CAP 4,070.00 4,070.00	ITAL S	Status Is 0.00 00	4,070.00 4,070.00
Payment Numl 28615 Ti	oer 1213921 Payment REASURY-A2-2558	Date 06/27/25	Vendor IX 110 *** Pa	28615 06/26/25 ayment Total	TOWERS	FOUR LAKES CAP 5,027.28 5,027.28		Status Is 0.00 00	5 027 28
Payment Numl 28615 Ti	oer 1213922 Payment REASURY-A2-2559	Date 06/27/25	Vendor IX 110 *** Pa	28615 06/26/25 ayment Total	TOWERS	FOUR LAKES CAP 86.07 86.07	ITAL S	0.00	sued 86.07 86.07
		*** P	ayment Cod Pa	de CHK Total Nyment Count	14	49,412.39 30	0.	00	149,412.39
				1414 Total ayment Count				00	527,681.36
		*** Pay G	roup 5000 Pa	USD Total Lyment Count	52	27,681.36 45	0.	00	527,681.36

Payment of Claims



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: 25-1670 Agenda Date: 7/8/2025 Agenda #: 8.G.

AP255 Date: 07/01/25 Time: 11:32 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 1

Pay Group: 1000 Cash Code: 1414

Class C Accounts Payable

Payment Date: 070125 -Payment Numbers: Payment Code: 070125

AP255 Date 07/01/25 Time 11:33 Pay Group 1000 GENERAL FUND PAY GROUP USD Bank Account Payment History

> 07/01/25 thru 07/01/25 Payment Date Range

Payment Currency USD

Cash Code 1414 Bank 071923909

Payment Code	ACH						
Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Date	Scheduled Amount	Discount Amount	Net Pay
			_				

Vendor	Invoice	Voucher	Auth PL		Date Scheduled Amount			
Payment Numb	er 535795 KT-MYX9-T7VM	Payment Date 07/01/25	Vendor IX 100 *** Pa	26753 07/06/25 yment Total	AMAZON CAPITAL SERVIC 83.80 83.80			83.80 83.80
Payment Number 10667 AD	er 535796 8E13F	Payment Date 07/01/25	Vendor IX 100 *** Pa	10667 05/24/25 yment Total	CDW GOVERNMENT INC 153.05 153.05	Status 0.00 0.00		153.05 153.05
Payment Number 25287 MI	er 535797 L20250502	Payment Date 07/01/25	Vendor IX 100 *** Pa	25287 06/13/25 yment Total	ESPARZA, KERI 56.35 56.35	Status 0.00 0.00	Issued	56.35 56.35
Payment Number 39536 EX	er 535798 P20250623	Payment Date 07/01/25	Vendor IX 100 *** Pa	39536 06/27/25 yment Total	KAPPAS, VICTORIA 11.87 11.87	Status 0.00 0.00		11.87 11.87
Payment Numb 28996 69 28996 69 28996 70	8 9	Payment Date 07/01/25	Vendor IX 100 IX 100 IX 100 *** Pa	28996 07/25/25 07/24/25 07/25/25 yment Total	NASER, EVA Y 260.20 300.00 300.00 860.20	Status 0.00 0.00 0.00 0.00		260.20 300.00 300.00 860.20
Payment Number 10141 X1	er 535800 13254	Payment Date 07/01/25	Vendor IX 100 *** Pa	10141 07/24/25 yment Total	PRCO 310.00 310.00	Status 0.00 0.00		310.00 310.00
Payment Number 38035 31	er 535801 462	Payment Date 07/01/25	Vendor IX 100 *** Pa	38035 07/18/25 yment Total	PRINTING SUPPLIES USA 580.00 580.00	Status 0.00 0.00		580.00 580.00
Payment Numb 44522 65 44522 65	77981	Payment Date 07/01/25	Vendor IX 100 IX 100 *** Pa	44522 07/02/25 07/02/25 yment Total	TOSHIBA AMERICA BUSIN 248.90 121.04 369.94	ESS Status 0.00 0.00 0.00	Issued	248.90 121.04 369.94
		*** Pa		e ACH Total yment Count	2,425.21 8	0.00	2,	425.21

AP255 Date 07/01/25 Time 11:33 Pay Group 1000 GENERAL FUND PAY GROUP Bank Account Payment History USD Page

Payment Currency USD

07/01/25 thru 07/01/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code CHK

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Da	te Scheduled Amount Disc	ount Amount Net Pay	ment Amount
					ACP CREATIVIT, LLC 624.00 624.00		
Payment Num 43804	mber 1213967 Payme 215800	ent Date 07/01/25	Vendor IX 100 *** Pa	43804 07/24/25 ayment Total	ALOHA DOCUMENT SERVICES, I 2,235.50 2,235.50	NC Status Issued 0.00 0.00	2,235.50 2,235.50
Payment Nu 11990	mber 1213968 Payme FSS-1000-1750-25-2522	ent Date 07/01/25 2	Vendor IX 100 *** Pa	11990 06/28/25 ayment Total	ANDERSON INSURANCE BROKERS 1,442.00 1,442.00	S INC Status Issued 0.00 0.00	1,442.00 1,442.00
Payment Nui 30951	mber 1213969 Payme 002447860	ent Date 07/01/25	Vendor IX 100 *** Pa	30951 06/14/25 ayment Total	935.00 935.00	Status Issued 0.00 0.00	935.00 935.00
Payment Num	mber 1213970 Payme 2573384 2576405 2577381 2580891-AUD 2580891-CCC 2580891-CS 2581234 2582176 2582319 2585188 2585833 2587831	ent Date 07/01/25	Vendor IX 100	27908 05/03/25 05/09/25 05/10/25 05/16/25 05/16/25 05/16/25 05/17/25 05/21/25 05/21/25 05/24/25 05/25/25 05/30/25 ayment Total	C.A. SHORT COMPANY 175.00 120.00 175.00 9.62 9.62 9.62 159.00 67.00 120.00 67.00 120.00 95.00 1,126.86	Status Issued 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	175.00 120.00 175.00 9.62 9.62 9.62 159.00 67.00 120.00 95.00
Payment Nu 10574	mber 1213971 Payme 148569787 061925	ent Date 07/01/25	Vendor IX 100 *** Pa	10574 07/19/25 ayment Total	981.99 981.99	0.00 0.00	981.99 981.99
Payment Num 41892 41892 41892	mber 1213972 Payme IN1516508A IN1544377A IN1577207A	ent Date 07/01/25	Vendor IX 100 IX 100 IX 100 *** Pa	41892 05/21/25 06/20/25 07/20/25 ayment Total	DAYFORCE US, INC. 3,971.00 3,971.00 3,971.00 11,913.00	Status Issued 0.00 0.00 0.00 0.00	3,971.00 3,971.00 3,971.00 11,913.00
Payment Nu 19706	mber 1213973 Payme CK87024	ent Date 07/01/25	Vendor IX 100 *** Pa	19706 04/19/25 ayment Total	DPC REGIONAL OFFICE OF EDU 7,000.00 7,000.00	CATN Status Issued 0.00 0.00	7,000.00 7,000.00
Payment Nui 46179 l	mber 1213974 Payma MIL20250626	ent Date 07/01/25	Vendor IX 100 *** Pa	46179 06/30/25 ayment Total	GOEHL, JESSE 59.19 59.19	Status Issued 0.00	59.19 59.19

AP255 Date 07/01/25 Time 11:33 Pay Group 1000 GENERAL FUND PAY GROUP Bank Account Payment History USD Page

> 07/01/25 thru 07/01/25 Payment Date Range Payment Currency USD

Cash Code 1414 Payment Code CHK Bank 071923909

Vendor	Invoice		oucher	Auth PL	Due Date Dsc Dat	e Scheduled Amount	Discount Amount	Net Pay	ment Amount
Payment Numb 28460 12						GOTO TECHNOLOGIES USA 617.00 617.00			
28858 M						JANSSENS, DINA 84.25 84.25			
Payment Numb 13273 92	per 1213977 2942307	Payment Date	07/01/25	Vendor IX 100 *** Pa	13273 07/06/25 Lyment Total	MCGUIREWOODS LLP 8,000.00 8,000.00	Status 0.00 0.00	Issued	8,000.00 8,000.00
Payment Numb 10673 II	per 1213978 N02475303	Payment Date	07/01/25	Vendor IX 100 *** Pa	10673 07/18/25 yment Total	MIDLAND PAPER PACKAGIN 29,164.80 29,164.80	NG & Status 0.00 0.00	Issued	29,164.80 29,164.80
Payment Numb 46360 Mi	per 1213979 IL20250625	Payment Date	9 07/01/25	Vendor IX 100 *** Pa	46360 06/27/25 yment Total	MILLER, PRESCOTT 165.20 165.20	Status 0.00 0.00	Issued	165.20 165.20
Payment Numb 10684 00	00625	_	e 07/01/25	Vendor IX 100 *** Pa	10684 07/26/25 yment Total	NATIONAL CRIMINAL DEFI 1,700.00 1,700.00	ENSE Status 0.00 0.00	Issued	1,700.00 1,700.00
Payment Numl 29508 20 29508 20	per 1213981 025 #74 025 #78	Payment Date	e 07/01/25	Vendor IX 100 IX 100 *** Pa	29508 07/16/25 07/26/25 yment Total	OKUNSKAYA, TATIANA 180.86 220.86 401.72	Status 0.00 0.00 0.00	Issued	180.86 220.86 401.72
Payment Numb 10048 49	per 1213982 5533866 062725	Payment Date	9 07/01/25	Vendor IX 100 *** Pa	10048 07/27/25 yment Total	PITNEY BOWES BANK, INC 139,650.00 139,650.00	C. Status 0.00 0.00	Issued	139,650.00 139,650.00
Payment Numb 30394 14	per 1213983 425	Payment Date	e 07/01/25	Vendor IX 100 *** Pa	30394 07/24/25 yment Total	SMAL, PAWEL 234.10 234.10	Status 0.00 0.00	Issued	234.10 234.10
Payment Numb 43564 EX	per 1213984 KP20250617	Payment Date	e 07/01/25	Vendor IX 100 *** Pa	43564 06/27/25 yment Total	TARSITANO, TIFFANY 15.00 15.00	Status 0.00 0.00	Issued	15.00 15.00
Payment Numb 11201 34	per 1213985 1855593 053125	Payment Date ROE	9 07/01/25	Vendor IX 100 *** Pa	11201 06/30/25 Lyment Total	UNITED STATES POSTAL S 343.10 343.10	SERVICE Status 0.00 0.00	Issued	343.10 343.10
			*** P	ayment Cod Pa	le CHK Total yment Count	206,692.71 20	0.00		206,692.71

AP255 Date 07/01/25 Time 11:33	Pay Group 1000 GENERAL FUND PAY GROUP USD Bank Account Payment History		Page 4
Cash Code 1414 Bank 071923	Payment Date Range 07/01/25 thru 07/01/25 909 *** Cash Code 1414 Total 209,117.92 Payment Count 28	0.00	209,117.92
	*** Pay Group 1000 USD Total 209,117.92	0.00	209,117.92

AP255 Date: 07/01/25 Time: 11:33 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY Step Nbr: 2

Pay Group: 1100 Cash Code: 1414 Class C Accounts Payable

Payment Date: 070125 -Payment Numbers: Payment Code: 070125

AP255 Date 07/01/25 Time 11:34 Pay Group 1100 GENERAL GOVERNMENT PAY GROUP USD Page Bank Account Payment History

> 07/01/25 thru 07/01/25 Payment Date Range Payment Currency USD

Cash Code 1414 Bank 071923909

Payment Code ACH

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Date	Scheduled Amount	Discount Amount	Net Payment Amount

Payment Number 5358 26753 1PTG-TPWF-FQ4	803 Payment Date 07/01/25 4G	Vendor 26753 IX 150 07/09/25 *** Payment Total	AMAZON CAPITAL SERVICES 190.00 190.00	Status Issued 0.00	190.00 190.00
Payment Number 5358 40697 12931682 40697 12931920 40697 7549170		Vendor 40697 IX 160 05/31/25 IX 160 07/01/25 IX 160 06/30/25 *** Payment Total	BRINKS INCORPORATED 500.06 593.74 619.90 1,713.70	Status Issued 0.00 0.00 0.00 0.00	500.06 593.74 619.90 1,713.70
Payment Number 5358 10652 0185-23-RFP9B	805 Payment Date 07/01/25 B	Vendor 10652 IX 105 06/30/25 *** Payment Total	DUPAGE PADS INC 15,013.80 15,013.80	Status Issued 0.00 0.00	15,013.80 15,013.80
Payment Number 5358 11895 NIFB-31	806 Payment Date 07/01/25	Vendor 11895 IX 105 07/12/25 *** Payment Total	NORTHERN ILLINOIS FOOD BANK 128,246.84 128,246.84	Status Issued 0.00	128,246.84 128,246.84
	*** Pa	ayment Code ACH Total Payment Count	145,164.34 4	0.00	145,164.34

AP255 Date 07/01/25 Pay Group 1100 GENERAL GOVERNMENT PAY GROUP USD Page 2 Bank Account Payment History

Payment Date Range 07/01/25 thru 07/01/25

Cash Code 1414 Bank 071923909 Payment Code CHK

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	te Scheduled Amount I	Discount Amount N	Net Payment Amount
Payment Num 45657 2	nber 1213986 Paymer 25-005	t Date 07/01/25	Vendor IX 150 *** Pa	45657 07/02/25 ayment Total	MIRKOVIC, JOHN 11,500.00 11,500.00	Status 1 0.00 0.00	11,500.00 11,500.00
Payment Num		t Date 07/01/25	Vendor	11884	ACCURATE DOCUMENT DESTR 122.95 122.95	RIICTION Status 1	Issued 122.95
Payment Num 10009 2	nber 1213988 Paymer 287352264504X06082025	t Date 07/01/25	Vendor IX 105 *** Pa	10009 06/30/25 ayment Total	AT&T MOBILITY 44.76 44.76	Status 1 0.00 0.00	Assued 44.76 44.76
Payment Num 27908 2	nber 1213989 Paymer 2580891-B&Z	t Date 07/01/25	Vendor IX 170 *** Pa	27908 05/16/25 ayment Total	C.A. SHORT COMPANY 9.62 9.62	Status 1 0.00 0.00	9.62 9.62
Payment Num 19706 7	nber 1213990 Paymer 79804582	t Date 07/01/25	Vendor IX 105 *** Pa	19706 06/30/25 ayment Total	DPC REGIONAL OFFICE OF 11,339.26 11,339.26	EDUCATN Status 1 0.00 0.00	
Payment Num 44763 1	nber 1213991 Paymer 1467	t Date 07/01/25	Vendor IX 102 *** Pa	44763 05/30/25 ayment Total	NUGENT CONSULTING GROUP 1,260.75 1,260.75	P, LLC Status 1 0.00 0.00	1,260.75 1,260.75
Payment Num 42798 S	nber 1213992 Paymer SAGP2-20	t Date 07/01/25	Vendor IX 105 *** Pa	42798 07/10/25 ayment Total	RESTORATIVE RESOURCES 5,000.00 5,000.00	Status 1 0.00 0.00	5,000.00 5,000.00
23123 6	nber 1213993 Paymer 54152 JJR 56943 JJR	t Date 07/01/25	Vendor IX 102 IX 102 *** Pa	23123 06/30/24 12/30/24 ayment Total	ROCK FUSCO & CONNELLY I 1,290.00 2,925.00 4,215.00	LLC Status 1 0.00 0.00 0.00	1,290.00 2,925.00 4,215.00
					33,492.34		
				1414 Total ayment Count		0.00	178,656.68
		*** Pay Gr	oup 1100 Pa	USD Total ayment Count	178,656.68 12	0.00	178,656.68

AP255 Date: 07/01/25 Time: 11:34 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 3

Pay Group: 1200 Cash Code: 1414 Class C Accounts Payable

AP255 Date 07/01/25 Pay Group 1200 HEALTH AND WELFARE PAY GROUP USD Time 11:34

Bank Account Payment History

07/01/25 thru 07/01/25 Payment Date Range

Cash Code 1414 Bank 071923909 Payment Currency USD Payment Code ACH

Vendor Invoice Voucher Auth PL Due Date Dsc Date Scheduled Amount Discount Amount Net Payment Amount Payment Number 535807 Payment Date 07/01/25 Vendor 10076 WIGHT & COMPANY Status Issued 10076 250037-001 138,000.00 IX 100 06/30/25 138,000.00 0.00 138,000.00 *** Payment Total 0.00 138,000.00 *** Payment Code ACH Total 138,000.00 0.00 138,000.00 Payment Count 1

AP255 Date 07/01/25 Time 11:34 Pay Group 1200 HEALTH AND WELFARE PAY GROUP Bank Account Payment History USD Page

> 07/01/25 thru 07/01/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code CHK

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Date	e Scheduled Amount	Discount Amount	Net Pay	ment Amount
Payment N 29893	umber 1213994 Payment 205-0008-42735	Date 07/01/25	Vendor IX 100 *** Pa	29893	AIRDO WERWAS, LLC 352.69 352.69	Status 0.00 0.00	Issued	352.69 352.69
Payment N 27908 27908 27908	umber 1213995 Payment 2580891-DCC/ADMIN 2580891-DCC/DIN 2580891-DCC/NRSNG	Date 07/01/25	Vendor IX 100 IX 100 IX 100 *** Pa	27908 0 05/16/25 05/16/25 05/16/25 Nyment Total	C.A. SHORT COMPANY 9.62 9.62 28.86 48.10	Status 0.00 0.00 0.00 0.00	Issued	9.62 9.62 28.86 48.10
26602 26602 26602 26602 26602 26602 26602 26602 26602 26602 26602 26602 26602 26602 26602 26602 26602 26602 26602 26602	T213996 Payment 7426848842 7426992653 7426992655 7426992656 7426992658 7427213093 7427213107 7427213108 7427390429 7427390430 7427390431 7427390431 7427390434 7427600342 7427600345 7427600347 7427600347 7427600347 7427600348 7427799929 7427799930	Date 07/01/25	IX 100	20002 07/20/25 07/23/25 07/23/25 07/23/25 07/23/25 07/23/25 07/24/25 07/24/25 07/24/25 07/25/25 07/25/25 07/25/25 07/25/25 07/25/25 07/25/25 07/26/25 07/26/25 07/26/25 07/26/25 07/26/25 07/26/25 07/26/25 07/26/25	2.93 520.92 20.92 308.82 76.02 723.00 268.84 89.00 8,571.55 5.72 3.52 684.81 3,370.66 139.87 4.78 36.40 494.39 3,438.66 904.44 21.48 8.68 1,434.13	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Issued	2.93 520.92 20.92 308.82 76.02 723.00 268.84 89.00 8,571.55 5.72 3.52 684.81 3,370.66 139.87 4.78 36.40 494.39 3,438.66 904.44 21.48 8.68 1,434.13
12382	8771200470017191062225		IX 100 *** Pa	07/22/25 yment Total	1,210.56 1,210.56	0.00 0.00		1,210.56 1,210.56
Payment N 10586	umber 1213998 Payment 34369810	Date 07/01/25	Vendor IX 100 *** Pa	10586 I 07/26/25 yment Total	DIRECT SUPPLY INC 54.00 54.00	Status 0.00 0.00	Issued	54.00 54.00
	umber 1213999 Payment 33651656							
Payment N 18448	umber 1214000 Payment EXP20250528	Date 07/01/25	Vendor IX 100	18448 06/30/25	HILL, ERIC 50.00	Status 0.00	Issued	50.00

AP255 Date 07/01/25 Time 11:34 Pay Group 1200 HEALTH AND WELFARE PAY GROUP Bank Account Payment History USD Page

> 07/01/25 thru 07/01/25 Payment Date Range Payment Currency USD

Cash Code 1414 Bank 071923909

Payment Code CHK

Vendor In	nvoice	Voucher	Auth PL	Due Date Dsc Dat	e Scheduled Amount	Discount Amount	Net Pay	ment Amount
Payment Number	1214000 Payment	Date 07/01/25	Vendor *** Pa	18448 Lyment Total	HILL, ERIC 50.00	Status 0.00		
Payment Number 44693 000002 44693 000002 44693 000002 44693 000002	1214001 Payment 21775 21830 21981 22372 22670	Date 07/01/25	Vendor IX 100	44693 04/13/25 04/20/25 05/04/25 06/15/25 07/20/25 syment Total	MCMAHON FOOD CORPORATE 390.79 390.79 385.80 484.92 468.15 2,120.45	ION Status 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Issued	390.79 390.79 385.80 484.92 468.15 2,120.45
Payment Number 10098 2025 I	1214002 Payment AIC 062425	Date 07/01/25	Vendor IX 100 *** Pa	10098 07/24/25 Lyment Total	NIU OUTREACH 11,172.00 11,172.00	Status 0.00 0.00	Issued	11,172.00 11,172.00
Payment Number 12169 INV479	1214003 Payment 909	Date 07/01/25	Vendor IX 100 *** Pa	12169 07/17/25 Lyment Total	NUSTEP, LLC 7,244.00 7,244.00	Status 0.00 0.00	Issued	7,244.00 7,244.00
Payment Number 44692 900694 44692 907490	1214004 Payment 12 00	Date 07/01/25	Vendor IX 100 IX 100 *** Pa	44692 06/25/25 05/28/25 Nyment Total	PRAIRIE FARMS ROCKFORI 613.02 615.35 1,228.37	Status 0.00 0.00 0.00	Issued	613.02 615.35 1,228.37
Payment Number 30134 214364	1214005 Payment 16	Date 07/01/25	Vendor IX 100 *** Pa	30134 07/26/25 Lyment Total	PTS COMMUNICATIONS 75.00 75.00	Status 0.00 0.00	Issued	75.00 75.00
Payment Number 23123 70484	1214006 Payment DLM	Date 07/01/25	Vendor IX 100 *** Pa	23123 06/07/25 yment Total	ROCK FUSCO & CONNELLY 637.00	LLC Status 0.00 0.00	Issued	637.00 637.00
		Date 07/01/25	Vendor IX 100	10555 07/26/25 07/26/25 07/26/25 07/26/25 07/26/25 07/26/25 07/26/25 07/26/25 07/26/25 07/26/25 07/26/25 07/26/25 07/26/25 07/26/25 07/26/25	SYSCO FOOD SERVICES-CH 3,202.43 4,758.61 27.00 197.82 183.15 744.88 1,264.25 905.78 2,282.74 351.18 2,021.46 122.22 49.78 290.61 16,401.91	HICAGO Status 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	Issued	3,202.43 4,758.61 27.00 197.82 183.15 744.88 1,264.25 905.78 2,282.74 351.18 2,021.46 122.22 49.78 290.61 16,401.91

AP255 Date 07/01/25 Time 11:34 Pay Group 1200 HEALTH AND WELFARE PAY GROUP Bank Account Payment History USD

07/01/25 thru 07/01/25

Payment Code CHK

Payment Date Range Cash Code 1414 Bank 071923909 Payment Currency USD

Vendor	Invoice	Voucher Aut	h PL Due	Date Dsc Date	Scheduled Amount	Discount Ar	mount Net I	Payment Amount
Payment Numk 38503 10		IX		30/25	OLD ARCHITECTS AND 6,214.21 6,214.21	-	Status Issue 0.00 0.00	ed 6,214.21 6,214.21
		*** Payme	ent Code CH Paymen	K Total it Count	68,973.31 15	(0.00	68,973.31
		*** Cash		Total it Count	206,973.31 16	(0.00	206,973.31
		*** Pay Group		Total nt Count	206,973.31 16	(0.00	206,973.31

AP255 Date: 07/01/25 Time: 11:34 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 5

Pay Group: 1400 Cash Code: 1414 Class C Accounts Payable

AP255 Date 07/01/25 Pay Group 1400 JUDICIAL PAY GROUP USD Time 11:35 Bank Account Payment History

Payment Date Range 07/01/25 thru 07/01/25

Cash Code 1414 Bank 071923909 Payment Currency USD Payment Code ACH

Vendor	Invo	ice 		Voucher	Auth PL	Due Date Dsc	Date Sc	cheduled Amount	Discount Amount	Net Paym	nent Amount
Payment Numb 12232 S1		535808	Payment	Date 07/01/25	IX 101	12232 07/26/25 Lyment Total	LOGIC	CALIS INC 5,394.70 5,394.70	Status 0.00 0.00	Issued	5,394.70 5,394.70
				*** P		le ACH Total		5,394.70 1	0.00		5,394.70

AP255 Date 07/01/25 Time 11:35 Pay Group 1400 JUDICIAL PAY GROUP Bank Account Payment History USD

Page

Payment Date Range

07/01/25 thru 07/01/25

Cash Code 1414 Bank 071923909

Payment Code CHK

Vendor	Invoice	Voucher	Auth PL Du	ıe Date Dsc Dat	ce Scheduled Amount	Discount Amoun	t Net Payment A	mount
Payment Num 10593 2		ment Date 07/01/25	Vendor IX 130 06 *** Payme	10593 5/26/25 ent Total	AMERICAN PROBATION AN 625.00 625.00	D PAROLE Sta 0. 0.00		25.00 25.00
Payment Num 40864 T	nber 1214010 Paym RV20250527	ment Date 07/01/25	Vendor IX 130 06 *** Payme	40864 5/24/25 ent Total	CALDERON, SHERYL 940.07 940.07	Sta 0. 0.00		10.07 10.07
Payment Num 37549 E	nber 1214011 Paym XXP20250501	ment Date 07/01/25	Vendor IX 130 06 *** Payme	37549 5/27/25 ent Total	SCHOENBACH, KRISTIN 153.38 153.38	Sta 0. 0.00		53.38
		*** Pa	yment Code C Payme	CHK Total ent Count	1,718.45 3	0.00	1,71	18.45
		*** Ca	sh Code 141 Payme	l4 Total ent Count	7,113.15 4	0.00	7,11	13.15
		*** Pay Gr	oup 1400 USD Payme	O Total ent Count	7,113.15 4	0.00	7,11	13.15

AP255 Date: 07/01/25 Time: 11:35 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 6

Pay Group: 1500 Cash Code: 1414 Class C Accounts Payable

AP255 Date 07/01/25 Time 11:35 Pay Group 1500 HWY STREETS & BRIDGES PAY GRP Bank Account Payment History Page

> 07/01/25 thru 07/01/25 Payment Date Range

Cash Code 1414 Payment Code ACH Bank 071923909

Vendor	Invoice	Voucher	Auth PL Due Date Dsc I	Oate Scheduled Amount Discount	Amount Net P	ayment Amount
Payment Number 31650 77	er 535809 Payment 06-PE01	Date 07/01/25	Vendor 31650 IX 101 07/23/25 *** Payment Total	BUILDERS PAVING, LLC 405,517.50 405,517.50	Status Issue 0.00 0.00	405,517.50 405,517.50
Payment Number 11067 IN	er 535810 Payment 00781124	Date 07/01/25	Vendor 11067 IX 100 07/24/25 *** Payment Total	FOX VALLEY FIRE & SAFETY 523.99 523.99	Status Issue 0.00 0.00	523.99 523.99
Payment Number 12406 71		Date 07/01/25	Vendor 12406 IX 100 06/01/25 *** Payment Total	H.W. LOCHNER, INC 9,954.67 9,954.67	Status Issue 0.00 0.00	9,954.67
	er 535812 Payment 04-03 WO17 FINAL	Date 07/01/25	Vendor 11585 IX 100 07/20/25 *** Payment Total	HUFF & HUFF, INC. 599.79 599.79	Status Issue 0.00 0.00	d 599.79 599.79
Payment Number 10843 77		Date 07/01/25	Vendor 10843 IX 101 07/23/25 *** Payment Total	K-FIVE CONSTRUCTION CORP 481,129.20 481,129.20	Status Issue 0.00 0.00	d 481,129.20 481,129.20
Payment Number 32242 35		Date 07/01/25	Vendor 32242 IX 100 06/18/25 *** Payment Total	LEECH TISHMAN FUSCALDO & LAMPL 20.00	Status Issue 0.00 0.00	20.00
Payment Number 20317 76		Date 07/01/25	Vendor 20317 IX 101 07/23/25 *** Payment Total	PRECISION PAVEMENT MARKING 108,613.06 108,613.06	Status Issue 0.00 0.00	108,613.06 108,613.06
	er 535816 Payment 26-01 WO10		Vendor 32601 IX 100 07/05/25 *** Payment Total	STATE TESTING, LLC 177.80 177.80	Status Issue 0.00 0.00	177.80 177.80
		*** P	ayment Code ACH Total Payment Count	1,006,536.01	0.00	1,006,536.01

AP255 Date 07/01/25 Time 11:35 Pay Group 1500 HWY STREETS & BRIDGES PAY GRP Bank Account Payment History USD Page

> 07/01/25 thru 07/01/25 Payment Date Range Payment Currency USD

Cash Code 1414 Bank 071923909

Payment Code CHK

Vendor Ir	nvoice	Voucher	Auth PL	Due Date Dsc Da	te Scheduled Amount	Discount Amount	Net Payment Amount
Payment Number 11474 6379-I	1214012 Payment PE07	Date 07/01/25	Vendor IX 100 *** Pa	11474 07/23/25 ayment Total	A LAMP CONCRETE CONTR. 6,697.53 6,697.53	ACTORS Status 0.00 0.00	Issued 6,697.53 6,697.53
Payment Number 11260 INV094	1214013 Payment 1089	Date 07/01/25	Vendor IX 100 *** Pa	11260 07/10/25 Ayment Total	AUTO TECH CENTERS INC 5,458.82 5,458.82	. Status 0.00 0.00	5,458.82 5,458.82
Payment Number 27908 258089 27908 258089 27908 258220 27908 258579	1214014 Payment 91-DOT 91-DOT MTC 95	Date 07/01/25	Vendor IX 100 IX 100 IX 100 IX 100 IX 100	27908 05/16/25 05/16/25 05/21/25 05/25/25 ayment Total	C.A. SHORT COMPANY 28.86 9.62 159.00 159.00 356.48	Status 0.00 0.00 0.00 0.00 0.00	Issued
Payment Number 23241 489327	1214015 Payment	Date 07/01/25	Vendor IX 100	23241 06/05/25 syment Total	CITY OF CHICAGO FMPS 1,000.00	Status 0.00 0.00	Issued 1,000.00 1,000.00
Payment Number 10023 176018	1214016 Payment 37000 061725	Date 07/01/25	Vendor IX 100 *** Pa	10023 07/17/25 ayment Total	COM ED 6,560.20 6,560.20	Status 0.00 0.00	Issued 6,560.20 6,560.20
Payment Number 10023 576911 10023 687265 10023 721266	1214017 Payment 1222 062525 99000 062325 2000 061825	Date 07/01/25	Vendor IX 100 IX 100 IX 100 *** Pa	10023 07/25/25 07/23/25 07/18/25 ayment Total	COM ED 598.73 258.30 76.05 933.08	Status 0.00 0.00 0.00 0.00	Issued 598.73 258.30 76.05 933.08
Payment Number 38412 80894	1214018 Payment	Date 07/01/25	Vendor IX 100 *** Pa	38412 07/16/25 ayment Total	CRUSH-CRETE, INC. 672.00 672.00	Status 0.00 0.00	Issued 672.00 672.00
Payment Number 10030 8436 10030 8455 10030 8523	1214019 Payment	Date 07/01/25	Vendor IX 100 IX 100 IX 100 IX 100	10030 07/02/25 07/05/25 07/17/25	DUKANE ASPHALT COMPAN 267.80 1,846.65 9,090.90	Y Status 0.00 0.00 0.00	Issued
Payment Number	1214020 Payment 29 22 25 26 27 28 29 44	Date 07/01/25	Vendor IX 100	12084 06/28/25 07/07/25 07/10/25 07/10/25 07/10/25 07/10/25 07/10/25 07/11/25 07/11/25	HAGGERTY FORD 79.00 255.55 294.43 294.43 294.43 294.43 61.60 473.53 323.59	Status 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	79.00 255.55 294.43 294.43 294.43 294.43 61.60 473.53 323.59

AP255 Date 07/01/25 Time 11:35 Pay Group 1500 HWY STREETS & BRIDGES PAY GRP Page Bank Account Payment History

Payment Currency USD

07/01/25 thru 07/01/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code CHK

Vendor In	voice 	Voucher	Auth PL Due Date Dsc	Date Scheduled Amount Discou	unt Amount Net P	ayment Amount
Payment Number 12084 3-2104 12084 3-2105				HAGGERTY FORD 931.48 35.94 3,338.41		
Payment Number 12170 423540	1214021 Paymen	t Date 07/01/25	Vendor 12170 IX 100 06/28/25 *** Payment Total	HENDERSON PRODUCTS INC 982.98 982.98	Status Issue 0.00 0.00	d 982.98 982.98
				BRAD BAILEY SALES 30,544.00 30,544.00		
Payment Number 27225 MNS327	1214023 Paymen 031	t Date 07/01/25	Vendor 27225 IX 100 07/13/25 *** Payment Total	MANSFIELD POWER AND GAS 959.01 959.01	Status Issue 0.00 0.00	d 959.01 959.01
Payment Number 11213 283236 11213 283240 11213 284304		t Date 07/01/25	Vendor 11213 IX 100 06/27/25 IX 100 06/27/25 IX 100 07/09/25 *** Payment Total	NAPA AUTO PARTS 10.11 70.77 126.30 207.18	Status Issue 0.00 0.00 0.00 0.00	10.11 70.77 126.30 207.18
Payment Number 24975 WF1343 24975 WF1343	6	+ Data 07/01/25	Mondon 24075		Ctatua Tagua	٦
Payment Number 42450 52714	1214026 Paymen	t Date 07/01/25	Vendor 42450 IX 100 05/04/25 *** Payment Total	ENERGICITY CORP 731,016.50 731,016.50	Status Issue 0.00 0.00	d 731,016.50 731,016.50
				US STANDARD SIGN CO. 9,870.50 9,870.50		
Payment Number 10597 611486		t Date 07/01/25	Vendor 10597 IX 100 07/01/25 *** Payment Total	VERIZON 748.68 748.68	Status Issue 0.00 0.00	
		*** P	ayment Code CHK Total Payment Count	874,971.80 17	0.00	874,971.80
		*** C	ash Code 1414 Total Payment Count	1,881,507.81 25	0.00	1,881,507.81
		*** Pay G	roup 1500 USD Total Payment Count	1,881,507.81 25	0.00	1,881,507.81

AP255 Date: 07/01/25 Time: 11:35 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY Step Nbr: 7

Pay Group: 1600 Cash Code: 1414 Class C Accounts Payable

AP255 Date 07/01/25 Pay Group 1600 CONSERV & RECREATION PAY GROUP USD Bank Account Payment History

Page

Payment Date Range 07/01/25 thru 07/01/25

Cash Code 1414 Bank 071923909

Payment Code ACH

Vendor	Invoice	Voucher .	Auth PL	Due Date Dsc Date	e Scheduled Amount	Discount Amount	Net Payment Amount
Payment Numb 10667 AE 10667 AE	52Z7Z	nt Date 07/01/25	Vendor IX 100 IX 100 *** Pa	10667 07/12/25 07/13/25 yment Total	CDW GOVERNMENT INC 68.92 33.15 102.07	Status 0.00 0.00 0.00	Issued 68.92 33.15 102.07
Payment Numb 10922 06		nt Date 07/01/25	Vendor IX 100 *** Pa	10922 S 06/24/25 yment Total	SCARCE 19,583.33 19,583.33	Status 0.00 0.00	Issued 19,583.33 19,583.33
		*** Pa		e ACH Total yment Count	19,685.40 2	0.00	19,685.40

AP255 Date 07/01/25 Pay Group 1600 CONSERV & RECREATION PAY GROUP USD Bank Account Payment History

Payment Date Range

07/01/25 thru 07/01/25

Cash Code 1414 Bank 071923909 Payment Code CHK Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Date	Scheduled Amount	Discount Amoun	ı Net Pay	ment Amount
	per 1214029 Payr 000000753	ment Date 07/01/25	IX 100		A BLOCK MULCH & MARKE 40.00 40.00	0.	tus Issued 00	40.00 40.00
Payment Numk 11017 25 11017 25	500501	ment Date 07/01/25	IX 100 IX 100	05/30/25 07/25/25	GLOBETROTTERS ENGINEE 1,413.55 12,619.10 14,032.65	0.		1,413.55 12,619.10 14,032.65
	per 1214031 Payt XP20250521	ment Date 07/01/25	IX 100		CISSANE, CLAIRE 159.84 159.84	0.	tus Issued 00	159.84 159.84
Payment Numb 12030 64		ment Date 07/01/25	IX 100	12030 W 07/16/25 yment Total	VILLOWBROOK FORD INC 679.10 679.10	Sta 0. 0.00		679.10 679.10
		*** Pa		e CHK Total yment Count	14,911.59 4	0.00		14,911.59
		*** Ca		1414 Total yment Count	34,596.99 6	0.00		34,596.99
		*** Pay Gi	_	USD Total yment Count	34,596.99 6	0.00		34,596.99

AP255 Date: 07/01/25 Time: 11:35 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 8

Pay Group: 2000 Cash Code: 1414 Class C Accounts Payable

AP255 Date 07/01/25 Time 11:35 Pay Group 2000 PUBLIC WORKS PAY GROUP Bank Account Payment History USD

> 07/01/25 thru 07/01/25 Payment Date Range

Cash Code 1414 Payment Code ACH Bank 071923909

Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	ce Scheduled Amount	Discount Amount	Net Payment Amount
10124 93	per 535819 Payment 341890184 341926724 342088793	Date 07/01/25	Vendor IX 100 IX 100 IX 100 *** Pa	10124 05/31/25 06/04/25 06/15/25 yment Total	GRAYBAR 205.07 695.63 456.43 1,357.13	Status 0.00 0.00 0.00 0.00	1ssued 205.07 695.63 456.43 1,357.13
Payment Numb 10705 24	per 535820 Payment 4-0297-19608	Date 07/01/25	Vendor IX 100 *** Pa	10705 02/13/25 yment Total	HEY & ASSOCIATES INC 2,300.00 2,300.00	Status 0.00 0.00	Issued 2,300.00 2,300.00
Payment Numb 10549 04	per 535821 Payment 45ST1-494736	Date 07/01/25	Vendor IX 100 *** Pa	10549 07/24/25 yment Total	REDWING BUSINESS ADVA 200.00 200.00	NTAGE Status 0.00 0.00	Issued 200.00 200.00
		*** Pa		e ACH Total yment Count	3,857.13	0.00	3,857.13

AP255 Date 07/01/25 Pay Group 2000 PUBLIC WORKS PAY GROUP USD Page Time 11:35 Bank Account Payment History

Payment Currency USD

HARDY DIAGNOSTICS

164.03

372.90

HOME DEPOT CREDIT SERVICES

70.94

HINSDALE NURSERIES INC

164.03

112.00

281.90

84.00-

63.00

70.94

Payment Date Range 07/01/25 thru 07/01/25

Cash Code 1414 Bank 071923909

Payment Code CHK

Payment Number

Payment Number

Payment Number

28833 580502

27085 1846217

27085 1850828

27085 1850853

27085 1855179

11219 0174 0231 042825A

1214040 Payment Date 07/01/25

1214041 Payment Date 07/01/25

1214042 Payment Date 07/01/25

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	e Scheduled	Amount Discount	Amount	Net Payme	ent Amount
	ber 1214033 Payment 377-1028980	Date 07/01/25	IX 100	26948 03/28/25 yment Total	ADVANCE AUTO	148.72	Status 0.00 0.00	Issued	148.72 148.72
10008 6 10008 6	ber 1214034 Payment 30323067706 2025 30773995206 2025 30964750306 2025	Date 07/01/25	IX 100 IX 100 IX 100	10008 07/13/25 07/19/25 07/07/25 yment Total	AT&T 899	258.00 58.45 582.93	Status 0.00 0.00 0.00 0.00	Issued	258.00 58.45 582.93 899.38
12071 1	ber 1214035 Payment 125013500 125013501	Date 07/01/25	IX 100 IX 100	12071 03/09/25 03/09/25 yment Total	ATLAS COPCO	COMPRESSORS LLC 910.00 315.00 .00	Status 0.00 0.00 0.00	Issued	910.00 315.00 1,225.00
	ber 1214036 Payment FF-086668	Date 07/01/25	IX 100	26212 07/20/25 yment Total	BLAINS FARM	189.99	Status 0.00 0.00		189.99 189.99
Payment Num 12382 8	ber 1214037 Payment 771201210396127062325		IX 100	12382 07/23/25 yment Total	COMCAST 253	253.85 .85	Status 0.00 0.00	Issued	253.85 253.85
11196 8 11196 8 11196 8	ber 1214038 Payment -882-49736 -889-93441 -897-17295 -904-90598		IX 100 IX 100 IX 100 IX 100	11196 07/04/25 07/11/25 07/18/25 07/25/25 yment Total		26.13 111.71 80.67 64.85	Status 0.00 0.00 0.00 0.00		26.13 111.71 80.67 64.85 283.36
Payment Num 22422 6	ber 1214039 Payment 4-345987	Date 07/01/25	IX 100		HANES GEO CO 1 1,164	,164.58	Status 0.00 0.00		1,164.58 1,164.58

28833

27085

11219

07/16/25

06/06/25

06/18/25

06/18/25

07/03/25

05/28/25

*** Payment Total

*** Payment Total

*** Payment Total

Vendor

Vendor

100

Vendor

IX 100

IX 100

IX 100

IX 100

IX 100

164.03

164.03

112.00

281.90

84.00-

63.00

70.94

70.94

372.90

Status Issued

Status Issued

Status Issued

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

AP255 Date 07/01/25 Time 11:35 Pay Group 2000 PUBLIC WORKS PAY GROUP Bank Account Payment History USD Page

> 07/01/25 thru 07/01/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code CHK

Vendor Invoice	Voucher Auth PL	Due Date Dsc Da	te Scheduled Amount Disc	count Amount	Net Payment Amount
Payment Number 1214043 Payment 46359 INV2025-00077	Date 07/01/25 Vendor IX 100 *** F	46359 06/18/25 Payment Total	INVENT ENVIRONMENTAL 6,303.00 6,303.00	Status 0.00 0.00	6,303.00
Payment Number 1214044 Payment 10057 33730110005 060225 10057 39780069603 062325 10057 50957010007 060225 10057 52066010001 061725 10057 63185400007 062525	IX 100 IX 100	07/02/25 07/23/25 07/02/25	NICOR GAS 3,995.87 79.28 441.43 61.98 56.65 4,635.21	0.00	1ssued 3,995.87 79.28 441.43 61.98 56.65 4,635.21
Payment Number 1214045 Payment 30812 MISC00000135114	Date 07/01/25 Vendor IX 100 *** E	30812 07/24/25 Payment Total	NORTH SHORE WATER RECLAMAT 1,600.00 1,600.00	TION Status 0.00 0.00	Issued 1,600.00 1,600.00
Payment Number 1214046 Payment 24920 DE-09575	Date 07/01/25 Vendor IX 100 *** E	24920 07/19/25 Payment Total	PETERBILT ILLINOIS JOLIET 170,727.73 170,727.73	INC Status 0.00 0.00	
Payment Number 1214047 Payment 39476 1426878 39476 1427190	Date 07/01/25 Vendor IX 100 IX 100 *** F	39476 07/06/25 07/11/25 Payment Total	ROWELL CHEMICAL CORPORATION 4,601.71 6,255.32 10,857.03	ON Status 0.00 0.00 0.00	4,601.71 6,255.32
Payment Number 1214048 Payment 19721 0226277	Date 07/01/25 Vendor IX 100 *** E	19721 07/12/25 Payment Total	STRAND ASSOCIATES INC 43,015.15 43,015.15	Status 0.00 0.00	Issued 43,015.15 43,015.15
Payment Number 1214049 Payment 11812 INV00705527 11812 INV00740559 11812 INV00745370	Date 07/01/25 Vendor IX 100 IX 100 IX 100 X** F	06/07/25	USA BLUEBOOK 96.14 841.55 590.14 1,527.83	Status 0.00 0.00 0.00 0.00	96.14 841.55 590.14
		ode CHK Total Payment Count		0.00	
	*** Cash Code I	1414 Total Payment Count	247,295.83 20	0.00	247,295.83
	*** Pay Group 2000 E) USD Total Payment Count	247,295.83 20	0.00	247,295.83

AP255 Date: 07/01/25 Time: 11:35 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 9

Pay Group: 5000 Cash Code: 1414 Class C Accounts Payable

AP255 Date 07/01/25 Time 11:36 Pay Group 5000 DUPAGE COUNTY GRANTS PAY GROUP USD Bank Account Payment History Page

Payment Currency USD

07/01/25 thru 07/01/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code ACH

Vendor	Invoice	Voucher Auth Pl	Due Date Dsc D	Date Scheduled Amount Disco	unt Amount Net	Payment Amount
12953 2 12953 2	mber 535822 Payment 25-060 25-060U 25-101U	IX 100 IX 30° IX 100	06/05/25 06/05/25	ARCOS ENVIRONMENTAL SVCS INC 7,733.13 7,733.13 24,232.46 39,698.72	Status Issu 0.00 0.00 0.00 0.00	7,733.13 7,733.13 24,232.46 39,698.72
23461	mber 535823 Payment 4557365 DISCOUNT TIRE DSSA-23-S50B2	IX 209 IX 209	06/30/25	DUPAGE COUNTY COMMUNITY 326.64 48.53 375.17	Status Issu 0.00 0.00 0.00	ed 326.64 48.53 375.17
Payment Nur 14166 14166 14166 14166 14166 14166	45589 45623 45676 45679 45682 45704	Date 07/01/25 Vendo IX 100 IX	0 02/27/25 0 04/18/25 0 06/13/25 0 04/26/25 0 04/16/25 0 05/10/25	HEALTHY AIR HEATING & AIR II 7,235.60 14,109.26 20,988.46 18,206.46 23,240.06 5,851.10 18,071.56 107,702.50	NC Status Issu 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0	7,235.60 14,109.26 20,988.46 18,206.46 23,240.06 5,851.10 18,071.56 107,702.50
Payment Nur 11959 (mber 535825 Payment OCMERAP023AO	IX 110		OUTREACH COMMUNITY MINISTRI 6,504.35 6,504.35	ES Status Issu 0.00 0.00	ed 6,504.35 6,504.35
	mber 535826 Payment OCMERAP027AO	IX 110		OUTREACH COMMUNITY MINISTRI 1,528.10 1,528.10	Status Issu 0.00 0.00	ed 1,528.10 1,528.10
Payment Nur 11959 (mber 535827 Payment DCMERAP030A	Date 07/01/25 Vendo IX 110 ***		OUTREACH COMMUNITY MINISTRI 41,700.42 41,700.42	Status Issu 0.00 0.00	ed 41,700.42 41,700.42
		*** Payment (Code ACH Total Payment Count	197,509.26 6	0.00	197,509.26

AP255 Date 07/01/25 Pay Group 5000 DUPAGE COUNTY GRANTS PAY GROUP USD Bank Account Payment History

Payment Date Range 07/01/25 thru 07/01/25

Cash Code 1414 Bank 071923909

Payment Code CHK

Payment Currency USD

Vendor Inv	<i>r</i> oice	Voucher	Auth PL	Due Date Dsc Da	te Scheduled Amount	Discount Amount	Net Payment Amount
Payment Number 21779 R62295					3D COMPLETE CAR CARE 1,735.93 1,735.93		
Payment Number 38946 062625	1214051 Payment	Date 07/01/25	Vendor IX 110 *** Pa	38946 07/26/25 Lyment Total	ABSALONSEN, KENT A 200.00 200.00	Status 0.00 0.00	1ssued 200.00 200.00
Payment Number 10671 183715 10671 183852	1214052 Payment	Date 07/01/25	IX 105 IX 202	10671 07/13/25 07/25/25 Lyment Total	ALPHAGRAPHICS 54.04 39.50 93.54	Status 0.00 0.00 0.00	Issued 54.04 39.50 93.54
Payment Number 32632 DHS-176	1214053 Payment 50-25-2548	Date 07/01/25	Vendor IX 209 *** Pa	32632 06/27/25 yment Total	5,091.00 5,091.00	Status 0.00 0.00	Issued 5,091.00 5,091.00
Payment Number 32632 DHS-176	1214054 Payment 50-25-2562	Date 07/01/25	Vendor IX 209 *** Pa	32632 06/30/25 yment Total	AVANATH HINSDALE, LLC 3,742.00 3,742.00	Status 0.00 0.00	Issued 3,742.00 3,742.00
Payment Number 38714 061825 38714 062625			IX 110 IX 110	38714 07/18/25 07/26/25 yment Total	CADIZ, CAROL 200.00 200.00 400.00	Status 0.00 0.00 0.00	200.00 200.00
Payment Number 11122 062625.	1214056 Payment DC-VA.BUS	Date 07/01/25	Vendor IX 104 *** Pa	11122 07/26/25 yment Total	CHICAGO TRANSIT AUTHO 240.00 240.00	RITY Status 0.00 0.00	Issued 240.00 240.00
Payment Number 10811 DHS-176	1214057 Payment 50-25-2560	Date 07/01/25	Vendor IX 209 *** Pa	10811 06/30/25 Lyment Total	COMMUNITY HOUSING ADV 1,208.00 1,208.00	OCACY & Status 0.00 0.00	1,208.00 1,208.00
Payment Number 34553 MIL2025	1214058 Payment 50530	Date 07/01/25	IX 200	34553 06/26/25 Lyment Total	DAWKINS, ARTLEISA 32.90 32.90	Status 0.00 0.00	32.90
Payment Number 22707 DHS-176	1214059 Payment 50-25-2541	Date 07/01/25	TX 209	22707 06/30/25 Lyment Total	EMP PROPERTIES LLC 1,365.00 1,365.00	Status 0.00 0.00	Issued 1,365.00 1,365.00
Payment Number 34438 11915	1214060 Payment			34438 07/25/25 Lyment Total	EUROPEAN SERVICE LLC 507.50 507.50	Status 0.00 0.00	Issued 507.50 507.50
Payment Number 43546 062025 43546 062425	1214061 Payment	Date 07/01/25	Vendor IX 208 IX 110		MCCOY, CATHERINE 300.00 200.00	Status 0.00 0.00	Issued 300.00 200.00

AP255 Date 07/01/25 Pay Gro Time 11:36 Bank Ac

Pay Group 5000 DUPAGE COUNTY GRANTS PAY GROUP USD Bank Account Payment History

Payment Date Range 07/01/25 thru 07/01/25

Cash Code 1414 Bank 071923909 Payment Code CHK

Payment Currency USD

Vendor	Invoice		Voucher	Auth PL	Due Date Dsc D	ate Scheduled Amount	Discount Amount	Net Pay	yment Amount
Payment Nur	mber 1214061	Payment	Date 07/01/25	Vendor *** Pa	43546 Ayment Total	MCCOY, CATHERINE 500.00	Status 0.00	Issued	500.00
Payment Nur 43797 6	mber 1214062 634009	Payment	Date 07/01/25	Vendor IX 108 *** Pa	43797 07/16/25 ayment Total	GEOSYNTEC CONSULTANTS 1,785.00 1,785.00	, INC Status 0.00 0.00	Issued	1,785.00 1,785.00
Payment Nur 46364 I	mber 1214063 DHS-1760-25-256	Payment 1	Date 07/01/25	Vendor IX 209 *** Pa	46364 07/27/25 ayment Total	INLAND PROPERTY MANAGE 6,828.82 6,828.82	EMENT & Status 0.00 0.00		6,828.82
Payment Nur 26848 2	mber 1214064 2020632	Payment	Date 07/01/25	Vendor IX 105 *** Pa	26848 06/26/25 ayment Total	LEMON PRESS PRINTING 162.63 162.63	Status 0.00 0.00	Issued	162.63 162.63
Payment Nur 46358 2	mber 1214065 2025320	Payment	Date 07/01/25	Vendor IX 101 *** Pa	46358 07/26/25 ayment Total	PETE FRICANO & SON CUS 2,500.00 2,500.00	STOM Status 0.00 0.00	Issued	2,500.00 2,500.00
Payment Nur 39473 (mber 1214066 062525	Payment	Date 07/01/25			SOJKA, RONALD D. 200.00 200.00			
Payment Nur 44694 I	mber 1214067 EXP20250610	Payment	Date 07/01/25	Vendor IX 207 *** Pa	44694 06/27/25 ayment Total	WALSH, ANN CELINE 855.94 855.94	Status 0.00 0.00	Issued	855.94 855.94
Payment Nur 25445 I	mber 1214068 DHS-1760-25-256	Payment 6	Date 07/01/25	Vendor IX 209 *** Pa	25445 06/30/25 ayment Total	WATERFORD GREENS APAR 2,964.69 2,964.69	TMENTS Status 0.00 0.00	Issued	2,964.69 2,964.69
Payment Nur 46007 I	mber 1214069 DHS-1760-25-256	Payment 5	Date 07/01/25	Vendor IX 209 *** Pa	46007 07/27/25 syment Total	WRPV XV AVANT LISLE LI 9,137.43 9,137.43	CC Status 0.00 0.00	Issued	9,137.43 9,137.43
			*** P	ayment Cod Pa	le CHK Total Ayment Count	39,550.38 20	0.00		39,550.38
						237,059.64 26	0.00		237,059.64
			*** Pay G	roup 5000 Pa	USD Total ayment Count	237,059.64 26	0.00		237,059.64

AP255 Date: 07/01/25 Time: 11:36 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 10

Pay Group: 6000 Cash Code: 1414 Class C Accounts Payable

AP255 Date 07/01/25 Time 11:36 Pay Group 6000 CAPITAL PROJECTS PAY GROUP Bank Account Payment History USD

> 07/01/25 thru 07/01/25 Payment Date Range

Cash Code 1414 Payment Code ACH Bank 071923909

Payment Currency USD

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Dat	ce Scheduled Amount	Discount Amount	Net Payment Amount
Payment Numk 41893 S.	per 535828 Payment D INV.NOV2024.09	ate 07/01/25	IX 100	41893 12/27/24 Lyment Total	ONACTUATE CONSULTING 8,140.00 8,140.00	U.S. INC Status 0.00 0.00	8,140.00 8,140.00
		*** P		le ACH Total	8,140.00 1	0.00	8,140.00

AP255 Date 07/01/25 Time 11:36 Pay Group 6000 CAPITAL PROJECTS PAY GROUP Bank Account Payment History USD Page

> 07/01/25 thru 07/01/25 Payment Date Range

Cash Code 1414 Bank 071923909

Payment Code CHK

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc Date	Scheduled Amount	Discount Amount	Net Payment Amount

Payment Number 1214070 Payment Date 07/01 41892 IN1516508 41892 IN1544377 41892 IN1577207	/25 Vendor 41892 IX 100 05/21/25 IX 100 06/20/25 IX 100 07/20/25 *** Payment Total	DAYFORCE US, INC. 27,400.00 27,400.00 27,400.00 82,200.00	Status Issued 0.00 27,400.00 0.00 27,400.00 0.00 27,400.00 0.00 82,200.00
**	-	82,200.00	0.00 82,200.00
**	* Cash Code 1414 Total Payment Count	,	0.00 90,340.00
*** Pa	y Group 6000 USD Total Payment Count	,	0.00 90,340.00

AP255 Date: 07/01/25 Time: 11:36 JOB SUBMISSION PARAMETERS

User Name: DP\FNAXE Job Name: PMTHISTORY

Step Nbr: 14

Pay Group: 8700 Cash Code: 1414 Class C Accounts Payable

AP255 Date 07/01/25 Time 11:36 Pay Group 8700 CUSTODIAL FUNDS Bank Account Payment History USD

Page

07/01/25 thru 07/01/25 Payment Date Range

Cash Code 1414 Payment Code CHK

Bank 071923909

Vendor	Invoice	Voucher	Auth PL	Due Date Dsc	Date Scheduled Amount	Discount Amount Ne	et Payment Amount
Payment Numb 20304 96		Date 07/01/25	Vendor IX 153 *** Pay	20304 07/09/25 yment Total	VILLAGE OF CAROL STRE 50,024.60 50,024.60	SAM Status Is 0.00 0.00	50,024.60 50,024.60
		*** Pa	4	e CHK Total yment Count	50,024.60 1	0.00	50,024.60
		*** Ca		1414 Total yment Count	50,024.60 1	0.00	50,024.60
		*** Pay Gr	-	USD Total vment Count	50,024.60 1	0.00	50,024.60



File #: CB-R-0057-25 Agenda Date: 7/8/2025 Agenda #: 9.A.

RESOLUTION APPROVING MEMBER INITIATIVE PROGRAM AGREEMENTS

WHEREAS, the DuPage County Board has appropriated approximately \$1.8 million for use in the Member Initiative Program (MIP) as part of FI-O-0010-24; and

WHEREAS, various members of the DuPage County Board have submitted applications for the use of MIP funds for various not-for-profit and municipal entities; and

WHEREAS, the DuPage County Board has considered the applications of the following entities:

- a. Village of Hanover Park (\$30,000)
- b. Wheaton Park District (\$50,544)
- c. Outreach Community Ministries (\$30,000)
- d. DuPage County Animal Services (two projects) (\$73,155)
- e. Variety Children's Charity (\$15,000)
- f. DuPage Health Coalition (\$25,000)
- g. Alliance of Latinos Motivating Action in the Suburbs (\$10,000)

NOW, THEREFORE BE IT RESOLVED, the DuPage County Board authorizes the DuPage County Chair to enter into agreements substantially in the form of the agreements attached as part of Exhibits A-G to this Resolution; and

BE IT FURTHER RESOLVED, that a copy of this Resolution is to be sent to each of the above referenced entities at the following addresses:

- a. Village of Hanover Park, 2121 W. Lake St., Hanover Park, IL 60133
- b. DuPage Historical Museum, 102 E. Wesley St., Wheaton, IL 60187
- c. Outreach Community Ministries, 373 S. Schmale Road, Suite 102, Carol Stream, IL 60188
- d. DuPage County Animal Services, 2255 Manchester Road, Wheaton, IL 60187
- e. Variety Children's Charity, 603 Rogers St., Floor 1, Downers Grove, IL 60515
- f. Access DuPage, 845 E. Geneva Road, Carol Stream, IL 60188
- g. Alliance of Latinos Motivating Action in the Suburbs, 1129 Gateshead Drive, Naperville, IL 60564

File #: CB-R-0057-25	Agenda Date: 7/8/2025	Agenda #: 9.A.
	LVED, that a copy of this Resolution is to bunty Finance Department, (3) the DuPage	` '
Enacted and appr	oved this 8th day of July, 2025 at Wheaton,	Illinois.
		DEBORAH A. CONROY, CHAI
		DU PAGE COUNTY BOAR
	A	
	Attest:	KACZMAREK, COUNTY CLER

INTERGOVERNMENTAL AGREEMENT BETWEEN COUNTY OF DUPAGE, ILLINOIS AND VILLAGE OF HANOVER PARK FOR VILLAGE CENTER IMPROVEMENTS

This INTERGOVERNMENTAL AGREEMENT (the "AGREEMENT") is made this 23rd day of June, 2025, by and between the COUNTY OF DUPAGE, a body politic and corporate, with offices at 421 North County Farm Road, Wheaton, Illinois (hereinafter referred to as the "COUNTY") and VILLAGE OF HANOVER PARK, a body politic and corporate, with offices at 2121 W. Lake Street, Hanover Park, Illinois (hereinafter referred to as the "VILLAGE").

RECITALS

WHEREAS, the VILLAGE and the COUNTY are public agencies within the meaning of the Illinois "Intergovernmental Cooperation Act" and as authorized by Article 7, Section 10 of the Constitution of the State of Illinois; and

WHEREAS, the purposes of the "Intergovernmental Cooperation Act" and Article 7 of the Constitution of the State of Illinois include fostering cooperation among government bodies; and

WHEREAS, the Illinois General Assembly has granted the VILLAGE authority to operate, maintain and keep in repair necessary VILLAGE facilities, and to enter into agreements for those purposes pursuant to 65 ILCS 5/11-129-1 (hereinafter "PROJECT"); and

WHEREAS, the COUNTY has created the Member Initiative Program, which sets aside certain County funds for use by members within their districts; and

WHEREAS, the PROJECT will benefit local citizens by improving the existing elements of Hanover Park Village Center improving the economic development in the Village, and

WHEREAS, in order to coordinate their respective roles in the PROJECT, the COUNTY and VILLAGE have agreed to the terms and conditions set forth in this AGREEMENT; and

WHEREAS, the VILLAGE shall undertake the PROJECT and the COUNTY shall reimburse the VILLAGE for PROJECT expenses up to Thirty thousand dollars (\$30,000) in accordance with the terms and conditions of this AGREEMENT; and

NOW, THEREFORE, in consideration of the premises, the mutual covenants, terms, and conditions herein set forth, and the understandings of each party to the other, the parties do hereby mutually covenant, promise and agree as follows:

1.0 INCORPORATION AND CONSTRUCTION.

1.1 All recitals set forth above are incorporated herein and made a part thereof, the same constituting the factual basis for this AGREEMENT.

- 1.2 The headings of the paragraphs and subparagraphs of this AGREEMENT are inserted for convenience of reference only and shall not be deemed to constitute part of this AGREEMENT or to affect the construction hereof.
- 1.3 The COUNTY and VILLAGE shall be referred to herein collectively as the "Parties," or individually as a "Party."

2.0 PROJECT DESCRIPTION.

- 2.1 The PROJECT involves the installation of art elements at a property owned by the Village of Hanover Park. The Project is more fully described in the application attached as **Exhibit A** to this Agreement.
- 2.2 The PROJECT shall be undertaken essentially in accord with the plans, as prepared by the VILLAGE's Staff which have been mutually approved by the VILLAGE and the COUNTY, and which document is attached hereto and incorporated herein as Exhibit A.

3.0 FUNDING.

- 3.1 The PROJECT'S gross total expenses are estimated at one hundred thousand dollars (\$100,000)
- 3.2 It is the intention of the Parties that up to thirty thousand dollars (\$30,000) in Project costs will be reimbursed by the COUNTY. The COUNTY, by this AGREEMENT, does not assume responsibility for directly paying any PROJECT costs and shall only be responsible for reimbursing portions of the VILLAGE'S PROJECT costs.
- 3.3 Allowable PROJECT expenses may include third-party professional services (architect/engineering fees, construction management, etc.), construction (labor and materials), bidding related costs, advertising, permit fees, and other related construction costs. Notwithstanding the foregoing, allowable expenses shall not include administrative costs, overhead, payroll or accounting services.

4.0 VILLAGE'S RESPONSIBILITIES.

- 4.1 The VILLAGE shall be responsible for the preparation of the plans, specifications, and bid documents for the PROJECT, together with the advertisement and award of all PROJECT-related public bids. The VILLAGE shall select, and contract with, all vendors providing professional services for the PROJECT.
- 4.2 The VILLAGE shall be responsible for securing all local, county, state, and federal permits necessary for completion of the PROJECT.
- 4.3 The VILLAGE shall be responsible for submitting copies of all plans, specifications, bid documents, permit applications and related correspondence to

- the COUNTY in a timely manner to ensure sufficient review by the COUNTY. The purpose of the COUNTY'S review shall be for the sole purpose of verifying the PROJECT's work components have been completed.
- 4.4 The VILLAGE shall submit one final invoice to the COUNTY upon the completion of the material portion of the project. Repaving, landscaping or other seasonal work shall not be considered a material portion of this PROJECT. The COUNTY shall remit payment to the VILLAGE within 30 days of submission of invoice.
- 4.5 The VILLAGE shall make direct payments to all parties providing services related to this PROJECT. This requirement will not affect the COUNTY'S obligation to reimburse the VILLAGE.
- 4.6 The VILLAGE'S contractors and consultants shall be solely responsible for the safety of all individuals performing work on the PROJECT. The VILLAGE shall take such measures as are necessary to ensure that its contractors and consultants maintain the PROJECT areas in a safe condition and install appropriate barricades and warning signs, and strictly enforce all applicable safety law, rules and regulations. This provision is not intended to create any new burden or liability for the VILLAGE beyond the usual burdens and liabilities for a municipality or other unit of government in the construction of public improvements.
- 4.7 The VILLAGE shall provide the COUNTY unlimited, but reasonable, access to the PROJECT area to observe and review PROJECT work and work documents (i.e., plans, change orders, field orders, manager diaries, etc.) for the limited purpose of determining eligibility for reimbursement.

5.0 COUNTY'S RESPONSIBILITIES.

- 5.1 The COUNTY reserves the right to review the PROJECT'S plans, specifications and bid documents prior to the VILLAGE'S advertisement for contract services, together with any subsequent change orders, addendums, or revisions thereto.
- 5.2 The COUNTY shall not be responsible for or have control over the design, construction, means, methods, techniques or procedures with respect to any work performed for the PROJECT. This section is intended merely to relieve the COUNTY from such liabilities in this PROJECT.
- Upon receipt of the VILLAGE'S invoice, and all necessary supporting documentation, the COUNTY shall promptly reimburse the VILLAGE for approved costs associated with the PROJECT. The total reimbursement amount paid by the COUNTY to the VILLAGE shall not exceed Thirty thousand dollars (\$30,000.00). In the event PROJECT costs total less than Thirty thousand dollars (\$30,000.00), the VILLAGE's total reimbursement amount shall be one hundred percent (100%) of the actual total PROJECT costs.

6.0 GOVERNMENT REGULATIONS.

6.1 The Parties shall comply with all local, county, state and federal requirements now in force, or which may hereafter be in force, pertaining to the PROJECT. Nothing in this agreement shall be found to act as an approval of any specific works which require separate county permitting approval, such as stormwater or building permits.

7.0 INDEMNIFICATION.

- 7.1 To the extent permitted by law, each Party ("First Party") shall indemnify, hold harmless and defend the other Party ("Second Party"), and any of the Second Party's officials, officers, and employees from and against all liability, claims, suits, demands, liens, proceedings and actions, including costs, fees and expense of defense, arising from, growing out of, or related to, any loss, damage, injury, death, or loss or damage to property resulting from, or connected with, the First Party's negligent or willful acts to the fullest extent that each Party is so authorized under the law; provided, however, that the First Party shall not be obligated to indemnify, hold harmless and defend the Second Party for any negligent or intentional wrongful misconduct or omissions by the Second Party's officials, employees, agents, contractors or personnel.
- 7.2 The VILLAGE shall require each consultant and contractor responsible for the construction, maintenance, or monitoring of the PROJECT to name the VILLAGE and COUNTY, and their respective elected and appointed officials, employees, agents and volunteers as additional insureds on said consultant's and contractor's liability insurance policy. Further, the VILLAGE shall require that its consultants and contractors indemnify, defend and hold harmless the VILLAGE and COUNTY, and their respective elected and appointed officials, employees, agents and volunteers from and against any claims, liability or judgments resulting from, or caused by, the negligence or willful conduct of such consultant and, or contractor.
- 7.3 Nothing contained herein shall be construed as prohibiting the Parties, their officials, directors, officers, agents and employees, from defending through the selection and use of their own agents, attorneys and experts, any claims, suits, demands, liens, proceedings and actions brought against them. Pursuant to Illinois law, any attorney representing the COUNTY, under this paragraph or Paragraph 7.1 is to be the State's Attorney, in accord with the applicable law. The COUNTY'S participation in its defense shall not remove VILLAGE'S duty to indemnify, defend, and hold the COUNTY harmless, as set forth above. Moreover, indemnity as provided in this AGREEMENT shall not be limited by reason of any insurance coverage maintained by the Parties or their consultants, contractors or agents. The First Party's indemnification of the Second Party shall survive the termination, or expiration, of this AGREEMENT.

8.0 AMENDMENT OR MODIFICATION OF THIS AGREEMENT.

- 8.1 The Parties may modify or amend terms of this AGREEMENT only by a written document duly approved and executed by both Parties, excluding term extensions as provided for in the following provision.
- 8.2 Notwithstanding Paragraph 8.1, above, the term for performing this AGREEMENT may be extended by any suitable COUNTY designated form, signed by both parties without formal amendment to this AGREEMENT pursuant to Paragraph 8.1, above.

9.0 TERM OF THIS AGREEMENT.

- 9.1 The term of this AGREEMENT shall begin on the date the AGREEMENT is fully executed, and shall continue in full force and effect the completion by the VILLAGE and COUNTY of their respective obligations under this AGREEMENT.
- 9.2 All funds must be expended prior to November 30, 2025. Failure to submit funding requests before November 30, 2025 shall render payment of the funds under this agreement subject to re-appropriation by the DuPage County Board.

10.0 ENTIRE AGREEMENT.

- 10.1 This AGREEMENT, including matters incorporated herein, contains the entire AGREEMENT between Parties.
- 10.2 There are no other covenants, warranties, representations, promises, conditions or understandings; either oral or written, other than those contained herein.
- 10.3 This AGREEMENT may be executed in one or more counterparts, each of which shall for all purposes be deemed to be an original and all of which shall constitute the same instrument.
- 10.4 In event of a conflict between the terms or conditions of this AGREEMENT and any term or condition found in any exhibit or attachment, the terms and conditions of this AGREEMENT shall prevail.

11.0 SEVERABILITY.

11.1 In the event any provision of this AGREEMENT is held to be unenforceable or invalid for any reason, the enforceability thereof shall not affect the remainder of the AGREEMENT. The remainder of this AGREEMENT shall be construed as if not containing the particular provision and shall continue in full force, effect, and enforceability, in accordance with its terms.

12.0 GOVERNING LAW.

- 12.1 The laws of the State of Illinois shall govern this AGREEMENT as to both interpretation and performance.
- 12.2 The venue for resolving any disputes concerning the parties' respective performance, or failure to perform, under this AGREEMENT, shall be the judicial circuit court for DuPage County.

13.0 NOTICES.

13.1 Any required notice shall be sent to the following addresses and parties:

ON BEHALF OF THE VILLAGE:

Juliana Maller Village Manager 2121 Lake Street Hanover Park, IL 60133

ON BEHALF OF THE COUNTY:

Jeremy Custer Senior Advisor 421 N. County Farm Road Wheaton, IL 60187

14.0 WAIVER OF/FAILURE TO ENFORCE BREACH.

14.1 The Parties agree that the waiver of, or failure to enforce, any breach of this AGREEMENT by the remaining party shall not be construed, or otherwise operate, as a waiver of any future breach of this AGREEMENT. Further the failure to enforce any particular breach shall not bar or prevent the remaining Party from enforcing this AGREEMENT with respect to a different breach.

15.0 NO THIRD-PARTY BENEFICIARY.

15.1 This Agreement is entered into solely for the benefit of the Parties, and nothing in this Agreement is intended, either expressly or impliedly, to provide any right or benefit of any kind whatsoever to any person and/or entity who is not a party to this Agreement or to acknowledge, establish or impose any legal duty to any third party.

16.0 NO WAIVER OF TORT IMMUNITY.

16.1 Nothing contained in any provision of this Agreement is intended to constitute nor shall constitute a waiver of the defenses and immunities available to the Parties under the Illinois Local Governmental and Governmental Employees Tort Immunity Act. IN WITNESS OF, the Parties set their hands and seals as of the date first written above.

COUNTY OF DUPAGE	VILLAGE OF HANOVER PARK		
Deborah Conroy Chair, DuPage County Board	Rodney Crarg/ Village President		
ATTEST:	ATTEST:		
Jean Kaczmarek DuPage County Clerk	Village Clerk, Hanover Park		



MEMBER INITIATIVE PROGRAM APPLICATION - Please complete all sections for submission

SECTION I Organization Information

SECTION TO Gamzation I		
Organization	Village of Hanover Park	
Contact Person	Courtney Sage - Deputy Village Manager	
Address	2121 W. Lake Street	
City	Hanover Park	
Phone Number	630.823.5611	
Email	csage@hpil.org	

SECTION II Project Description

Project Title	Downtown Village Center Phase 2 Improvements - Art
Cost of the Project	The Village is requesting up to \$30,000 for the installation of art elements listed in the description.
Brief Description of the Scope of Initiative	To further attract visitors to the downtown, the Village plans to include interactive art/furnishings at numerous locations throughout the area as part of Phase 2 of developing a Village Center. The attached map provides examples of where this art could be located. The attachment also contains examples of different elements the Phase 2 improvements may include, such as the decorative panels, interactive seating wall, fire pit, and the sculpture-like swings. Each of these pieces falls within the \$10,000 - \$30,000 range. These pieces will not simply occupy space; they will act as a landmark, sparking dialogue and inviting residents and visitors alike to connect with their community and its shared story.
Desired Outcomes	The Village of Hanover Park is pursuing strategic funding to develop a Downtown Village Center in the Ontarioville area. Hanover Park is one of the few municipalities without a defined downtown or Village Center. Having a central gathering space, not only fosters a sense of community and belonging, but it also can significantly influence the economic trajectory of a community. The Village's need for a thriving downtown is further necessitated by the Illinois Tollway's approval of their 7-year capital plan. As part of this plan, the Illinois Tollway committed to the construction of the I-300 ramp extension to County Farm Rd in Hanover Park, which is directly south of the Village's future downtown. This project is scheduled to begin in 2028 and may result in increased vehicular travel through not only Hanover Park, but the surrounding north suburban area. It is imperative for the Village of Hanover Park to capitalize on this economic opportunity to further develop a downtown area and provide a location for these visitors to shop and experience what the Village has to offer. Phase 2 improvements include a new plaza with features designed to attract residents and visitors to the area. The interactive and accessible elements are designed to engage residents of all ages, such as a fire pit, and an outdoor shelter to provide shelter and serve as vendor space for Village-sponsored events. Ultimately, the plaza creates a central gathering space that fosters a sense of community and belonging, serving as a focal point for social interaction, cultural events, and community activities. Each year, the Village hosts a number of events including the annual Juneteenth Celebration, Holiday Tree Lighting event, and a summer festival. It is the Village's intent to continue hosting these events within the enhanced downtown area.

SECTION III Signature

Member Name	Greg Schwarze \$28,000, Jim Zay \$2,000
District	6
Signature	

SECTION IV Supplemental Documents

Please attach the following (if applicable)

- Letters of Engagement from all involved organizations
- Vendor Ethics Disclosures
- Bid Documents
- Proof of Good Standing with IL Secretary of State for all partner organizations
- Tax Documents (such as W-9 forms, where applicable)



Village of Hanover Park Administration

Municipal Building

2121 West Lake Street, Hanover Park, IL 60133 630-823-5600 tel 630-823-5786 fax

hpil.org

Village President Rodney S. Craig

> Village Clerk Kristy Merrill

Trustees Troy Albuck Yasmeen Bankole Liza Gutierrez Jon Kunkel Herb Porter Bob Prigge

Village Manager Juliana A. Maller

April 1, 2025

DuPage County Board District 6 421 N. County Farm Road Wheaton, IL 60187

Dear Esteemed District 6 County Board Members,

The Village of Hanover Park is pursuing strategic funding to develop a Downtown Village Center in the Ontarioville area. Hanover Park is one of the few municipalities without a defined downtown or Village Center. Having a central gathering space not only fosters a sense of community and belonging, but it also can significantly influence the economic trajectory of a community.

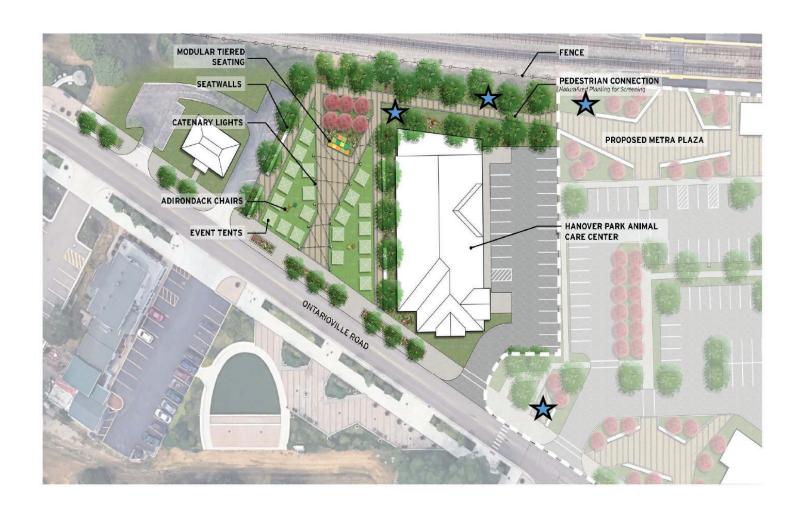
The Village's need for a thriving downtown is further necessitated by the Illinois Tollway's approval of their 7-year capital plan. As part of this plan, the Illinois Tollway committed to the construction of the I-390 ramp extension to County Farm Rd in Hanover Park, which is directly south of the Village's future downtown. This project is scheduled to begin in 2026 and may result in increased vehicular travel through not only Hanover Park, but the surrounding north suburban area. It is imperative for the Village of Hanover Park to capitalize on this economic opportunity to further develop a downtown area and provide a location for these visitors to shop and experience what the Village has to offer.

The Village is currently in the design process for Phase 2 of this downtown development. Phase 2 improvements include a new plaza with features designed to attract residents and visitors to the area. The interactive and accessible elements are designed to engage residents of all ages, such as a fire pit, and an outdoor shelter to provide shelter and serve as vendor space for Village-sponsored events. Ultimately, the plaza creates a central gathering space that fosters a sense of community and belonging, serving as a focal point for social interaction, cultural events, and community activities. Each year, the Village hosts a number of events including the annual Juneteenth Celebration, Holiday Tree Lighting event, and a summer festival. It is the Village's intent to continue hosting these events within the enhanced downtown area.

To further attract visitors to this area, the Village plans to include interactive art/furnishings at numerous locations throughout the plaza and downtown. The attached map provides examples of where this art could be located. The attachment also contains examples of different elements the Phase 2 improvements may include, such as the decorative panels, interactive seating wall, fire pit, and the sculpture-like swings. Each of these pieces falls within the \$10,000 - \$30,000 range. These pieces will not simply occupy space; they will act as a landmark, sparking dialogue and inviting residents and visitors alike to connect with their community and its shared story.

Sincerely,

Rodney S. Craig Village President



ONTARIOVILLE PHASE TWO

OPEN SPACE EXPANSION - CONCEPT A HANOVERPARK, IL

















ONTARIOVILLE PHASE TWO

OPEN SPACE EXPANSION SITE ELEMENTS IMAGERY

HANOVER PARK, ILLINOIS

MARCH 20, 2025







OPEN SPACE EXPANSION | SITE ELEMENTS IMAGERY
HANOVERPARK, ILLINOIS

476

THE LAKOTA GROUP.

DRAFT

MARCH 20, 2025



QUOTATION

DATE: 4/14/2025 **LAYOUT #:** PLF2200-108847

PROJECT NAME: Ontarioville Open Space Expansion LOCATION: Illinois, U.S.A

CUSTOMER NAME: Lexi Paus E-MAIL: apaus@thelakotagroup.com

MODEL	DESCRIPTION	QUANTITY	PRICE/UNIT	SUBTOTAL
MPF-2200-00007	PIXEL PANEL, SHORT, INTERIOR	2	\$ 100.00	\$ 200.00
MPF-2200-00003	PIXEL PANEL, TALL, INTERIOR	14	\$ 165.00	\$ 2310.00
MPF-2200-00005	PIXEL PANEL, SHORT, EXTERIOR	6	\$ 95.00	\$ 570.00
MPF-2200-00001	PIXEL PANEL, TALL, EXTERIOR	14	\$ 150.00	\$ 2100.00
MPF-2200-00033	PIXEL FOOT, LEVELLING ASSY	24	\$ 45.00	\$ 1080.00
MPF-2200-00028	PIXEL TOP, TM ASH WOOD, STYLE 2, REC PROFILE	6	\$ 585.00	\$ 3510.00
MAC-9999-00093	PIXEL SITE ASSEMBLY HARDWARE	1	\$ 0.00	\$ 0.00

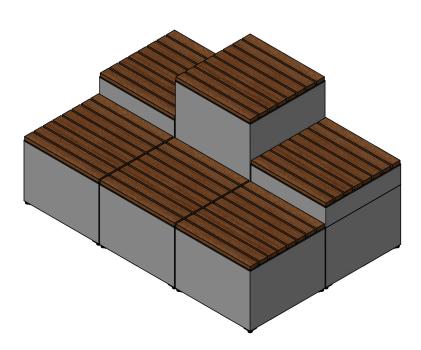
Sub Total \$ 9,770.00

\$ 9,770.00

1) Please contact MAGLIN for shipping cost * Shipping and taxes are not included

Quoted prices valid for 60 days from quote date. This is an estimate only, please contact your Maglin Representative for a formal quote.

	T ITTEL	OTV	DECORPTION	LAODELVIII ADED
1,000,00,000	IIEM	QIY	DESCRIPTION	MODELNUMBER
APPROVED BY:	1	2	PIXEL PANEL, SHORT, INTERIOR	MPF-2200-00007
DATE:	2	14	PIXEL PANEL, TALL, INTERIOR	MPF-2200-00003
	3	6	PIXEL PANEL, SHORT, EXTERIOR	MPF-2200-00005
Note: it is the responsibility of the signee to ensure	4	14	PIXEL PANEL, TALL, EXTERIOR	MPF-2200-00001
	5	24	PIXEL FOOT, LEVELLING ASSY	MPF-2200-00033
that the site dimensions match to product being supplied.	6	6	PIXEL TOP, TM ASH WOOD, STYLE 2, REC PROFILE	MPF-2200-00028
Maglin will manufacture to these approved dimensions	7	1	PIXEL SITE ASSEMBLY HARDWARE	MAC-9999-00093

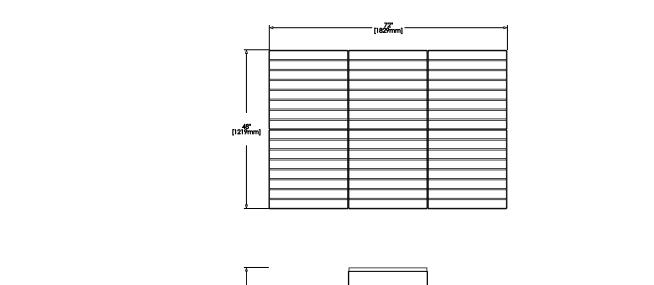


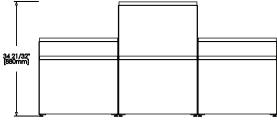
* PLEASE NOTE COLORS IN THIS DRAWING DO NOT REFLECT YOUR ORDER

MAGLIN	
MAGLIN SITE FURNITURE WWW.MAGLIN.COM TEL.: 800-716-5506 FAX: 877-260-9393	

THE INFORMATION CONTAINED IN THIS DRAWING IS THE SOLE PROPERTY OF MAGLIN SITE FURNITURE ANY REPRODUCTION IN PART OR AS A WHOLE WITHOUT THE WRITTEN PERMISSION OF MAGLIN SITE FURNITURE IS PROHIBITED.

TITLE: PIXEL LAYOUT, PLF2200-108847	
MODEL NO: PLF2200-108847	DATE: 4/14/2025
WEIGHT: 602.42LBS	SHEET: 1 OF 2





* PLEASE NOTE DIMENSIONS ARE BASED ON A FOOTPRINT OF THE LAYOUT

MAGLIN MAGLIN MAGLIN SITE FURNITURE WWW.MAGLIN.COM TEL: 800-716-5506 FAX: 877-260-9393

THE INFORMATION CONTAINED IN THIS DRAWING IS THE SOLE PROPERTY OF MAGLIN SITE FURNITURE ANY REPRODUCTION IN PART OR AS A WHOLE WITHOUT THE WRITTEN PERMISSION OF MAGLIN SITE FURNITURE IS PROHIBITED.

ITITE: PIXEL LAYOUT, PLF2200-108847	
MODEL NO:	DATE:
PLF2200-108847	4/14/2025
WEIGHT:	SHEET:
602.42LBS	2 OF 2

INTERGOVERNMENTAL AGREEMENT BETWEEN COUNTY OF DUPAGE, ILLINOIS AND THE WHEATON PARK DISTRICT FOR DuPAGE COUNTY HISTORICAL MUSEUM RENOVATION PROJECT

This INTERGOVERNMENTAL AGREEMENT (the "AGREEMENT") is made this <u>18</u> day of June, 2025, by and between the COUNTY OF DUPAGE, a body politic and corporate, with offices at 421 North County Farm Road, Wheaton, Illinois (hereinafter referred to as the "COUNTY") and WHEATON PARK DISTRICT, a body politic and corporate, with offices at 102 E. Wesley St. Wheaton, IL 60187 (hereinafter referred to as the "DISTRICT").

RECITALS

WHEREAS, the DISTRICT and the COUNTY are public agencies within the meaning of the Illinois "Intergovernmental Cooperation Act" and as authorized by Article 7, Section 10 of the Constitution of the State of Illinois; and

WHEREAS, the purposes of the "Intergovernmental Cooperation Act" and Article 7 of the Constitution of the State of Illinois include fostering cooperation among government bodies; and

WHEREAS, the Illinois General Assembly has granted the DISTRICT authority to operate, maintain and keep in repair necessary DISTRICT facilities, and to enter into agreements for those purposes pursuant to 70 ILCS 1205/8-10 (hereinafter "PROJECT"); and

WHEREAS, the COUNTY has created the Member Initiative Program, which sets aside certain County funds for use by members within their districts; and

WHEREAS, the PROJECT will benefit local citizens by improving the existing facilities operated by the Wheaton Park District; and

WHEREAS, in order to coordinate their respective roles in the PROJECT, the COUNTY and DISTRICT have agreed to the terms and conditions set forth in this AGREEMENT; and

WHEREAS, the DISTRICT shall undertake the PROJECT and the COUNTY shall reimburse the DISTRICT for PROJECT expenses up to fifty thousand five hundred and forty-four dollars (\$50,544.00) in accordance with the terms and conditions of this AGREEMENT; and

NOW, THEREFORE, in consideration of the premises, the mutual covenants, terms, and conditions herein set forth, and the understandings of each party to the other, the parties do hereby mutually covenant, promise and agree as follows:

1.0 INCORPORATION AND CONSTRUCTION.

1.1 All recitals set forth above are incorporated herein and made a part thereof, the same constituting the factual basis for this AGREEMENT.

- 1.2 The headings of the paragraphs and subparagraphs of this AGREEMENT are inserted for convenience of reference only and shall not be deemed to constitute part of this AGREEMENT or to affect the construction hereof.
- 1.3 The COUNTY and DISTRICT shall be referred to herein collectively as the "Parties," or individually as a "Party."

2.0 PROJECT DESCRIPTION.

2.1 The PROJECT involves the purchase and installation of certain improvements to the carpet and windows at the DuPage County Historical Museum operated by the Wheaton Park District. The Project is more fully described in the application attached as **Exhibit A** to this Agreement.

3.0 FUNDING.

- 3.1 The PROJECT'S gross total expenses are estimated at fifty-one thousand dollars (\$51,000).
- 3.2 It is the intention of the Parties that up to fifty thousand five hundred and forty-four dollars (\$50,544.00) in Project costs will be reimbursed by the COUNTY. The COUNTY, by this AGREEMENT, does not assume responsibility for directly paying any PROJECT costs and shall only be responsible for reimbursing portions of the DISTRICT'S PROJECT costs.
- 3.3 Allowable PROJECT expenses may include third-party professional services (architect/engineering fees, construction management, etc.), construction (labor and materials), bidding related costs, advertising, permit fees, and other related construction costs. Notwithstanding the foregoing, allowable expenses shall not include administrative costs, overhead, payroll or accounting services.

4.0 DISTRICT'S RESPONSIBILITIES.

- 4.1 The DISTRICT shall be responsible for the preparation of the plans, specifications, and bid documents for the PROJECT, together with the advertisement and award of all PROJECT-related public bids. The DISTRICT shall select, and contract with, all vendors providing professional services for the PROJECT.
- 4.2 The DISTRICT shall be responsible for securing all local, county, state, and federal permits necessary for completion of the PROJECT.
- 4.3 The DISTRICT shall be responsible for submitting copies of all plans, specifications, bid documents, permit applications and related correspondence to the COUNTY in a timely manner to ensure sufficient review by the COUNTY. The

- purpose of the COUNTY'S review shall be for the sole purpose of verifying the PROJECT's work components have been completed.
- 4.4 The DISTRICT shall submit one final invoice to the COUNTY upon the completion of the material portion of the project. Repaving, landscaping or other seasonal work shall not be considered a material portion of this PROJECT. The COUNTY shall remit payment to the DISTRICT within 30 days of submission of invoice.
- 4.5 The DISTRICT shall make direct payments to all parties providing services related to this PROJECT. This requirement will not affect the COUNTY'S obligation to reimburse the DISTRICT.
- 4.6 The DISTRICT'S contractors and consultants shall be solely responsible for the safety of all individuals performing work on the PROJECT. The DISTRICT shall take such measures as are necessary to ensure that its contractors and consultants maintain the PROJECT areas in a safe condition and install appropriate barricades and warning signs, and strictly enforce all applicable safety law, rules and regulations. This provision is not intended to create any new burden or liability for the DISTRICT beyond the usual burdens and liabilities for a municipality or other unit of government in the construction of public improvements.
- 4.7 The DISTRICT shall provide the COUNTY unlimited, but reasonable, access to the PROJECT area to observe and review PROJECT work and work documents (i.e., plans, change orders, field orders, manager diaries, etc.) for the limited purpose of determining eligibility for reimbursement.

5.0 COUNTY'S RESPONSIBILITIES.

- 5.1 The COUNTY reserves the right to review the PROJECT'S plans, specifications and bid documents prior to the DISTRICT'S advertisement for contract services, together with any subsequent change orders, addendums, or revisions thereto.
- 5.2 The COUNTY shall not be responsible for or have control over the design, construction, means, methods, techniques or procedures with respect to any work performed for the PROJECT. This section is intended merely to relieve the COUNTY from such liabilities in this PROJECT.
- 5.3 Upon receipt of the DISTRICT'S invoice, and all necessary supporting documentation, the COUNTY shall promptly reimburse the DISTRICT for approved costs associated with the PROJECT. The total reimbursement amount paid by the COUNTY to the DISTRICT shall not exceed fifty thousand five hundred and forty-four dollars (\$50,544.00) In the event PROJECT costs total less than fifty thousand five hundred and forty-four dollars (\$50,544.00) the DISTRICT's total reimbursement amount shall be one hundred percent (100%) of the actual total PROJECT costs.

6.0 GOVERNMENT REGULATIONS.

6.1 The Parties shall comply with all local, county, state and federal requirements now in force, or which may hereafter be in force, pertaining to the PROJECT. Nothing in this agreement shall be found to act as an approval of any specific works which require separate county permitting approval, such as stormwater or building permits.

7.0 INDEMNIFICATION.

- 7.1 To the extent permitted by law, each Party ("First Party") shall indemnify, hold harmless and defend the other Party ("Second Party"), and any of the Second Party's officials, officers, and employees from and against all liability, claims, suits, demands, liens, proceedings and actions, including costs, fees and expense of defense, arising from, growing out of, or related to, any loss, damage, injury, death, or loss or damage to property resulting from, or connected with, the First Party's negligent or willful acts to the fullest extent that each Party is so authorized under the law; provided, however, that the First Party shall not be obligated to indemnify, hold harmless and defend the Second Party for any negligent or intentional wrongful misconduct or omissions by the Second Party's officials, employees, agents, contractors or personnel.
- 7.2 The DISTRICT shall require each consultant and contractor responsible for the construction, maintenance, or monitoring of the PROJECT to name the DISTRICT and COUNTY, and their respective elected and appointed officials, employees, agents and volunteers as additional insureds on said consultant's and contractor's liability insurance policy. Further, the DISTRICT shall require that its consultants and contractors indemnify, defend and hold harmless the DISTRICT and COUNTY, and their respective elected and appointed officials, employees, agents and volunteers from and against any claims, liability or judgments resulting from, or caused by, the negligence or willful conduct of such consultant and, or contractor.
- 7.3 Nothing contained herein shall be construed as prohibiting the Parties, their officials, directors, officers, agents and employees, from defending through the selection and use of their own agents, attorneys and experts, any claims, suits, demands, liens, proceedings and actions brought against them. Pursuant to Illinois law, any attorney representing the COUNTY, under this paragraph or Paragraph 7.1 is to be the State's Attorney, in accord with the applicable law. The COUNTY'S participation in its defense shall not remove DISTRICT'S duty to indemnify, defend, and hold the COUNTY harmless, as set forth above. Moreover, indemnity as provided in this AGREEMENT shall not be limited by reason of any insurance coverage maintained by the Parties or their consultants, contractors or agents. The First Party's indemnification of the Second Party shall survive the termination, or expiration, of this AGREEMENT.

8.0 AMENDMENT OR MODIFICATION OF THIS AGREEMENT.

- 8.1 The Parties may modify or amend terms of this AGREEMENT only by a written document duly approved and executed by both Parties, excluding term extensions as provided for in the following provision.
- 8.2 Notwithstanding Paragraph 8.1, above, the term for performing this AGREEMENT may be extended by any suitable COUNTY designated form, signed by both parties without formal amendment to this AGREEMENT pursuant to Paragraph 8.1, above.

9.0 TERM OF THIS AGREEMENT.

- 9.1 The term of this AGREEMENT shall begin on the date the AGREEMENT is fully executed and shall continue in full force and effect the completion by the DISTRICT and COUNTY of their respective obligations under this AGREEMENT.
- 9.2 All funds must be expended prior to November 30, 2025. Failure to submit funding requests before November 30, 2025 shall render payment of the funds under this agreement subject to re-appropriation by the DuPage County Board.

10.0 ENTIRE AGREEMENT.

- 10.1 This AGREEMENT, including matters incorporated herein, contains the entire AGREEMENT between Parties.
- 10.2 There are no other covenants, warranties, representations, promises, conditions or understandings; either oral or written, other than those contained herein.
- 10.3 This AGREEMENT may be executed in one or more counterparts, each of which shall for all purposes be deemed to be an original and all of which shall constitute the same instrument.
- 10.4 In event of a conflict between the terms or conditions or this AGREEMENT and any term or condition found in any exhibit or attachment, the terms and conditions of this AGREEMENT shall prevail.

11.0 SEVERABILITY.

In the event any provision of this AGREEMENT is held to be unenforceable or invalid for any reason, the enforceability thereof shall not affect the remainder of the AGREEMENT. The remainder of this AGREEMENT shall be construed as if not containing the particular provision and shall continue in full force, effect, and enforceability, in accordance with its terms.

12.0 GOVERNING LAW.

- 12.1 The laws of the State of Illinois shall govern this AGREEMENT as to both interpretation and performance.
- 12.2 The venue for resolving any disputes concerning the parties' respective performance, or failure to perform, under this AGREEMENT, shall be the judicial circuit court for DuPage County.

13.0 NOTICES.

13.1 Any required notice shall be sent to the following addresses and parties:

ON BEHALF OF THE DISTRICT:

Mike Bernard 102 E. Wesley Wheaton, IL 60187

ON BEHALF OF THE COUNTY:

Jeremy Custer 421 N. County Farm Road Wheaton, IL 60187

14.0 WAIVER OF/FAILURE TO ENFORCE BREACH.

14.1 The Parties agree that the waiver of, or failure to enforce, any breach of this AGREEMENT by the remaining party shall not be construed, or otherwise operate, as a waiver of any future breach of this AGREEMENT. Further the failure to enforce any particular breach shall not bar or prevent the remaining Party from enforcing this AGREEMENT with respect to a different breach.

15.0 NO THIRD-PARTY BENEFICIARY.

15.1 This Agreement is entered into solely for the benefit of the Parties, and nothing in this Agreement is intended, either expressly or impliedly, to provide any right or benefit of any kind whatsoever to any person and/or entity who is not a party to this Agreement or to acknowledge, establish or impose any legal duty to any third party.

16.0 NO WAIVER OF TORT IMMUNITY.

16.1 Nothing contained in any provision of this Agreement is intended to constitute nor shall constitute a waiver of the defenses and immunities available to the Parties under the Illinois Local Governmental and Governmental Employees Tort Immunity Act. IN WITNESS OF, the Parties set their hands and seals as of the date first written above.

COUNTY OF DUPAGE	WHEATON PARK DISTRICT		
Deborah Conroy	John/Vires,		
Chairman	District President		
ATTEST:	ATTEST.		
Jean Kaczmarek,	Michael J. Benard		
County Clerk	District Secretary		



MEMBER INITIATIVE PROGRAM APPLICATION - Please complete all sections for submission

SECTION I Organization Information

The state of the s	
DuPage Historical Museum	
Michelle Podkowa	
102 E. Wesley Streer	
Wheaton	
630-510-4956	
mpodkowa@wheatonparks.org	

SECTION II Project Description

SECTION II Project Descr	iption
Project Title	Carpet and Window Frame Painting
Cost of the Project	\$50,544.00
Brief Description of the Scope of Initiative	Replace the carpeting on the second floor stairs and paint the 80 window frames on the exterior of the museum. I
Desired Outcomes	See request attached.

SECTION III Signature

Member Name	Dawn DeSart, Saba Haider, Sadia Covert
District	District 5
Signature	Dawn DeSart

SECTION IV Supplemental Documents

Please attach the following (if applicable)

- Letters of Engagement from all involved organizations
- Vendor Ethics Disclosures
- Bid Documents
- Proof of Good Standing with IL Secretary of State for all partner organizations
- Tax Documents (such as W-9 forms, where applicable)



Dear Member DeSart and Member Covert,

The DuPage County Historical Museum Foundation respectfully requests the DuPage County Board's consideration to allocate a portion of their Member Initiative Funds to support building needs for future use of the Museum building for County residents.

The Museum is a community gem nestled in downtown Wheaton with a mission to educate the general public through the collection, preservation, interpretation and exhibition of materials which document the history of DuPage County and its relationship to Illinois and the nation. The Museum building and artifact collection is owned by the County of DuPage and the Museum is operated by the Wheaton Park District through a joint Intergovernmental Agreement.

The Museum's building was built in 1891 and was added to the National Register of Historic Places in 1981. As the building continues to age, it increasingly needs updates and maintenance to keep it operating safely and efficiently and to maximize its value to the community. The Museum team is dedicated to preserving its finest piece of history and its largest artifact – the building itself.

We are requesting that you consider supporting the Museum's current and future endeavors, project details listed on the following pages, by allocating a portion of your district's Membership Initiative Funds to the DuPage County Historical Museum Foundation.

By investing in the Museum, not only will you invest in County property and history, but you will directly impact over 10,000 people annually that visit and attend Museum events. This upgrade and building project will further restore and enhance the Museum's architecture for future generations by protecting the window frames to prevent further leaking and provide a safe carpeted area for events. We invite you to review the following pages that detail these projects and upgrades.

If you would like to support the Museum or have any questions, please contact Michelle Podkowa at mpodkowa@wheatonparks.org or 630.510.4956. Thank you for your time and consideration.

Sincerely,

Michael Benard

Executive Director, Wheaton Park District Secretary, DCHM Foundation mbenard@wheatonparks.org | 630.510.4945

Michelle Podkowa

Museum Manager and Educator DuPage County Historical Museum mpodkowa@wheatonparks.org | 630.510.4956



DUPAGE COUNTY HISTORICAL MUSEUM BUILDING AND MUSEUM NEEDS



Ripped and fraying carpet at the seem in second floor

Replacement Carpet for Second Floor and stairs

Project description: The carpet on the second floor is 20-40 years old. In addition to showing age-related wear, it has started to come up in some places, creating trip hazards. A new, high-quality carpet would be chosen to highlight the beauty of the building.

Impact: The current carpet is not safe for visitors due to trip hazards. By replacing the carpeting, we can provide a safer visitor experience and help protect the Museum's artifacts from contamination by degrading, aged carpet. A new carpet would make the space more

attractive to renters, which will result in increased revenue for the Museum.

Estimated cost: \$12,000



Peeling window frame. Frames up on the west side are worse.

Urgent Need for Window Frame Painting

Project Description: The approximately 80 window frames on the exterior need to be scrapped and painted to protect the historic wooden frames. With proper protection of the wood underneath, the windows life would be extended.

Impact: Besides preserving the historic integrity of the building, protecting the window frames from rotting will help prevent leaks and future damage to the building.

Estimated Cost: \$36,600

SUMMARY OF UPGRADES AND BUILDING NEEDS

Replacement Carpet for Second Floor and Stairs	\$12,000
Urgent Need for Window Frame Painting	\$36,600

 Total
 \$48,600

 4% contingency
 \$1,944

 Final total
 \$50,544

A GRANT AGREEMENT BETWEEN THE COUNTY OF DUPAGE AND OUTREACH MINISTRIES

WHEREAS, the County of DuPage ("County") is a body corporate and politic; and

WHEREAS, OUTREACH MINISTRIES ("Agency") is a 501(c)(3) organization created under the Internal Revenue Code, and

WHEREAS, the County has established the Member Initiative Program which permits members of the County Board to advance items which benefit their district and assigns certain amounts of public funds for those purposes; and

WHEREAS, the County's funding for each Agency is not a donation and must be used to perform certain services or functions within the County's statutory authority to perform; and

WHEREAS, the County and the Agency are hereafter sometimes referred to as the "Party" and collectively referred to herein as "the Parties"; and

WHEREAS, the Parties have prepared this Agreement to govern the distribution of the grant funds identified above.

NOW, THEREFORE, in consideration of the mutual covenants and agreements contained herein, the Parties hereby agree as follows:

- 1. **Purpose of the Agreement**. The Purpose of this Agreement is to define the project for which grant funds are to be used and provide funding for eligible expenses.
- 2. Recitals. The recitals to this Agreement are incorporated as though set forth fully herein.
- 3. **Term.** This Agreement shall remain in effect through November 30, 2025. Sections 5, 6, 7, 8, 9, 10, 11, and 12 of this Agreement shall remain in effect indefinitely and shall survive the termination of this Agreement. Funds shall be expended prior to November 30, 2025.
- 4. **Project Description.** Agency shall receive thirty thousand dollars (\$30,000.00) from the County. Agency shall undertake the following project or activities described in the Proposal attached hereto as Exhibit A.
- 5. **Termination, Breach**. This Agreement may be terminated upon thirty (30) days' notice to the other Party with the written consent of the other Party. All terms of this Agreement shall be considered material terms and therefore all breaches shall be deemed material breaches. In the event of a breach of this Agreement by any Party, the non-breaching Party shall provide the breaching Party with written notice of the breach and shall provide a period of not less than thirty (30) days to cure said breach.
- 6. Venue, Applicable Law. The exclusive venue for disputes arising from this Agreement shall be the 18th Judicial Circuit Court, sitting in Wheaton, Illinois. This Agreement shall be governed by the laws of the State of Illinois.
- 7. Payment. The County agrees to pay the Agency thirty thousand dollars (\$30,000.00). Payment is contingent upon: (1) compliance with County rules and regulations; (2) Accounts Payable review by Finance Staff and County Audit Staff including providing

sufficient invoicing and proof of purchase; and (3) completion of a fully executed Agreement. Payments shall be made in the form of reimbursement and upon invoice from Agency. Payments for eligible expenses authorized under this Agreement shall be made within thirty (30) days of receipt of completed invoices and proof of purchase. All funds shall be expended not later than November 30, 2025.

- Assignment. Neither Party shall assign performance under this Agreement, nor shall either Party transfer any right or obligation under this Agreement without the express written approval of the County.
- 9. Amendment. Any amendment to the terms of this Agreement must be in writing and will not by effective until it has been executed and approved by the same Parties who approved and executed the original Agreement or their successors in office.
- 10. Waiver. If the County fails to enforce any provision of this Agreement, that failure does not waive said provision or the County's right to enforce it.
- 11. **Sole Agreement.** This Agreement contains all negotiations between the County and Agency. No other understanding regarding this grant Agreement, whether written or oral, may be used to bind either Party.
- 12. **Liability**. The Agency agrees to indemnify, save, and hold the County, its officers, agents and employees, harmless from any claims or causes of action, including attorney's fees incurred by the County, arising from the performance of this Agreement by the Agency, its officers, agents or employees. This clause will not be construed to bar any legal remedies the Agency may have for the County's failure to fulfill any of the County's obligations under this Agreement. Notwithstanding any provisions of this Agreement to the contrary, indemnification under Section 12 of this Agreement shall be limited to the Agency's allocation, less any amount unspent.

COUNTY OF DUPAGE	OUTREACH MINISTRIES,
Deborah Conroy	Vanessa Roth,
Chair, DuPage County	Chief Operating Officer
ATTEST:	
Jean Kaczmarek,	
County Clerk	



MEMBER INITIATIVE PROGRAM APPLICATION - Please complete all sections for submission

SECTION I Organization Information

Outreach Community Ministries	
Vanessa Roth	
373 S. Schmale Road, Suite 102	
Carol Stream, IL	
(630) 682-1910	
vroth@weareoutreach.org	
	Vanessa Roth 373 S. Schmale Road, Suite 102 Carol Stream, IL (630) 682-1910

SECTION II Project Description

Project Title	Sustain Case Management & Counseling services in the vulnerable neighborhood of southeast Carol Stream
Cost of the Project	\$2,084,444 (County granting \$30,000)
Brief Description of the Scope of Initiative	Outreach respectfully requests operational support of our Neighborhood Resource Center located in lhe low income neighborhood of southeast Carol Stream and respond to basic needs of families and individuals. This project will provide operational support for two core service areas: Case Management and Counseling. Case Management connects people with pressing needs to resources and assists with a bridge through a crisis with financial assistance and budgeting with the goal of future stabilization. Counseling services walk alongside people as they address a wide range of emotional and relational needs.
Desired Outcomes	Through Outreach Carol Stream's Case Management services, families who struggle to meet basic needs or face unexpected financial crises will advance towards financial stability; maintain their housing, utilities, and employment; and meet other basic needs. In FY2024, of the 345 households seeking financial assistance, 282 households (82%) were able to receive assistance and therefore maintain their housing or utilities. Through Outreach's Counseling Services, individuals, couples, and families with untreated mental health concerns will access affordable services, improve their mental health, and strengthen their relationships.

SECTION III Signature

Member Name	Greg Schwarze
District	District 6
Signature	



SECTION IV Supplemental Documents

Please attach the following (if applicable)

- Letters of Engagement from all involved organizations
- Vendor Ethics Disclosures
- Bid Documents
- Proof of Good Standing with IL Secretary of State for all partner organizations
- Tax Documents (such as W-9 forms, where applicable)



Assistant State's Attorney DuPage County State Attorney's Office Civil Bureau 505 N. County Farm Road Wheaton, Illinois 60187-0707

To Whom It May Concern:

The funds from DuPage County's Member Initiative Fund will be utilized by Outreach Community Ministries for personnel costs only.

Respectfully,



Vanessa Roth Chief Operating Officer

OUTREACH

373 S. Schmale | Carol Stream | IL | 60188 vroth@weareoutreach.org | 630.682.1910 www.weareoutreach.org



PROPOSAL TO SUSTAIN CASE MANAGEMENT AND MENTAL HEATLTH SERVICES IN VULNERABLE COMMUNITIES IN DUPAGE COUNTY APRIL 2025 DUPAGE COUNTY MEMBER INITIATIVE FUNDS

Introduction

Outreach Community Ministries (Outreach) respectfully requests a grant of \$30,000 for operational support of Outreach's Neighborhood Resource Center throughout DuPage County. Outreach's programs and services respond to the physical, social-emotional, and other basic needs of individuals and families from the surrounding low-income neighborhoods in DuPage County. This request will provide sustained operational funds in FY2025 for two core areas: Case Management, and Mental Health Counseling Services.

Case Management Services connect individuals and families with pressing basic needs to resources. In addition, case management services assist families and individuals to bridge financial crises through access to budget analysis and financial assistance. Case Management coordinates the plan for services for all basic needs to assist the family or individual toward future stabilization. Mental Health Counseling Services work with and walk alongside individuals, couples, and families as they address a wide range of mental health and relationship concerns.

Organizational Capacity

Established in 1973, Outreach is dedicated to offering a full range of human services and educational activities to individuals and families with modest incomes and limited access to services who struggle to meet basic needs in DuPage County. We serve people of all races, ethnicities, religions/creeds, gender, and orientation, and we serve everyone regardless of their ability to pay. Outreach's mission is to restore hope and provide opportunities for people to reach their fullest potential. Outreach received 501 (c)(3) status in 1978. In FY2024, Outreach served 2,859 individuals (unduplicated).

Since its inception, Outreach's programs have grown in response to unmet or under-met needs, consistently delivering effective programs with comprehensive, holistic solutions. Outreach began as Wheaton Youth Outreach in 1973 in response to the counseling and social service needs of troubled youth and families. Over the next four decades, Outreach launched three more neighborhood resource centers and took over one existing center at the request of the DuPage County Board's Human Services Committee, all embedded within under resourced communities: Outreach Warrenville in 1985; Outreach Carol Stream in 1986; Puente del Pueblo in West Chicago in 2008 in partnership with Wheaton Bible Church; and Outreach York in 2014 that serves Villa Park. Outreach launched its Group Foster Care Home, Hawthorne House, in 1984, Jubilee Village Transitional Housing in 2005; and Outreach Employment Center in 2014. Outreach Counseling Centers in Wheaton, Carol Stream, Warrenville, and Lombard are all state-certified Behavioral Health Clinics that accept Medicaid. In addition, Outreach operates three social enterprises, reselling donated items to generate program-sustaining revenue.

Lombard are all state-certified Behavioral Health Clinics that accept Medicaid. In addition, Outreach operates three social enterprises, reselling donated items to generate program-sustaining revenue.

Outreach serves in five of the lowest income, ethnically diverse neighborhoods in DuPage County, building up a comprehensive array of programs as resources allow. Outreach strategically positions its service sites within neighborhoods where the need is the greatest to make it easier for families to access services. We also employ a diverse staff, many of whom are bilingual, to overcome language and cultural barriers. Our community services vary by site in response to local needs and resources.

Need Statement

While DuPage County is known for its affluence, data from the American Community Survey 2022 5-year Estimate indicates that 15.7% or 143,637 of DuPage County residents live in or near poverty (0%-199% federal poverty level). They reside primarily in low-income, under-resourced multi-family neighborhoods interspersed across DuPage County, including the neighborhoods served by Outreach. In 2022, 19.0% of households with children in DuPage County were single parent households - a risk factor for poverty – and 23,818 households received SNAP payments (2022 ACS 1-Year). According to the 2024 Illinois Report Card, 31% of students in Community Unit School District 200 where two of Outreach's NRCs are located were eligible for the free or reduced lunch program. Each year, thousands of families in DuPage County face an unexpected crisis that places their housing and employment at risk.

In FY2024, Outreach served over 1700 individuals from over 800 households. Because Outreach has a community-based model and locates in low-income neighborhoods, in FY2024, 99% of those served in case management were below 200% poverty.

The number of people living in DuPage County with untreated mental illness continues to rise. According to the 2022 Illinois Youth Survey, depression rates among high school students in DuPage County were two times greater than the national average, and one in seven reported having seriously considered suicide in the last 12 months. Impact DuPage identified Substance Use and Mental Health as one of two strategic issues to prioritize in 2022-2025. The 2024 Community Health Needs Assessments of Northwestern Medicine Central DuPage Hospital and Endeavor Health both highlight behavioral health as priority health needs in their service areas. The unmet need is much more pronounced in lower-income neighborhoods where Outreach serves.

In FY2024, Outreach served over 600 individuals in counseling with 99% of those served at our counseling centers were below 100% poverty.

Program Plan and Activities

Outreach uses a comprehensive neighborhood resource center model with specific principles in place of being community-based, serving the whole family, and providing age-appropriate services for children at every stage of their development. Located right in the neighborhoods it serves, Outreach is easily

accessible and provides a full range of human services, educational, and community development activities.

Outreach's Case Management Services connect families with pressing financial concerns to resources that help them bridge financial crises and address housing instability, legal concerns, childcare needs, emergency food needs, public aid issues, and employment/job training needs. Each household asking for assistance is assigned a case manager who works to understand both the current household situation and where an intervention with the household could bring future stability. Whether it is financial assistance, assisting people in becoming employed or referring them to the appropriate resources in DuPage County, Outreach will stay involved to help stabilize the family.

The Outreach Mental Health Counseling Services provide affordable professional counseling to help individuals, couples, and families effectively address relationship issues and a wide range of mental health concerns including anxiety, grief, loss, and trauma. The array of mental health services provided through Outreach also include animal-assisted therapy and psychological testing to assist in accurate diagnosis and treatment. Because all of our counseling centers are Medicaid certified, and because Outreach is one of only three organizations that accept Medicaid, those with modest incomes have access to services.

Program Impact

We anticipate that through Outreach Carol Stream's Case Management services, families who struggle to meet basic needs or who face unexpected financial crises will advance towards financial stability; maintain their housing, utilities, and employment; and meet other basic needs. Through Outreach Carol Stream's Counseling Services, individuals, couples, and families with untreated mental health concerns or relationship issues will access affordable professional counseling, improve their mental health, and strengthen their relationships.

As an example of the impact, in FY2024, of the 345 households seeking financial assistance, 282 households (82%) were able to receive assistance and therefore maintain their housing or utilities.

Submitted by:

Vanessa Roth Chief Operating Officer April 7, 2025



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	
COMPANY NAME:	Outreach Community Ministries, Inc.
CONTACT PERSON:	Vanessa Roth, COO
CONTACT EMAIL:	vroth@weareoutreach.org

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

Has the	Bidder	made	contributions	as	described	above?

Yes

⊠ No

If "Yes", complete the required information in the table below.

DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE
	DONOR	DONOR (e.g., cash, type of item, in-kind	DONOR (e.g., cash, type of item, in-kind

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

`**⊠** No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- · With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

http://www.dupagecounty.gov/government/county_board/ethics_at_the_county/

The full text of the County's Procurement Ordinance is available at:

https://www.dupagecounty.gov/government/departments/finance/procurement/procurement ordinance and guiding principles.php

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Printed Name: Vanessa Roth	Signature:			
Title: Chief Operating Officer	Date:	4/14	25	



PARTNERSHIP AGREEMENT

Heritage Presbyterian Church and the Outreach Community Center in Carol Stream

Introduction

The Outreach Community Center in Carol Stream (OCC) and Heritage Presbyterian Church (Heritage) have a common mission of demonstrating the love of Jesus Christ to our community. OCC demonstrates this love by serving the most vulnerable in our community through practical assistance and help. It is the desire of the Outreach Community Center in Carol Stream and Heritage Presbyterian Church to establish a successful working partnership to best meet the practical needs of the individuals that visit the church looking for financial assistance and practical help.

The goal of the OCC Case Management Program is to provide services that stabilize the lives of individuals and families in the community who are in a crisis situation and who have practical needs that can be addressed. Heritage Presbyterian Church has people who visit the church seeking this type of practical assistance and yet the church is not fully equipped to best meet these needs. Through a more formal partnership between the OCC Case Management Department and Heritage Presbyterian Church, the people who visit the church will be referred to OCC for services to best meet the needs.

Collaboration Process

Heritage and OCC will work in partnership in the following areas beginning July 1, 2020

- The Outreach Community Center in Carol Stream agrees to take referrals (up to 5 per month) from Heritage Presbyterian Church of individuals who visit the church looking for financial assistance.
- 2) Heritage will make the referral to OCC by sending the person with a business card from a staff person at the church and then by calling OCC with the name of the person being referred.
- 3) OCC agrees to work diligently with the person or family referred by Heritage to provide the best service possible to stabilize the situation presented.
- 4) Heritage will provide OCC \$500 per quarter to assist with the costs of serving the individuals. These checks with be sent each quarter by Heritage Presbyterian Church by February 1, May 1, August 1, and November 1 each year.
- OCC will provide Heritage with a quarterly report of the referrals made and the services provided to those served.
- 6) Heritage agrees to be on the referral list of OCC when case management clients ask for a pastor to visit or pray with them.

Both Heritage Presbyterian Church and the Outreach Community Center in Carol Stream agree to work collaboratively on the items listed in this Partnership Agreement. Both organizations understand that this agreement is non-hinding and can be re-negotiated at any time

OCC Executive Director

nafa .

Heritage Presbyterian Church Pastor

Date

WORKING AGREEMENT between Community Unit District 200 and Outreach Community Ministries/Services 2025-2026

Introduction

Outreach Carol Stream and Community Unit District 200 have a history of successfully collaborating to share information and provide services to the children and families served by both organizations. It is the desire of Outreach Community Ministries/Services and Community Unit District 200 to continue this successful working relationship to meet the needs of the residents of the south Carol Stream neighborhood and Wheaton/Warrenville communities.

With the student population in our target neighborhoods, unmet needs could be addressed in several arenas in which Outreach Community Ministries and Outreach Community Services (an affiliate agency of OCM) receive funds including the Illinois Department of Human Services Teen REACH program and prevention programs, DuPage County Community Development Block Grant funds, and the Illinois Youth Investment Program.

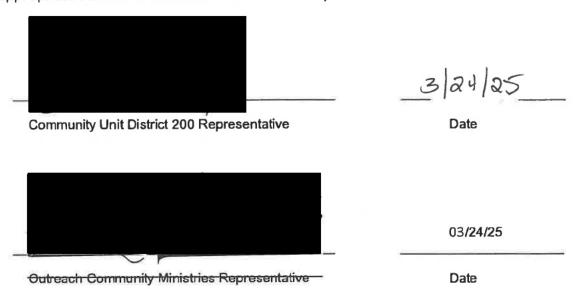
The goals of all these programs are to provide services to students after school, on school holidays, and in the summer to increase academic achievement, prevent the use and abuse of alcohol, tobacco and other drugs, and to increase job readiness skills. Community Unit District 200 is in support of these goals and programs, which are achieved through services such as academic enrichment and remediation, recreation, life skills education, community service activities and positive adult mentors.

Areas of Collaboration

Community Unit District 200 will work collaboratively with Outreach in the following areas:

- Community Unit District 200 staff and teachers will be made aware of programs and services
 offered by Outreach Community Ministries/Services and will continue to make referrals of
 appropriate students to the Outreach Community Center.
- With the proper permission from parents/guardians, Community Unit District 200 counselors, teachers, and staff will share the appropriate information on student participants in the various programs at the Community Center including grades, progress reports, testing information, and student records.
 - Community Unit District 200 will invite the staff of Outreach to students staffings when appropriate for information sharing and collaborative service provision to the students and families.

Both Community Unit District 200 and Outreach Community Ministries/Services agree to work collaboratively on the items listed in this Working Agreement. Both organizations understand that this agreement can be re-negotiated at any time to ensure that the most appropriate services to students and families are provided.



Updated March 2025 501



Diocese of Joliet

Downers Grove Office 3040 Finley Road, Suite 200 Downers Grove, IL 60515 p: 630.495.8008 f: 630.495.9854

Administrative Office

16555 Weber Road Crest Hill, IL 60403 p: 815.723.3405 f: 815.723.3452

Kankakee Office 100 College Drive Kankakee, IL 60901 p: 815.933.7791 f: 815.933.4601

Morris Office

519 W. Illinois Street Morris, IL 60450 p: 815.774.4663

Daybreak Center

611 East Cass Street Joliet, IL 60432 p: 815.774.4663 f: 815.726.1083

Head Start

203 N. Ottawa Street Joliet, IL 60432 p: 815-723-3053 f: 815-726-9484

catholiccharitiesjoliet.org

















Addendum 2/11/25

To ease the efficiency of the transmission process for these service agreements, we would like to go to a digital version. Please complete the table form below to indicate your preference for communication.

Organization Name	OUTREACH COHMUNITY MINISTERES		
Digital Version (Y/N)	N		
Primary Contact	VANESSA ROTH, COO		
Primary Contact Email	vroth@weaveoutreach.org		
Secondary Contact Email	kwhetstone @ weareoutreach.org		

Catholic Charities, Diocese of Joliet

Community Services Service Agreement

Emergency Services and Homeless Prevention Programs of Catholic Charities, Diocese of Joliet, Inc., a not-for-profit Corporation in the State of Illinois, provide emergency and financial assistance, homeless prevention, case management, and support services to families and individuals who are homeless, at imminent risk of homelessness, and who are working towards self-sufficiency.

<u>Emergency Services and Homeless Prevention Program's</u> staff wish to join with other service providers in the development of a coordinated network of services, which mutually contribute to the betterment of services to families and individuals who are homeless or at risk of homelessness.

BE IT THEREFORE RESOLVED THAT Catholic Charities and

Outreach

- 1. Recognize the existence of their respective professional services.
- 2. Communicate with one another any changes in service delivery or admission criteria.
- 3. Maintain regular and frequent contact, including regularly scheduled case reviews.
- Assist in providing necessary client information with the use of appropriate release of information forms.
- Acquaint and refer client, families, and single persons who may have need of the others' service such as medical services for the uninsured.
- 6. Generally promote the continuation of cooperative planning and service delivery for the betterment of clients, families and single persons.

7		
This is non-financial service agreement, writing by either party at any time.	which wil	be renewed annually and may be revoked in
		U
By:	By:	Signature
<u>C</u> d o		Community Services Director Title
2/25/25 Date		February 11, 2025

Catholic Charities, Diocese of Joliet

Community Services Service Agreement

<u>KATHY PAULSEN HOPE HOUSE</u>, a program of Catholic Charities, Diocese of Joliet, Inc., a not-for-profit Corporation in the State of Illinois, has established a facility providing housing, case management, and support services to families and individuals who are homeless, at imminent risk of homelessness, and who are working towards self-sufficiency.

<u>KATHY PAULSEN HOPE HOUSE</u> staff wishes to join with other service providers in the development of a coordinated network of services, which mutually contribute to the betterment of services to families and individuals who are homeless or at risk of homelessness.

BE IT THEREFORE RESOLVED THAT KATHY PAULSEN HOPE HOUSE and

Outreach	1	

- 1. Recognize the existence of their respective professional services.
- 2. Communicate with one another any changes in service delivery or admission criteria.
- 3. Maintain regular and frequent contact, including regularly scheduled case reviews.
- 4. Assist in providing necessary client information with the use of appropriate release of information forms.
- Acquaint and refer client, families, and single persons who may have need of the others' service such as medical services for the uninsured.
- 6. Generally, promote the continuation of cooperative planning and service delivery for the betterment of clients, families and single persons.

7	
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This is non-financial service agreement, which will be renewed annually and may be revoked in writing by either party at any time.

By: Signature	Ву:	Signature
Title	39	Community Services Director Title
<u>H25/25</u> Date		February 11, 2025 Date

Catholic Charities, Diocese of Joliet Community Services Service Agreement

The Daybreak Transitional Housing Program, a program of Catholic Charities, Diocese of Joliet, Inc., a not-for-profit Corporation in the State of Illinois, has established a facility providing housing, case management, and support services to families and individuals who are homeless, at imminent risk of homelessness, and who are working towards self-sufficiency.

<u>Daybreak Transitional Housing Program's</u> staff wish to join with other service providers in the development of a coordinated network of services, which mutually contribute to the betterment of services to families and individuals who are homeless or at risk of homelessness.

BE IT THEREFORE RESOLVED THAT

DAYBREAK TRANSITIONAL HOUSING PROGRAM AND

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- 1. Recognize the existence of their respective professional services.
- 2. Communicate with one another any changes in service delivery or admission criteria.
- 3. Maintain regular and frequent contact, including regularly scheduled case reviews.
- 4. Assist in providing necessary client information with the use of appropriate release of information forms.
- Acquaint and refer client, families, and single persons who may have need of the others' service such as medical services for the uninsured.
- 6. Generally promote the continuation of cooperative planning and service delivery for the betterment of clients, families and single persons.

7		
1		

This is non-financial service agreement, which will be renewed annually and may be revoked in writing by either party at any time.

By:	By:	
Signature		Signature
Coo	<u></u> 2	Community Services Director
Title		Title
2/25/25 Date	-	February 11, 2025 Date



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

OUTREACH COMMUNITY MINISTRIES, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MAY 03, 1982, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 29TH day of APRIL A.D. 2025 .

Authentication #: 2511903572 verifiable until 04/29/2026 Authenticate at: https://www.ilsos.gov





MEMBER INITIATIVE PROGRAM APPLICATION - Please complete all sections for submission

SECTION I Organization Information

Organization		
- gaa	DuPage County Animal Services	
Contact Person	Laura Flamion	
Address	2255 Manchester Road	
City	Wheaton	
Phone Number	630-407-2806	
Email	laura.flamion@dupagecounty.gov	

SECTION II Project Description

SECTION II Project Descr	ption	
Project Title	DuPage Snip and Chip	
Cost of the Project	\$48,155	
Brief Description of the Scope of Initiative	Cats are the largest species of animals entering the shelter system and the single largest concern for residents seeing domestic animals living outside. There are not enough low-cost spay/neuter resources to meet the demand of DuPage County residents. DuPage County Animal Services will provide low-cost spay/neuter for both owned cats and trapped feral cats for DuPage County residents.	
Desired Outcomes	To reduce the number of unwanted kittens and intact adult cats coming into the shelter. To help pet owners keep multiple cats of different sexes without the concern of unwanted litters. To reduce the number of feral cats breeding outside so the feral cat population can be reduced over time.	

SECTION III Signature

Member Name	Brian Krajewski (\$38,155), Grant Eckhoff (\$10,000)	
District	3, 4	
Signature		

SECTION IV Supplemental Documents

Please attach the following (if applicable)

- Letters of Engagement from all involved organizations
- Vendor Ethics Disclosures
- Bid Documents
- Proof of Good Standing with IL Secretary of State for all partner organizations
- Tax Documents (such as W-9 forms, where applicable)



ANIMAL SERVICES

Member Brian Krajewski 421 N County Farm Rd Wheaton, IL 60187

June 30, 2025

Member Brian Krajewski:

DuPage County Animal Services is submitting a request to consider funding for a spay neuter program called DuPage Snip and Chip. This program is for pet owners or residents trapping feral cats to have access to low-cost spay/neuter resources. We are requesting a one-time grant of \$50,000 to fund the program.

Cats are the single largest species entering shelters and generating concerns from the public when they are seen outside. The shelter has accepted over 5,000 cats into the shelter since 2020 and the numbers have been increasing year over year.

Our department has also responded to many cat hoarding instances in DuPage County that could be avoided with increased communication and access to affordable spay/neuter surgery. In 2023, officers assisted with the removal of 126 cats from 2 households in DuPage County. In both instances, the residents started feeding outdoor cats and then let them into their homes where they continued to breed until the population got unmanageable. Both residents expressed empathy towards wanting to help the outdoor cat population but also couldn't afford to get them spayed or neutered.

Studies estimate that cats can have up to 3 litters per year, with 50% of all births being female with an average litter size of 4 kittens. 300 spay surgeries have the potential to prevent over 15,000 unwanted births in one year. Funding this program would have an immediate, positive impact in DuPage County. Thank you for your time and consideration of our proposal.

Thank you,

Laura Flamion Administrator





ANIMAL SERVICES

DuPage Snip and Chip

A low-cost program for spay/neuter surgeries targeting the DuPage County cat population.

Desired Outcomes:

- Reduce the number of unwanted kittens and intact adult cats entering the shelter.
- Help reduce the surrender of cats due to concerns of breeding, allowing pet owners to keep multiple cats of different sexes.
- Reduce the number of feral cats breeding outside so the feral cat population can be reduced over time.

Program Details:

- The program goal is to spay/neuter 500 cats through this program. The department will dedicate a minimum of 10 surgery slots per week that will be subsidized at a rate of \$100 per cat.
- Program communication will include paid social media ads, email lists, partnerships with other agencies to share program details through their marketing channels and targeting zip codes where the shelter sees the largest intake numbers.
- Pet owners must show proof of DuPage County residency.
- No limit per household.
- Subsidy covers surgery, pain control, 1 year rabies vaccine, FVRCP vaccine, microchip, DuPage County rabies registration tag, and nail trim.





MEMBER INITIATIVE PROGRAM APPLICATION - Please complete all sections for submission

SECTION I Organization Information

SECTION TO TO GAINZAUGH INFORMATION	
Organization	DuPage County Animal Services
Contact Person	Laura Flamion
Address	2255 Manchester Road
City	Wheaton
Phone Number	630-407-2806
Email	laura.flamion@dupagecounty.gov

SECTION II Project Description

SECTION II Project Descr	ption	
Project Title	A Pawsitive Pathway	
Cost of the Project	\$25,000	
Brief Description of the Scope of Initiative	The department has seen an increase in people surrendering pets due to temporary hardship such as short term hospitalization, domestic violence, housing insecurity, or unable to afford critical veterinary care. A Pawsitive Pathway offers temporary pet boarding and other veterinary services to DuPage County residents with the goal of keeping pets with their people instead of surrendering to the shelter.	
Desired Outcomes	To help DuPage County residents keep their pets healthy and safe during temporary personal hardships while allowing the resident a reprieve from the additional stress of pet care so they can seek human services support. To reduce the number of animals entering the shelter that need to be permanently rehomed.	

SECTION III Signature

Member Name	Grant Eckhoff (\$10,000), Sheila Rutledge (\$10,000), Saba Haider (\$5,000)	
District	4, 5, 6	
Signature		

SECTION IV Supplemental Documents

Please attach the following (if applicable)

- Letters of Engagement from all involved organizations
- Vendor Ethics Disclosures
- Bid Documents
- Proof of Good Standing with IL Secretary of State for all partner organizations
- Tax Documents (such as W-9 forms, where applicable)



ANIMAL SERVICES

DuPage County Board 421 N County Farm Rd Wheaton, IL 60187

June 30, 2025

DuPage County Board Members:

DuPage County Animal Services is submitting a request to consider funding for a pet safety net program called A Pawsitive Pathway. This program is for pet owners experiencing personal and financial hardship, allowing them time and financial relief to seek resources to address their unique situation while removing the added stress of pet care. Temporary, confidential pet housing and resource programs can make all the difference for vulnerable families.

The department has seen an increase in people surrendering pets due to temporary hardship such as short-term hospitalization, domestic violence, housing insecurity, or financial challenges with affording critical veterinary care. This program would help reduce the number animals the shelter has to rehome, allow the pet owner an opportunity to get social services for themselves, and make sure pets in our community are healthy, safe and have the option to stay with their family.

Too many times our department receives a request from the Health Department or other agencies that are trying to admit a patient, but the patient is denying care because they do not have someone to care for their pet. We can give them the peace of mind to get the medical care they need and be reunited with their pet afterwards.

Often our department accepts pets that are clearly loved by their owners, but surrendered because they can't afford veterinary care. We can help them get care and then save on the costs of rehoming while also allowing that pet to stay with the family it knows and loves.

We understand the Member Initiative Program is reimbursement-based, and we will expend the funds and follow the proper rules to receive reimbursement. We are requesting consideration in the amount of \$50,000 to fund the program. Thank you for your time and consideration of our proposal.

Thank you,

Administrator





ANIMAL SERVICES

A Pawsitive Pathway

A safety net program designed to help DuPage County families keep their pets healthy and safe while addressing their own unique needs during times of hardship.

Desired Outcomes:

- DuPage County residents will be able to seek human support services without the added stress of pet care.
- Fewer animals will be surrendered to the shelter for permanent rehoming services.
- The program aligns with DuPage County's Strategic Plan objectives of Community Well-Being in ensuring all county residents can access services and programs that lead to independent and healthy lives.

Program Details:

- Pet owners will execute a boarding agreement of up to 30 days. DuPage County
 Animal Services will have an option to extend the boarding agreement at their
 discretion. Boarding will have a cost of \$15/day for the purpose of reporting grant
 expenditures.
- Boarding an animal will also make those animals eligible to receive a comprehensive wellness exam and any necessary vaccines, microchipping or other medically necessary services. Wellness exam and other veterinary services will be priced at competitive non-profit clinic rates for the purpose of reporting grant expenditures.
- Owned pets that require critical medical care can be evaluated for admission to the program after completing a questionnaire, providing historical medical records (if available), and after an exam by staff veterinarians at DuPage County Animal Services. If medical services can be provided at DuPage County Animal Services, those rates will be at competitive non-profit clinic rates. If medical services need to be provided by 3rd party veterinary providers, the selection of a provider will be based on appointment availability compared to procedure urgency, expertise of any specialty medicine providers, and competitive pricing for procedures. Receipts for any 3rd party services will be included in reporting grant expenditures.



INTERGOVERNMENTAL AGREEMENT BETWEEN COUNTY OF DUPAGE, ILLINOIS, the DUPAGE COUNTY SHERIFF, AND VARIETY CHARITIES

This INTERGOVERNMENTAL AGREEMENT (the "AGREEMENT") is made this 1st day of July, 2025, by and between the COUNTY OF DUPAGE, a body politic and corporate, with offices at 421 North County Farm Road, Elmhurst, Illinois (hereinafter referred to as the "COUNTY"), the DuPAGE COUNTY SHERIFF ("Sheriff"), a countywide elected official, and VARIETY CHARITIES ("Entity"), a not for profit organization.

RECITALS

WHEREAS, the Sheriff and the COUNTY are public agencies within the meaning of the Illinois "Intergovernmental Cooperation Act" and as authorized by Article 7, Section 10 of the Constitution of the State of Illinois; and

WHEREAS, Variety the Children's Charity of Illinois ("ENTITY") is a 501(c)(3) organization created under the Internal Revenue Code; and

WHEREAS, the purposes of the "Intergovernmental Cooperation Act" and Article 7 of the Constitution of the State of Illinois include fostering cooperation among government bodies; and

WHEREAS, the Illinois General Assembly has granted the Sheriff authority, as Supervisor of Safety, to enforce all laws of the State and promote safety on public highways; and

WHEREAS, the COUNTY and ENTITY are desirous of promoting public safety on public highways by distribution of bicycle helmets to children at various event(s) around the County of DuPage (hereinafter "PROJECT"); and

WHEREAS, the COUNTY has created the Member Initiative Program, which sets aside certain County funds for use by members within their districts; and

WHEREAS, in order to coordinate their respective roles in the PROJECT, the COUNTY and SHERIFF, and ENTITY have agreed to the terms and conditions set forth in this AGREEMENT; and

WHEREAS, the ENTITY shall undertake the PROJECT, and the COUNTY shall appropriate funds to the SHERIFF, who shall administer the grant funds to ENTITY to reimburse ENTITY for the costs of undertaking the Project, and

NOW, THEREFORE, in consideration of the premises, the mutual covenants, terms, and conditions herein set forth, and the understandings of each party to the other, the parties do hereby mutually covenant, promise and agree as follows:

1.0 INCORPORATION AND CONSTRUCTION.

- 1.1 All recitals set forth above are incorporated herein and made a part thereof, the same constituting the factual basis for this AGREEMENT.
- 1.2 The headings of the paragraphs and subparagraphs of this AGREEMENT are inserted for convenience of reference only and shall not be deemed to constitute part of this AGREEMENT or to affect the construction hereof.
- 1.3 The COUNTY, SHERIFF, and ENTITY shall be referred to herein collectively as the "Parties," or individually as a "Party."

2.0 PROJECT DESCRIPTION.

2.1 The PROJECT involves the purchase and distribution of bicycle helmets to children by ENTITY. The Project is more fully described in the application attached as **Exhibit A** to this Agreement.

3.0 FUNDING.

- 3.1 The PROJECT'S gross total expenses are estimated at fifteen thousand dollars (\$15,000).
- 3.2 It is the intention of the Parties that up to fifteen thousand dollars (\$15,000) in Project costs will be reimbursed by the SHERIFF, using funds appropriated for that purposed by the COUNTY. The COUNTY and SHERIFF, by this AGREEMENT, do not assume responsibility for directly paying any PROJECT costs and shall only be responsible for reimbursing portions of the ENTITY'S PROJECT costs.

4.0 ENTITY'S RESPONSIBILITIES.

- 4.1 The ENTITY shall select, and contract with, all vendors providing goods or services for the PROJECT.
- 4.2 The ENTITY shall be responsible for securing all local, county, state, and federal permits necessary for completion of the PROJECT.
- 4.3 The ENTITY shall submit one final invoice to the SHERIFF upon the completion of the material portion of the project. The SHERIFF shall remit payment to the DISTRICT within 30 days of submission of invoice.
- 4.4 The ENTITY shall make direct payments to all parties providing services related to this PROJECT. This requirement will not affect the SHERIFF'S obligation to reimburse the ENTITY.
- 4.5 The ENTITY'S contractors and consultants shall be solely responsible for the safety of all individuals performing work on the PROJECT. The ENTITY shall take

such measures as are necessary to ensure that its contractors and consultants maintain the PROJECT areas in a safe condition and install appropriate barricades and warning signs, and strictly enforce all applicable safety law, rules and regulations.

5.0 COUNTY'S RESPONSIBILITIES.

- 5.1 The COUNTY shall appropriate fifteen thousand dollars (\$15,000) for the sole and express purpose of funding the PROJECT into the SHERIFF's budget.
- 5.2 SHERIFF agrees to return any unexpended funds associated with this appropriation to the County general fund.

6.0 SHERIFF'S RESPONSIBLITIES.

- 6.1 SHERIFF shall administer the grant program subject to his authority as Supervisor of Safety.
- documentation, the SHERIFF shall promptly reimburse the ENTITY for approved costs associated with the PROJECT. The total reimbursement amount paid by the SHERIFF to the ENTITY shall not exceed fifteen thousand dollars (\$15,000). In the event PROJECT costs total less than fifteen thousand dollars (\$15,000) the ENTITY's total reimbursement amount shall be one hundred percent (100%) of the actual total PROJECT costs.

7.0 GOVERNMENT REGULATIONS.

7.1 The Parties shall comply with all local, county, state and federal requirements now in force, or which may hereafter be in force, pertaining to the PROJECT. Nothing in this agreement shall be found to act as an approval of any specific works which require separate county permitting approval.

8.0 INDEMNIFICATION.

8.1 To the extent permitted by law, each Party ("First Party") shall indemnify, hold harmless and defend the other Parties ("Second Party" or "Third Party"), and any of the Second or Third Party's officials, officers, and employees from and against all liability, claims, suits, demands, liens, proceedings and actions, including costs, fees and expense of defense, arising from, growing out of, or related to, any loss, damage, injury, death, or loss or damage to property resulting from, or connected with, the First Party's negligent or willful acts to the fullest extent that each Party is so authorized under the law; provided, however, that the First Party shall not be obligated to indemnify, hold harmless and defend the Second or Third Party for any negligent or intentional wrongful misconduct or omissions by the Second or Third Party's officials, employees, agents, contractors or personnel.

- 8.2 The ENTITY shall require each consultant and contractor responsible for the construction, maintenance, operation or monitoring of the PROJECT to name the ENTITY, SHERIFF, and COUNTY, and their respective elected and appointed officials, employees, agents and volunteers as additional insureds on said consultant's and contractor's liability insurance policy. Further, the ENTITY shall require that its consultants and contractors indemnify, defend and hold harmless the ENTITY, SHERIFF and COUNTY, and their respective elected and appointed officials, employees, agents and volunteers from and against any claims, liability or judgments resulting from, or caused by, the negligence or willful conduct of such consultant and, or contractor.
- 8.3 Nothing contained herein shall be construed as prohibiting the Parties, their officials, directors, officers, agents and employees, from defending through the selection and use of their own agents, attorneys and experts, any claims, suits, demands, liens, proceedings and actions brought against them. Pursuant to Illinois law, any attorney representing the COUNTY and SHERIFF, under this paragraph or Paragraph 8.1 is to be the State's Attorney, in accord with the applicable law. The COUNTY'S and SHERIFF'S participation in its defense shall not remove ENTITY's duty to indemnify, defend, and hold the COUNTY and SHERIFF harmless, as set forth above. Moreover, indemnity as provided in this AGREEMENT shall not be limited by reason of any insurance coverage maintained by the Parties or their consultants, contractors or agents. The First Party's indemnification of the Second or Third Party shall survive the termination, or expiration, of this AGREEMENT.

9.0 AMENDMENT OR MODIFICATION OF THIS AGREEMENT.

- 9.1 The Parties may modify or amend terms of this AGREEMENT only by a written document duly approved and executed by both Parties, excluding term extensions as provided for in the following provision.
- 9.2 Notwithstanding Paragraph 8.1, above, the term for performing this AGREEMENT may be extended by any suitable COUNTY designated form, signed by both parties without formal amendment to this AGREEMENT pursuant to Paragraph 8.1, above.

10.0 TERM OF THIS AGREEMENT.

- 10.1 The term of this AGREEMENT shall begin on the date the AGREEMENT is fully executed, and shall continue in full force and effect the completion by the ENTITY, SHERIFF and COUNTY of their respective obligations under this AGREEMENT.
- All funds must be expended prior to November 30, 2025. Failure to submit funding requests before November 30, 2025 shall render payment of the funds under this agreement subject to re-appropriation by the DuPage County Board.

10.0 ENTIRE AGREEMENT.

- 10.1 This AGREEMENT, including matters incorporated herein, contains the entire AGREEMENT between Parties.
- 10.2 There are no other covenants, warranties, representations, promises, conditions or understandings; either oral or written, other than those contained herein.
- 10.3 This AGREEMENT may be executed in one or more counterparts, each of which shall for all purposes be deemed to be an original and all of which shall constitute the same instrument.
- In event of a conflict between the terms or conditions or this AGREEMENT and any term or condition found in any exhibit or attachment, the terms and conditions of this AGREEMENT shall prevail.

11.0 SEVERABILITY.

In the event any provision of this AGREEMENT is held to be unenforceable or invalid for any reason, the enforceability thereof shall not affect the remainder of the AGREEMENT. The remainder of this AGREEMENT shall be construed as if not containing the particular provision and shall continue in full force, effect, and enforceability, in accordance with its terms.

12.0 GOVERNING LAW.

- 12.1 The laws of the State of Illinois shall govern this AGREEMENT as to both interpretation and performance.
- 12.2 The venue for resolving any disputes concerning the parties' respective performance, or failure to perform, under this AGREEMENT, shall be the judicial circuit court for DuPage County.

13.0 NOTICES.

13.1 Any required notice shall be sent to the following addresses and parties:

ON BEHALF OF THE VARIETY:

Angelique Barthel 603 Rogers St. Floor 1 Downers Grove, IL 60515

ON BEHALF OF THE SHERIFF:

James Mendrick 501 N. County Farm Road Wheaton, IL 60187

ON BEHALF OF THE COUNTY:

Jeremy Custer 421 N. County Farm Road Wheaton, IL 60187

14.0 WAIVER OF/FAILURE TO ENFORCE BREACH.

14.1 The Parties agree that the waiver of, or failure to enforce, any breach of this AGREEMENT by the remaining party shall not be construed, or otherwise operate, as a waiver of any future breach of this AGREEMENT. Further the failure to enforce any particular breach shall not bar or prevent the remaining Party from enforcing this AGREEMENT with respect to a different breach.

15.0 NO THIRD-PARTY BENEFICIARY.

15.1 This Agreement is entered into solely for the benefit of the Parties, and nothing in this Agreement is intended, either expressly or impliedly, to provide any right or benefit of any kind whatsoever to any person and/or entity who is not a party to this Agreement or to acknowledge, establish or impose any legal duty to any third party.

16.0 NO WAIVER OF TORT IMMUNITY.

COLINTY OF DUPAGE:

16.1 Nothing contained in any provision of this Agreement is intended to constitute nor shall constitute a waiver of the defenses and immunities available to the Parties under the Illinois Local Governmental and Governmental Employees Tort Immunity Act.

VARIETY:

IN WITNESS OF, the Parties set their hands and seals as of the date first written above.

over the bounds.	VIIIIII I.
	7/1/25
Deborah Conroy,	Angelique Barthel,
Chair	Executive Director
ATTEST:	DUPAGE COUNTY SHERIFF:
Jean Kaczmarek,	Edmond Moore.
County Clerk	Undersheriff



MEMBER INITIATIVE PROGRAM APPLICATION - Please complete all sections for submission

SECTION I Organization Information

Organization	Variety the Children's Charity of Illinois	
Contact Person	Angelique Barthel	
Address	603 Rogers St. Flr 1	
City	Downers Grove 60515	
Phone Number	312-822-0660	
Email	angelique@varietyofillinois.org	

SECTION II Project Description

SECTION II Project Descr	priori
Project Title	Helping ALL Kids Be Active, Be Social and Belong
Cost of the Project	\$15,000
Brief Description of the Scope of Initiative	Variety the Children's Charity of Illinois works to help children with disabilities and their families by providing medical and mobility equipment not covered by insurance along with accessible and inclusive recreational experiences so that ALL children can be active, be social and belong.
Desired Outcomes	Variety of Illinois will be able to increase social media reach on Facebook, Instagram and Linked In by 20% on each platform along with having polished, consistent professional messaging to families of kids with disabilities, as well as current and potential donors/community partners. The repairs needed for the company vehicle will open a wide array of

SECTION III Signature

Member Name	Saba Haider
District	5
Signature	

SECTION IV Supplemental Documents

Please attach the following (if applicable)

- Letters of Engagement from all involved organizations
- Vendor Ethics Disclosures
- Bid Documents
- Proof of Good Standing with IL Secretary of State for all partner organizations
- Tax Documents (such as W-9 forms, where applicable)

June 24, 2025

Saba Haider
DuPage County Board
421 N. County Farm Road
Wheaton, IL 60187

Dear Ms. Haider,

We would officially like to request \$15,000 in Member Initiative Funds to support Variety Children's Charity of Illinois.

Variety of Illinois works to provide adaptive equipment for kids with disabilities, which provides opportunities for activity and inclusion. We strive to help children with disabilities gain mobility and freedom, get out and about in the community, and achieve independence and increase self-esteem.

Variety of Illinois requests your consideration of the following proposal that will help us expand our reach and become better able to serve children with disabilities in the short and long term:

Capacity Building

\$5,000 – part-time social media contractor and organizational software. This would cover the first year of hiring a dedicated social media professional along with any needed software.

\$1,000 – Variety of Illinois needs repairs to our Sunshine Coach vehicle and to purchase a rear entry ramp to make equipment deliveries to families safer and easier.

Programming

\$5,000 – Dedicated toward partnership with the DuPage Sports Commission and Family Fun Ride on July 22 at the Lombard Cycling Classic for complimentary safety helmets for all participating youth.

\$4,000 – Dedicated toward Kids on the Go and Adapt My World Equipment Requests for families located in DuPage County.

I look forward to any assistance you can provide.

With great appreciation,

Angelique Barthel
Executive Director
Variety the Children's Charity of Illinois
312-822-0660
www.varietyofillinois.org



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

VARIETY THE CHILDREN'S CHARITY OF ILLINOIS, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JANUARY 27, 1943, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 6TH day of JANUARY A.D. 2025 .

Authentication #: 2500601746 verifiable until 01/06/2026 Authenticate at: https://www.ilsos.gov



A GRANT AGREEMENT BETWEEN THE COUNTY OF DUPAGE AND DUPAGE HEALTH COALITION

WHEREAS, the County of DuPage ("County") is a body corporate and politic; and

WHEREAS, DUPAGE HEALTH COALITION a.k.a. ACCESS DUPAGE ("Agency") is a 501(c)(3) organization created under the Internal Revenue Code, and

WHEREAS, the County has established the Member Initiative Program which permits members of the County Board to advance items which benefit their district and assigns certain amounts of public funds for those purposes; and

WHEREAS, the County's funding for each Agency is not a donation and must be used to perform certain services or functions within the County's statutory authority to perform; and

WHEREAS, the County and the Agency are hereafter sometimes referred to as the "Party" and collectively referred to herein as "the Parties"; and

WHEREAS, the Parties have prepared this Agreement to govern the distribution of the grant funds identified above.

NOW, THEREFORE, in consideration of the mutual covenants and agreements contained herein, the Parties hereby agree as follows:

- 1. **Purpose of the Agreement.** The Purpose of this Agreement is to define the project for which grant funds are to be used and provide funding for eligible expenses.
- 2. Recitals. The recitals to this Agreement are incorporated as though set forth fully herein.
- 3. **Term.** This Agreement shall remain in effect through November 30, 2025. Sections 5, 6, 7, 8, 9, 10, 11, and 12 of this Agreement shall remain in effect indefinitely and shall survive the termination of this Agreement. Funds shall be expended prior to November 30, 2025.
- 4. **Project Description.** Agency shall receive twenty-five thousand dollars (\$25,000.00) from the County. Agency shall undertake the following project or activities described in the Proposal attached hereto as Exhibit A.
- 5. **Termination, Breach**. This Agreement may be terminated upon thirty (30) days' notice to the other Party with the written consent of the other Party. All terms of this Agreement shall be considered material terms and therefore all breaches shall be deemed material breaches. In the event of a breach of this Agreement by any Party, the non-breaching Party shall provide the breaching Party with written notice of the breach and shall provide a period of not less than thirty (30) days to cure said breach.
- 6. Venue, Applicable Law. The exclusive venue for disputes arising from this Agreement shall be the 18th Judicial Circuit Court, sitting in Wheaton, Illinois. This Agreement shall be governed by the laws of the State of Illinois.
- 7. Payment. The County agrees to pay the Agency twenty-five thousand dollars (\$25,000.00). Payment is contingent upon: (1) compliance with County rules and regulations; (2) Accounts Payable review by Finance Staff and County Audit Staff including providing sufficient invoicing and proof of purchase; and (3) completion of a fully executed Agreement. Payments shall be made in the form of reimbursement and upon invoice from

- Agency. Payments for eligible expenses authorized under this Agreement shall be made within thirty (30) days of receipt of completed invoices and proof of purchase. All funds shall be expended not later than November 30, 2025.
- 8. **Assignment.** Neither Party shall assign performance under this Agreement, nor shall either Party transfer any right or obligation under this Agreement without the express written approval of the County.
- Amendment. Any amendment to the terms of this Agreement must be in writing and will
 not by effective until it has been executed and approved by the same Parties who approved
 and executed the original Agreement or their successors in office.
- 10. Waiver. If the County fails to enforce any provision of this Agreement, that failure does not waive said provision or the County's right to enforce it.
- 11. **Sole Agreement.** This Agreement contains all negotiations between the County and Agency. No other understanding regarding this grant Agreement, whether written or oral, may be used to bind either Party.
- 12. Liability. The Agency agrees to indemnify, save, and hold the County, its officers, agents and employees, harmless from any claims or causes of action, including attorney's fees incurred by the County, arising from the performance of this Agreement by the Agency, its officers, agents or employees. This clause will not be construed to bar any legal remedies the Agency may have for the County's failure to fulfill any of the County's obligations under this Agreement. Notwithstanding any provisions of this Agreement to the contrary, indemnification under Section 12 of this Agreement shall be limited to the Agency's allocation, less any amount unspent.

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DUPAGE HEALTH COALITION,

		7-2-2
Deborah Conroy	Kara Murphy,	à
Chair, DuPage County	President	
ATTEST:		
Y 77 77 1		
Jean Kaczmarek,		
County Clerk		



MEMBER INITIATIVE PROGRAM APPLICATION - Please complete all sections for submission

SECTION I Organization Information

Organization	
Organization	Access DuPage
Contact Person	Kara Murphy
Address	845 E. Geneva Road
City	Carol Stream, IL
Phone Number	(331) 716-7569
Email	kmurphy@accessdupage.org

SECTION II Project Description

SECTION II Froject Descr	
Project Title	Supporting Silver Access Program
Cost of the Project	\$25,000
Brief Description of the Scope of Initiative	Provides efficient and effective healthcare for low-income DuPage residents through the Silver Access Program. Access DuPage supports about 6,000 of those individuals each year, providing low-cost comprehensive primary and specialty care, lab and hospital services, and medications. Access DuPage members have incomes under 2.5X the federal poverty level and don't qualify for health insurance through government programs or employer sponsored health insurance.
Desired Outcomes	Helping local families to get and stay insured, and to increase the affordability of high-quality health insurance with low out of pocket costs.

SECTION III Signature

Member Name	Lynn LaPlante	
District	4	
Signature		

SECTION IV Supplemental Documents

Please attach the following (if applicable)

- Letters of Engagement from all involved organizations
- Vendor Ethics Disclosures
- Bid Documents
- Proof of Good Standing with IL Secretary of State for all partner organizations
- Tax Documents (such as W-9 forms, where applicable)



Background

The DuPage Health Coalition (DHC) has been a leading voice for improved health for our DuPage neighbors for almost twenty-five years. Our successes are made possible through our innovative and enduring partnerships. We engage health, human services, and community partners, fostering region-wide collaborations, increasing health access, and decreasing disparities. We are reaching out to seek The DuPage County Board's collective support, with a spirit of shared purpose and a deep appreciation for each board member's dedication to DuPage County.

Working with health and human service partners, DHC provides efficient and effective healthcare for low-income DuPage residents. Access DuPage (AD), the program which began our collaborative efforts, has served 75,000 local patients since 2001. Many are surprised to learn that Access DuPage holds the distinction of being Illinois' largest free and charitable clinic (by patient volume).

Outside of DuPage County, as you are aware, many mistakenly believe that there are no struggling families in our community. In truth, because we are a populous county, DuPage is home to more low-income families than the entire population of 89 of the 102 counties in Illinois.

Access DuPage supports about 6,000 of those individuals each year, providing low-cost comprehensive primary and specialty care, lab and hospital services, and medications. Access DuPage members have incomes under 2.5X the federal poverty level and don't qualify for health insurance through government programs or employer sponsored health insurance.

DHC is best known for our Access DuPage program, but we actually also offer a host of community-responsive initiatives intended to improve local health. Other programs include:

- Silver Access ACA Premium Assistance helping low-income families purchase high quality health insurance
- DuPage Dispensary of Hope a free pharmacy operated in unique partnership with the Kenneth Moy Care Center
- Comprehensive Client Benefitting and Health Insurance Enrollment Services
- Bilingual Health Education including Diabetes Self-Management, Mental Health First Aid, Health Literacy, Health Insurance Literacy, and Financial Literacy
- Medical Debt DuPage advocacy and direct assistance supporting clients in applying for financial relief
- Everyday Hero A community CPR, Narcan, and AED initiative equipping the community with lifesaving skills and tools
- Breast Health Navigation
- Dental Care Coordination
- Community Flu Vaccine Initiative, in partnership with DuPage County Health Department

Building on proven success leading community planning efforts, DHC leverages innovative cross-sectoral engagement to improve health access and equity. DHC leadership currently co-chairs DuPage HEART (Health Equity and Access Response Team) in partnership with DCHD and DuPage Federation, as well as

serving as a board member or officer of Impact DuPage, VNA Advisory Council, DuPage Homeless Leadership Continuum of Care, WeGo Together for Kids, and DuPage Federation.

We partner closely and receive financial and/or in-kind donated support from every hospital system in DuPage, hundreds of medical practices, and dozens of health, social service, government, and faith-based partners. Our unique and nationally recognized model empowers participants with comprehensive care typically unavailable to the un/underinsured. It is our privilege to act as a trusted healthcare partner for our neighbors.

As you know, this is a turbulent time in healthcare. We anticipate significant growth in need for our services, but this need will coincide with likely decreases in funding capacity from some historic funding sources. It is for this reason that we are approaching you to request \$200,000 in funding support.

If awarded funds, we would apply them to support our Silver Access program, helping local families to get and stay insured, and to increase the affordability of high-quality health insurance with low out of pocket costs. All funds will be expended by November 30, 2025. Detailed information regarding this county-wide need and a comprehensive budget follow.

Silver Access (SA)

According to the CDC, among uninsured adults aged 18-64, 73.7% cite affordability as the reason they are uninsured. Although DuPage County has an overall insured rate of 94.1%, that still leaves almost 56,000 DuPage residents who are uninsured.

DHC launched Silver Access in 2016 responding to a growing awareness that high quality health insurance was still out of reach for too many people. We were encountering families who were choosing to stay uninsured despite qualifying for subsidized health insurance through the ACA. Equally troubling, an additional segment of income limited families *were* enrolling in plans, but choosing the least expensive plan, resulting in limited coverage and exorbitant out of pocket costs. For low-income individuals who DO elect higher cost low out-of-pocket plan, national data details a higher likelihood of losing coverage over the year due to unpaid premiums. Silver Access provides an additional level of financial support to overcome these barriers and ensure local families can get the care they need and deserve.

SA increases health care access for vulnerable DuPage County residents (those with income at or below 2.5x the federal poverty level) by paying a portion of their ACA health insurance premiums, helping them get covered, and ensuring they select high-quality plans with out-of-pocket costs they can afford. SA is the first program of its kind in Illinois, and one of only a few programs nationally. The significant growth of our Silver Access program, evidenced by a near-doubling of enrollment in the last three years (from 613 to 1,097) and the growing number of individuals currently placed on our waiting list mirrors a broader national trend reported by KFF, where the number of ACA Marketplace enrollees receiving premium tax credits has nearly doubled since 2020. This convergence of local demand and national trends strongly indicates a continuing and increasing need for Silver Access in DuPage County. Further, advance premium tax credits expanded under the prior administration are due to expire later this year, which will only deepen the affordability crisis.

With a simple enrollment process aided by health insurance navigators throughout the county, Silver Access provides eligible DuPage residents with up to \$150 per month in additional health insurance

subsidy. Patients are responsible for a portion of the cost of their insurance, with their costs varying based on their income and the plan they select. DHC makes health insurance payments directly to the carrier, and the patients can set up a monthly payment plan with DHC for their portion of the cost, so that the costs can be spread over the year.

SA increases the affordability of high-quality insurance, with members sharing proportionally in health care costs through premium sharing and remaining out-of-pocket health care costs. We believe that it is important that individuals develop comfort with healthcare models that involve monthly premium payments. Our model preserves the practice of individuals and families paying monthly costs for health insurance and ensures that families have a vested stake in healthcare costs, while easing financial constraints that would otherwise jeopardize insurance access.

Silver Access members have a median household income of \$33,600 (.32 of DuPage's median income of \$103,897). In aggregate, members pay about one-third of their total premium cost, with DHC paying the remainder. The program operates with very low administrative costs, since DHC is able to run the program with the assistance of just one full time program manager. In addition to interfacing with clients and carriers, the Silver Access Program Manager also provides each member with a comprehensive health education program designed to provide them with practical knowledge about how to use their health insurance effectively.

We are seeking funds for half of the expense of our personnel and administrative costs for Silver Access as well as about 15.1% of the projected cost of insurance premiums for the year. Additional breakdown in provided in the budget.

Budget

Item	FY 26 Total Cost (projected)	Other Funding	Request to DuPage County Board
Silver Access			
Premium Assistance (\$1100 per person X 909 people)	\$1,000,000	\$848,142	\$151,858
Personnel (Salary and Fringe)	\$80,800	\$40,400	\$40,400
SA Overhead	\$15,484	\$7,742	\$7,742
TOTAL	1,096,284	\$896,284	\$200,000



Passionate about wellness; Evolving to meet community needs



CESS DUPAGE The largest free and charitable clinic provider in Illinois

High-quality, comprehensive healthcare for uninsured neighbors



5,753 TOTAL ENROLLMENT 15% were new patients



886
PATIENTS
received
post-discharge

support



2,917
SPECIALTY CARE
REFERRALS



23,149

PRESCRIPTIONS



\$280

COST PER MEMBER



Sometimes it's the decreases we celebrate! \Rightarrow (22% less than last year!)



TOTAL MEMBERS ENROLLEDTo help families losing Medicaid, we kept enrollment open beyond budget projections



Helping patients re/enroll in Medicaid and ACA coverage, and screen for other available resources

THIS YEAR WE ENROLLED 1,651 IN HEALTH INSURANCE



Relief for those struggling with medical debt

Since launch we have assisted:

1,601 PATIENTS + 4,513 MEDICAL CLAIMS

> = \$14,188,796 IN DEBT RELIEF



The DuPage Health Coalition is a vital lifeline, providing essential healthcare to our most vulnerable community members. Through strong relationships with health systems, DuPage County, and a variety of funders, DHC offers comprehensive services to those who might otherwise go without. Their compassion ensures that every patient is treated with dignity and respect, embodying the true spirit of community care. DHC is a shining example of partnerships that make real change in people's lives.





brings CPR education and free AEDs

to communities that need them



Health Education

Because much of health is shaped by factors beyond the doctor's office

- MENTAL HEALTH FIRST AID
- TAKE CHARGE OF YOUR DIABETES
 - HEALTH LITERACY TRAINING

We are the only DuPage County organization offering MHFA and TCOYD in Spanish!



Personal Care Pantry

From acetaminophen to zip-upjackets and everything in between, our free mini-pantry provided:

> \$182,664 **IN ESSENTIAL SUPPLIES** to visitors at no cost

And we are still going!



Inspired by Access DuPage, ACCESS FIT provides low-income residents with affordable fitness options and health resources.



Our new **ORAL HEALTH** Specialty Care Coordinator is helping Access DuPage patients get the dental care they need.



More than 1 in 5 adults (22%) aged 65 and older report some form of medical debt. To address this issue we added a team member to concentrate on **ELIMINATING DEBT** FOR OLDER ADULTS



We were able to get a plan with low out-of-pocket costs for Rx, doctor visits and psych appointments, so we were never afraid to go to the doctor thanks to Silver Access. It may have literally saved a life. It was life changing to have it when we needed it.

- SILVER ACCESS CLIENT



Financials

- \$38M+ in pro bono care
- 92% of revenue goes directly to patient care
- FY2024 Budget \$3,691,584

For additional information, accessdupage.org/financial-information

Thank Together, improving You! health equity in DuPage County















Health Services for Uninsured and Limited Income

Access DuPage

Access DuPage (AD) coordinates low cost comprehensive health care, including primary and specialty care, medication, and hospital services for those who don't have a pathway to insurance, thanks to the help of community partners and volunteers.

Requirements: Must live in DuPage County, meet income guidelines below, and be able to provide proof of income and address.

Call 331-716-7571 to complete application by phone or for more information, visit accessdupage.org/accessdupage/



Silver Access

Silver Access (SA) provides financial help (up to \$150 per month) to lowincome families who purchase health insurance on the ACA (Affordable Care Act) marketplace.

Requirements: Must be a DuPage County resident, meet income guidelines below, and be able to enroll in ACA Marketplace insurance. For questions or to apply, visit accessdupage.org/silver-access or call 331-716-7573.



DuPage Dispensary of Hope

DuPage Dispensary of Hope

(DDOH) is a pharmacy program that helps uninsured patients (including Access DuPage members) get free medications with a valid prescription.

Requirements: Must be uninsured and meet income guidelines below. For questions or a list of available medications, visit accessdupage.org/dispensary-ofhope or call 331-716-7577.



2025 Maximum Income Guidelines (Before Taxes)

Program	AD/SA	DDOH
Family Size	Yearly 250% FPL	Income 300% FPL
1	\$39,125	\$46,950
2	\$52,875	\$63,450
3	\$66,625	\$79,950
4	\$80,375	\$96,450
Each additional person (up to 8)	\$13,750	\$16,500

*for each additional person after 8, add \$5,380

Our flyer is also available in Albanian, Arabic, Burmese, Farsi, Hindi, Polish, Spanish, Vietnamese, and Urdu!

Medical Debt Care DuPage

Medical Debt Care DuPage team members help apply for medical debt relief and navigate medical financial assistance programs. Available to people with and without insurance. All medical bills are eligible for review including hospital, ambulance, and specialty care. We do not pay bills

Requirements: Must live in in DuPage County

For questions or to make an appointment call 331-806-3846 or visit accessdupage.org/medical-debt-care-dupage/

We Are Here To Help

Our staff is here to help with a variety of different services, including:

- Health Education
- COVID-19 and Flu Vaccination
- Enrollment in Health Insurance and Health Programs
- Linkage to Food, Utility, Rent and Financial Assistance Scan QR Code to visit our website

or to start an application



We advocate for equality, justice, and equity in all our initiatives. We want DHC to feel like home.

DO YOU NEED HELP PAYING YOUR ACA HEALTH INSURANCE PREMIUM?



Silver Access is a DuPage Health Coalition program that can help you pay your monthly premium. Silver Access is **not health insurance!**

TO QUALIFY, YOU MUST:

- 1. Be able to enroll in a health insurance Marketplace plan
- 2. Live in DuPage County, IL
- 3. Be a US Citizen or a Legal Permanent Resident
- 4. Not qualify for Medicaid or Medicare
- 5. Meet the income guidelines, before taxes (see chart)

Recently lose Medicaid Coverage? Contact us to see if you qualify for Silver Access.

Scan QR code for more information!



STEPS TO APPLY









ONCE ENROLLED IN SILVER ACCESS

Members qualify for up to \$150 per member per month in assistance

- Members are responsible for the first 1-3 months of premium costs (see chart)
- If chosen plan is more than \$150 per month, member is responsible for the difference per month
- Silver Access pays member's insurance premium directly to their health insurance company every month
- Members must file taxes and inform the Marketplace and Silver Access of any income changes
- Silver Access will NOT pay the member's out of pocket costs (copays, coinsurance, deductibles, etc.)
- All NEW members must attend a learning session about health insurance

Our flyer is available at accessdupage.org in Albanian, Arabic, Burmese, Farsi, Hindi, Polish, Spanish, Vietnamese and Urdu

2025/2026 Maximum Income Guidelines (Before Taxes)

Member Contribution	1 Month	2 Months	3 Months	
%FPL	0-100%	101-150%	151-250%	
Family Size	Max. Yearly Income			
1	\$15,650	\$23,475	\$39,125	
2	\$21,150	\$31,725	\$52,875	
3	\$26,650	\$39,975	\$66,625	
4	\$32,150	\$48,225	\$83,375	
Each Additional Person (up to 8)	\$5,500	\$8,250	\$13,750	

Our office Help is av

We advocate for equality, justice, and equity in all our initiatives. We want DHC to feel like home.

Change someone's life — support mental health in your community!

Join the DuPage Health Coalition in hosting Mental Health First Aid & Youth Mental Health First Aid



For more information & and to host Mental Health First Aid, <u>click here</u>

During this 8-hour workshop, participants will learn:

Adult Mental

Health First Aid

- To identify, understand & respond to signs of mental health & substance use challenges among adults
- How to interact with an adult in crisis & connect to help
- More about trauma, substance use & self-care



Both workshops are for adults ages 18+ and available in Spanish at no cost to host or participants

During this 8-hour workshop, participants will learn:

- Youth Mental Health First Aid
- To identify, understand & respond to signs of mental health & substance use challenges among youth
- Common symptoms, including anxiety, depression, eating disorders, & ADHD
- How to interact with a youth in crisis, & connect to help
- More about trauma, substance use, self-care & the impact of social media & bullying



For more information & to host Youth Mental Health First Aid, <u>click here</u>

All you have to do is recruit participants. DHC will do the rest!





TAKE CHARGE OF YOUR DIABETES

A Free Six-Week Program to Help You Improve Your Health.

Workshop Conducted in Spanish!

Registration required.

Gift cards for attendance!

Workshop Topics

- · Healthy eating and meal planning
- Understanding diabetes, monitoring blood sugar and routine tests.
- Decreasing stress & relaxation strategies.
- Coping with difficult emotions of chronic disease.
- Managing your medications.
- Finding physical activities you enjoy.
- Preventing the risks of diabetes.
- Learn to communicate with health care professionals

Details

Every Tuesday for six weeks 06/17/25-07/22/25

Time: 5:00-7:30 PM

Place: DuPage Health Coalition 845 E. Geneva Road, Carol Stream

Call to Register: 331-716-7576

What is Take Charge of Your Diabetes?

- Teaches real-life skills for living a full, healthy life with diabetes.
- Classes are fun and interactive. Participants share their successes and build a common source of support.
- The workshop builds confidence around managing diabetes, staying active, and enjoying life.

Who can take part?

- Anyone living with diabetes.
- Family member, friend, or caregiver of an individual with diabetes.

Hosted By:







DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	
COMPANY NAME:	DuPage Health Coalition DBA Access DuPage
CONTACT PERSON:	Kara R. Murphy
CONTACT EMAIL:	kmurphy@accessdupage.org

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

Has the Bidder made contributions as described above	?
☐ Yes	
☑ No	

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

Yes

☐ No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

PHONE	EMAIL
630-510-8720	kdoyle@accessdupage.org

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- · With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

http://www.dupagecounty.gov/government/county board/ethics at the county/

The full text of the County's Procurement Ordinance is available at:

https://www.dupagecounty.gov/government/departments/finance/procurement/procurement ordinance and guiding principles.php

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Printed Name: Kara R. Murphy	Signature:
Title: President	Date: 06/25/2025



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

DUPAGE HEALTH COALITION, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JUNE 13, 2001, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 23RD

day of MAY *A.D.* 2025

Authentication #: 2514300362 verifiable until 05/23/2026 Authenticate at: https://www.ilsos.gov



A GRANT AGREEMENT BETWEEN THE COUNTY OF DUPAGE AND THE ALLIANCE OF LATINOS MOTIVATING ACTION IN THE SUBURBS (ALMAS)

WHEREAS, the County of DuPage ("County") is a body corporate and politic; and

WHEREAS, THE ALLIANCE OF LATINOS MOTIVATING ACTION IN THE SUBURBS ("Agency") is a 501(c)(3) organization created under the Internal Revenue Code, and

WHEREAS, the County has established the Member Initiative Program which permits members of the County Board to advance items which benefit their district and assigns certain amounts of public funds for those purposes; and

WHEREAS, the County's funding for each Agency is not a donation and must be used to perform certain services or functions within the County's statutory authority to perform; and

WHEREAS, the County and the Agency are hereafter sometimes referred to as the "Party" and collectively referred to herein as "the Parties"; and

WHEREAS, the Parties have prepared this Agreement to govern the distribution of the grant funds identified above.

NOW, THEREFORE, in consideration of the mutual covenants and agreements contained herein, the Parties hereby agree as follows:

- 1. **Purpose of the Agreement**. The Purpose of this Agreement is to define the project for which grant funds are to be used and provide funding for eligible expenses.
- 2. **Recitals**. The recitals to this Agreement are incorporated as though set forth fully herein.
- 3. **Term.** This Agreement shall remain in effect through November 30, 2025. Sections 5, 6, 7, 8, 9, 10, 11, and 12 of this Agreement shall remain in effect indefinitely and shall survive the termination of this Agreement. Funds shall be expended prior to November 30, 2025.
- 4. **Project Description.** Agency shall receive ten thousand dollars (\$10,000.00) from the County. Agency shall undertake the following project or activities described in the Proposal attached hereto as Exhibit A.
- 5. **Termination, Breach**. This Agreement may be terminated upon thirty (30) days' notice to the other Party with the written consent of the other Party. All terms of this Agreement shall be considered material terms and therefore all breaches shall be deemed material breaches. In the event of a breach of this Agreement by any Party, the non-breaching Party shall provide the breaching Party with written notice of the breach and shall provide a period of not less than thirty (30) days to cure said breach.
- 6. **Venue, Applicable Law**. The exclusive venue for disputes arising from this Agreement shall be the 18th Judicial Circuit Court, sitting in Wheaton, Illinois. This Agreement shall be governed by the laws of the State of Illinois.
- 7. **Payment**. The County agrees to pay the Agency ten thousand dollars (\$10,000.00). Payment is contingent upon: (1) compliance with County rules and regulations; (2) Accounts Payable review by Finance Staff and County Audit Staff including providing sufficient invoicing and proof of purchase; and (3) completion of a fully executed Agreement. Payments shall be made in the form of reimbursement and upon invoice from

- Agency. Payments for eligible expenses authorized under this Agreement shall be made within thirty (30) days of receipt of completed invoices and proof of purchase. All funds shall be expended not later than November 30, 2025.
- 8. **Assignment.** Neither Party shall assign performance under this Agreement, nor shall either Party transfer any right or obligation under this Agreement without the express written approval of the County.
- 9. **Amendment.** Any amendment to the terms of this Agreement must be in writing and will not by effective until it has been executed and approved by the same Parties who approved and executed the original Agreement or their successors in office.
- 10. **Waiver.** If the County fails to enforce any provision of this Agreement, that failure does not waive said provision or the County's right to enforce it.
- 11. **Sole Agreement.** This Agreement contains all negotiations between the County and Agency. No other understanding regarding this grant Agreement, whether written or oral, may be used to bind either Party.
- 12. **Liability**. The Agency agrees to indemnify, save, and hold the County, its officers, agents and employees, harmless from any claims or causes of action, including attorney's fees incurred by the County, arising from the performance of this Agreement by the Agency, its officers, agents or employees. This clause will not be construed to bar any legal remedies the Agency may have for the County's failure to fulfill any of the County's obligations under this Agreement. Notwithstanding any provisions of this Agreement to the contrary, indemnification under Section 12 of this Agreement shall be limited to the Agency's allocation, less any amount unspent.

COUNTY OF DUPAGE	ALMAS,	
Deborah Conroy	Dr. Lili Burciaga,	
Chair, DuPage County	President	
ATTEST:		
Jean Kaczmarek,	-	
County Clerk		



MEMBER INITIATIVE PROGRAM APPLICATION - Please complete all sections for submission

SECTION I Organization Information

Organization	ALMAS-Alliance of Latinos Motivating Action in the Suburbs
Contact Person	Dr. Lili Burciaga
Address	1129 Gateshead Dr
City	Naperville
Phone Number	773-673-0414
Email	President@ALMAScommunity.org

SECTION II Project Description

SECTION II Project Descr	0.1011
Project Title	ALMAS Impact Fund
Cost of the Project	\$10,000
Brief Description of the Scope of Initiative	The ALMAS Impact Fund will support a targeted set of programs in DuPage County that align with statutory authorities for funding. These include: 1) Cultural Engagement - supports inclusive public events like Día del Niño, Día de Muertos, and Heritage in Action that promote cultural understanding, engage local vendors, and strengthen community lies. 2) Civic Empowerment - funds civic education and engagement through Somos Series, Beyond Borders, and ALMAS in Action, including interpreters, bilingual materials, and tech for nonpartisan forums. 3) Youth Development - Led by the ALMAS Youth Advisory Council (AYAC), this supports leadership training, mentoring, and civic learning for youth to prevent truancy and build community connection. 4) Mental Wellness - Funds bilingual mental health workshops and outreach focused on reducing stigma and increasing culturally relevant care access for Latino and multilingual communities. 5) Marketing & Community Outreach - Covers outreach materials, advertising, and event branding to boost participation and connect residents to public health and civic programs. All Programs Are Free, Bilingual, Nonpartisan and Open to the Public (Designed to serve residents of all backgrounds across DuPage County with equitable access and inclusive participation).
Desired Outcomes	1) Improved Access to Culturally Responsive Mental Health Resources, 2) Increased Youth Leadership and Delinquency Prevention, 3) Stronger Civic Participation and Policy Awareness, 4) Broader Public Engagement with Latino Cultural Heritage, 5) Celebratory events like Dia del Niño, Dia de Muertos, and Heritage in Action will promote cross-cultural understanding, activate public spaces, and strengthen local identity and pride, and 5) Expanded Community Reach and Economic Impact, 6) Linguistic Equitable Program Delivery.

SECTION III Signature

Member Name	Saba Haider
District	5
Signature	

SECTION IV Supplemental Documents

Please attach the following (if applicable)

- Letters of Engagement from all involved organizations
- Vendor Ethics Disclosures
- Bid Documents
- Proof of Good Standing with IL Secretary of State for all partner organizations
- Tax Documents (such as W-9 forms, where applicable)

Dr. Lili Burciaga President & Founder, ALMAS 1129 Gateshead Dr Naperville, IL 60564



Alliance of Latinos Motivating Action in the Suburbs Alianza de Latinos Motivando Acción en los Suburbios

June 30, 2025

DuPage County
Office of the County Board
421 North County Farm Road
Wheaton, Illinois 60187-3978

Dear Members of the DuPage County Board,

I am writing to confirm that **ALMAS (Alliance of Latinos Motivating Action in the Suburbs)** is fully committed to collaborating with DuPage County in achieving the goals set forth in our funding proposal for the Member Initiative Program. As the President and Founder, I confirm that our organization will implement the ALMAS Impact Fund in full alignment with the County's statutory authority and public benefit standards.

Based on the guidance provided, we have updated our project scope and budget to clearly reflect statutorily compliant uses of public funds. Specifically, ALMAS will use the grant to support:

- Improved Access to Culturally Responsive Mental Health Resources
- Increased Youth Leadership and Delinquency Prevention
- Stronger Civic Participation and Policy Awareness
- Broader Public Engagement with Latino Cultural Heritage
- Celebratory events like Día del Niño, Día de Muertos, and Heritage in Action will promote cross-cultural understanding, activate public spaces, and strengthen local identity and pride
- Expanded Community Reach and Economic Impact
- Linguistic Equitable Program Delivery

All programs and services will be non-partisan and free and open to the general public. Programming will be focused on youth empowerment, public wellness, civic education, and/or community engagement. ALMAS will comply with all reporting, documentation, and fiscal accountability requirements set forth by DuPage County.

We appreciate the opportunity to contribute meaningfully to the well-being of our community and are honored to be considered for this initiative. Thank you for your consideration. Please feel free to contact me should you need any further information or clarification.

Sincerely,

Dr. Lili Burciaga

President & Founder, ALMAS

<u>President@ALMAScommunity.org</u>
(773) 673-0414



ALMAS Budget Breakdown for \$10,000 Grant

Programs and Initiatives - \$9,000 (90% of Requested Budget)					
Category	Amount	Statutory Alignment & Rationale	Description Latino traditions are celebrated through inclusive, community-based events that promote cultural understanding, family engagement, and intergenerational pride. This grant will support performances, activities, and materials across three key programs: Día del Niño, Día de Muertos, and Heritage in Action, a year-round cultural education series. All events are free, bilingual, and open to the public, offering accessible spaces for cultural learning, community connection, and the preservation of Latino heritage in DuPage County.		
Cultural Engagement	\$3,000	Under 55 ILCS 5/5-1005(21), ALMAS's cultural programs promote economic development by drawing residents to public spaces, engaging local vendors, and fostering community participation. Grant funds will support performances, materials, and cultural displays for inclusive, family-friendly events that celebrate Latino heritage and strengthen local connections.			
Civic Empowerment	\$3,000	Under 55 ILCS 5/5-1005(21), ALMAS's civic engagement programs support economic development by drawing residents to public events, promoting civic literacy, and strengthening community participation. Grant funds will support interpreters, bilingual materials, signage, and technology for accessible, nonpartisan forums and educational events.	The grant will support civic engagement initiatives that empower underrepresented residents to participate fully in civic life. Funding will support three core programs that promote civic education, policy awareness, and community voice: Somos Series, Beyond Borders, and ALMAS in Action, which includes year-round efforts like voter registration, advocacy, and local government engagement. All programs are free, inclusive, and designed to foster informed civic participation across DuPage County.		
Youth Development	\$2,000	Under 55 ILCS 5/5-1078.2, ALMAS's youth programs help prevent truancy and delinquency by engaging young people in leadership, mentorship, and civic learning. Led by ALMAS Youth Advisory Council (AYAC), these inclusive, prevention-focused initiatives are open	Funds will support youth leadership development through events, training, and guest speakers led and coordinated by the ALMAS Youth Advisory Council. Programs are open to all youth regardless of background and are designed to equip participants with leadership, civic, and decision-making skills as well as offer a safe and structured environment that fosters accountability,		

to all and designed to foster

purpose, and inclusion.

		connection, purpose, and community participation.	All programming would be free and open to all residents regardless of ethnic backgrounds. Spanish interpretation would also be made available where appropriate.
Mental Wellness	\$1,000	Under 55 ILCS 5/5-1052, ALMAS's public health programs promote wellness through preventive, inclusive initiatives accessible to all. These efforts aim to increase mental health awareness and access, reduce stigma, and support community well-being through culturally responsive education and resources.	ALMAS's bilingual mental health workshops and programming responds to a growing need for culturally and linguistically accessible wellness resources. Programs will help to reduce stigma around mental health in Latino and multilingual communities, improve mental wellness among youth and families and increase access to accurate health information and community-based care. All programming would be free and open to all residents regardless of ethnic backgrounds. Spanish interpretation would also be made available where appropriate.

Capital Improvement and Supplies - \$1,000 (10% of Requested Budget)			
Category	Description		
Marketing & Community Outreach	\$1000	Under 55 ILCS 5/5-1052 and 5/5-1005(21), public communication promotes health by increasing awareness and participation, while also supporting economic development by drawing residents to events that activate public spaces and engage local vendors.	Design and production of newsletters and promotional materials that highlight events focused on cultural enrichment, civic empowerment, youth leadership, and mental wellness. Advertising and social media campaigns to boost visibility and connect more people with our mission. Marketing and branding for these events to enhance community engagement.



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

ALLIANCE OF LATINOS MOTIVATING ACTION IN THE SUBURBS, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON APRIL 12, 2023, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 7TH day of FEBRUARY A.D. 2025 .

Authentication #: 2503803088 verifiable until 02/07/2026 Authenticate at: https://www.ilsos.gov





DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	
COMPANY NAME:	Alliance of Latinos Motivating Action in the Suburbs
CONTACT PERSON:	Lili Burciaga
CONTACT EMAIL:	president@ALMAScommunity.org

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

Has the Bidder made contributions as described above?	
□ Yes	
□ No	
If "Yes", complete the required information in the table below.	

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur. Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above. ☐ Yes □ No If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below. NAME PHONE **EMAIL** Section III: Violations A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows: If information changes, within five (5) days of change, or prior to county action, whichever is sooner; 30 days prior to the optional renewal of any contract: Annual disclosure for multi-year contracts on the anniversary of said contract With any request for change order except those issued by the county for administrative adjustments The full text of the County's Ethics Ordinance is available at: http://www.dupagecounty.gov/government/county board/ethics at the county/ The full text of the County's Procurement Ordinance is available at: https://www.dupagecounty.gov/government/departments/finance/procurement/procurement ordinance and guiding principles.php **Section IV: Certification**

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and

Title: ____President______ Date: _____7/24/2025_____

Signature:

certifies that the information submitted on this form is true and correct to the best of its knowledge.

Printed Name: __Lili Burciaga_____

County Board Resolution



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: CB-R-0058-25 Agenda Date: 7/8/2025 Agenda #: 9.B.

2026 COUNTY BOARD MEETING SCHEDULE

WHEREAS, 5 ILCS 120/2.02 provides that:

2.02 Public notice of all meetings, whether open or closed to the public, shall be given as follows: (a) Every body subject to the Act shall give public notice of the schedule of regular meetings at the beginning of each calendar or fiscal year and shall state the regular dates, times, and places of such meetings; and

WHEREAS, the County Board deems it advisable to establish a listing of the meetings of the County Board to be held from January 2026 through December 2026, attached hereto and made a part hereof.

NOW, THEREFORE, BE IT RESOLVED by the DuPage County Board that this resolution establishing the attached schedule of 2026 County Board meetings be and is hereby approved and adopted; and

BE IT FURTHER RESOLVED that the County Clerk shall cause this resolution to be published in a newspaper of general circulation in the County; and

BE IT FURTHER RESOLVED that the County Clerk transmit copies of this resolution to all County departments, elected officials' offices and to all DuPage County media outlets.

2026 COUNTY BOARD MEETING SCHEDULE

All meetings convene at 10:00 a.m. (Unless otherwise indicated)

January 13	June 23
January 27	July 14
February 10	August 11
February 24	August 25
March 10	September 8*
March 24	September 22
April 14	October 13
April 28	October 27
May 12	November 10
May 26	November 24
June 9	December 8

^{*}Any meeting indicated by an asterisk will begin at 7:00 P.M.

Enacted and approved this 8^{th} day of July, 2025 at Wheaton, Illinois.

	DEBORAH A. CONROY, CHAIR
	DU PAGE COUNTY BOARD
Attest:	
	JEAN KACZMAREK, COUNTY CLERK