



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

<b>SECTION 1: DESCRIPTION</b>			
<i>General Tracking</i>		<i>Contract Terms</i>	
FILE ID#:	RFP, BID, QUOTE OR RENEWAL #:	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$20,000.00
COMMITTEE: ETSB	TARGET COMMITTEE DATE: 01/14/2026	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$20,000.00
	CURRENT TERM TOTAL COST:	MAX LENGTH WITH ALL RENEWALS: ONE YEAR	CURRENT TERM PERIOD: INITIAL TERM
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: ComEd	VENDOR #: 10023	DEPT: DuPage ETSB	DEPT CONTACT NAME: Eve Kraus
VENDOR CONTACT:	VENDOR CONTACT PHONE:	DEPT CONTACT PHONE #: 630-550-7743	DEPT CONTACT EMAIL: etsb911@dupagecounty.gov
VENDOR CONTACT EMAIL:	VENDOR WEBSITE:	DEPT REQ #: 926007	
<i>Overview</i>			
DESCRIPTION Identify scope of work, item(s) being purchased, total cost and type of procurement (i.e., lowest bid, RFP, renewal, sole source, etc.). Recommendation for approval of Purchase Order 926007 to encumber funds for ComEd electric utility distribution services for the period of January 14, 2026 through January 13, 2027. This will encumber funds in the County Finance software for payment and accounting of contractual obligations in an amount not to exceed \$20,000.00.			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Electric utility services are required to power the shelters at the Wheaton Tower 136 N. County Farm Road and Hidden Lakes Forest Preserve 21W521 W. Butterfield Road Tower.			

<b>SECTION 2: DECISION MEMO REQUIREMENTS</b>	
DECISION MEMO NOT REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required. PUBLIC UTILITY
DECISION MEMO REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required.

<b>SECTION 3: DECISION MEMO</b>	
SOURCE SELECTION	Describe method used to select source. N/A
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). N/A

## SECTION 4: SOLE SOURCE MEMO/JUSTIFICATION

<b>JUSTIFICATION</b> Select an item from the following dropdown menu to justify why this is a sole source procurement.	
<b>NECESSITY AND UNIQUE FEATURES</b>	Describe the product or services that are not available from other vendors. Explain necessary and unique features or services. Attach letters from manufacturer, letters from distributor, warranties, licenses, or patents as needed. Be specific.  N/A
<b>MARKET TESTING</b>	List and describe the last time the market has been tested on the applicability of the sole source. If it has not been tested over the last 12 months, explain why not.  N/A
<b>AVAILABILITY</b>	Describe steps taken to verify that these features are not available elsewhere. Included a detailed list of all products or services by brand/manufacturer examined and include names, phone numbers, and emails of people contacted.  N/A

## SECTION 5: Purchase Requisition Information

<i>Send Purchase Order To:</i>		<i>Send Invoices To:</i>	
Vendor: ComEd	Vendor#: 10023	Dept: DuPage ETSB	Division:
Attn:	Email:	Attn: 9-1-1 System Manager	Email: etsb911@dupagecounty.gov
Address: PO Box 6111	City: Carol Stream	Address: 421 N. County Farm Road	City: Wheaton
State: IL	Zip: 60197-6111	State: IL	Zip: 60187
Phone:	Fax:	Phone: 630-550-7743	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: ComEd	Vendor#: 10023	Dept: DuPage ETSB	Division:
Attn:	Email:	Attn: 9-1-1 System Manager	Email: etsb911@dupagecounty.gov
Address: PO Box 6111	City: Carol Stream	Address: 421 N. County Farm Road	City: Wheaton
State: IL	Zip: 60197-6111	State: IL	Zip: 60187
Phone:	Fax:	Phone:	Fax:
<i>Shipping</i>		<i>Contract Dates</i>	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Jan 14, 2026	Contract End Date (PO25): Jan 13, 2027

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		Electric Utility Distribution Service FY26-27 - Shelter 8713843000		4000	5820	53210		17,500.00	17,500.00
2	1	EA		Electric Utility Distribution Service FY26-27 - Hidden Lakes 6819698000		4000	5820	53210		2,500.00	2,500.00
<b>FY is required, ensure the correct FY is selected.</b>									Requisition Total	\$ 20,000.00	

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. This is a utility service, nothing will be shipped.
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB. LMZ 12/30/25