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 #: 23-010-WIOA	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: $89,141.00
COMMITTEE: ECONOMIC DEVELOPMENT	TARGET COMMITTEE DATE: 04/18/2023	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS:
	CURRENT TERM TOTAL COST: $89,141.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: INITIAL TERM
Vendor Information		*Department Information*	
VENDOR: Turning Pointe Autism Foundation	VENDOR #:	DEPT: WDD	DEPT CONTACT NAME: Jamie Brown
VENDOR CONTACT: Carrie Provenzale	VENDOR CONTACT PHONE: 630.615.6027	DEPT CONTACT PHONE #: 630.955.2033	DEPT CONTACT EMAIL: jbrown@worknetdupage.org
VENDOR CONTACT EMAIL: cprovenzale@turningpointeaf.org	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.).
The Workforce Innovation and Opportunity Act (WIOA) provides funding for job training and employment services to residents of DuPage County. An RFP, 23-010-WIOA, was issued to solicit bids to serve WIOA youth in DuPage County.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished
The WIOA program is designed to assist DuPage County residents achieve self-sufficient employment in in-demand occupations.

SECTION 2: DECISION MEMO REQUIREMENTS

DECISION MEMO NOT REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required.
DECISION MEMO REQUIRED RFP (REQUEST FOR PROPOSAL)	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required.

SECTION 3: DECISION MEMO

STRATEGIC IMPACT	Select an item from the following dropdown menu of County's strategic priorities that this action will most impact. ECONOMIC GROWTH
SOURCE SELECTION	Describe method used to select source. A Request for Proposal was issued to secure contracts to serve WIOA youth in DuPage County.
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). 1). Provide contract to Turning Pointe 2). Seek new bids through an RFP The recommendation is to award a contract to Turning Pointe as they have extensive experience in serving youth in DuPage County.

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 Purchase Order To:		*Send Invoices To:*	
Vendor: Turning Pointe	Vendor#:	Dept: HR	Division: WDD
Attn: Carrie Provenzlae	Email:	Attn: Thaddeus Zychowski	Email: tzychowski@worknetdupage,org
Address: 1500 W. Ogden Avenue	City: Naperville	Address: 2525 Cabot Drive	City: Lisle
State: IL	Zip: 60540	State: IL	Zip: 60532
Phone: 630.615.6027	Fax:	Phone: 630.955.2057	Fax:
Send Payments To:		*Ship to:*	
Vendor: Turning Pointe	Vendor#:	Dept:	Division:
Attn: Barb Brauer	Email: bbrauer@turningpointeaf.org	Attn:	Email:
Address: 1500 W. Ogden Ave.	City: Naperville	Address:	City:
State: IL	Zip: 60540	State:	Zip:
Phone: 630.615.6033	Fax:	Phone:	Fax:
Shipping		Contract Dates	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Jun 1, 2023	Contract End Date (PO25): May 31, 2024
Contract Administrator (PO25):			

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		Youth training program	FY23	5000	2840	53820	22-681006	44,500.00	44,500.00
2	1	EA		Youth training program	FY24	5000	2840	53820	22-681006	44,641.00	44,641.00
FY is required, assure the correct FY is selected.										Requisition Total	$ 89,141.00

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