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

SECTION 1: DESCRIPTION

General Tracking		*Contract Terms*	
FILE ID#: 26-2020	RFP, BID, QUOTE OR RENEWAL #: 26-051-FM	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: $53,000.00
COMMITTEE: HUMAN SERVICES	TARGET COMMITTEE DATE: 08/04/2026	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: $212,000.00
	CURRENT TERM TOTAL COST: $53,000.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: INITIAL TERM
Vendor Information		*Department Information*	
VENDOR: Central Poly-Bag Corp	VENDOR #:	DEPT: DuPage Care Center	DEPT CONTACT NAME: Valente Jacques
VENDOR CONTACT: David Freier	VENDOR CONTACT PHONE: 908-862-7570	DEPT CONTACT PHONE #: 630-784-4273	DEPT CONTACT EMAIL: valente.jacques@dupagecounty.gov
VENDOR CONTACT EMAIL: bids@centralpoly.com	VENDOR WEBSITE:	DEPT REQ #: 7597	

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.).
Trash and recycling can liners for the DuPage Care Center, for the period August 11, 2026 through August 10, 2027, for a total amount not to exceed $53,000.00, per bid 26-051-FM.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished
The DuPage Care Center uses trash and recycling can liners for trash and recycling for the cans through the Center. With liners, the trash is contained and odor associated with trash would be eliminated.

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 (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

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 Requisition Information

Send Purchase Order To:		*Send Invoices To:*	
Vendor: Central Poly-Bag Corp	Vendor#:	Dept: DuPage Care Center	Division: Environmental Services
Attn: David Freier	Email: bids@centralpoly.com	Attn: Valente Jacques	Email: valente.jacques@dupagecounty.gov
Address: 2400 Bedle Place	City: Linden	Address: 400 N. County Farm Road	City: Wheaton
State: NJ	Zip: 07036	State: IL	Zip: 60187
Phone: 908-862-7570	Fax:	Phone: 630-784-4273	Fax:
Send Payments To:		*Ship to:*	
Vendor: Central Poly-Bag Corp	Vendor#:	Dept: DuPage Care Center	Division: Environmental Services
Attn: David Freier	Email: bids@centralpoly.com	Attn: Valente Jacques	Email: valente.jacques@dupagecounty.go
Address: 2400 Bedle Place	City: Linden	Address: 400 N. County Farm Road	City: Wheaton
State: NJ	Zip: 07036	State: IL	Zip: 60187
Phone: 908-862-7570	Fax:	Phone: 630-784-4273	Fax:
Shipping		Contract Dates	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): August 11, 2026	Contract End Date (PO25): August 10, 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		trash and recycling can liners	FY26	1200	2035	52280		21,500.00	21,500.00
2	1	EA		trash and recycling can liners	FY26	1200	2035	52280		31,500.00	31,500.00
FY is required, ensure the correct FY is selected.										Requisition Total	$ 53,000.00

Comments	
HEADER COMMENTS	Provide comments for P020 and P025. Trash and recycling can liners for the DuPage Care Center, for the period August 11, 2026 through August 10, 2027, for a total amount not to exceed $53,000.00, per bid 26-051-FM.
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. August 4, 2026 Human Services Committee August 11, 2026 County Board
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.