

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: \$869,168.00		
23-3491	22-082-DCC	1 YR + 3 X 1 YR TERM PERIODS			
COMMITTEE:	TARGET COMMITTEE DATE:	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL		
HUMAN SERVICES	11/07/2023	6 MONTHS	RENEWALS:		
			\$4,608,668.00		
	CURRENT TERM TOTAL COST:	MAX LENGTH WITH ALL RENEWALS:	CURRENT TERM PERIOD:		
	\$1,246,500.00	FOUR YEARS	FIRST RENEWAL		
Vendor Information		Department Information			
VENDOR:	VENDOR #:	DEPT:	DEPT CONTACT NAME:		
Sysco Chicago, Incorporated	10555	DuPage Care Center	Mario Plata		
VENDOR CONTACT: VENDOR CONTACT PHONE:		DEPT CONTACT PHONE #:	DEPT CONTACT EMAIL:		
Joshua Kackley 847-699-4869		630-784-4416	Mario.plata@dupagecounty.gov		
VENDOR CONTACT EMAIL:	VENDOR WEBSITE:	DEPT REQ #:			
Joshua.kackley@sysco.com		7417			

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.). Contract purchase order for Primary Food Supplies and chemicals for the DuPage Care Center, for the period December 1, 2023 through November 30, 2024, for a total contract amount not to exceed \$1,246,500.00, under bid renewal #22-082-DCC, first of three one-year optional renewals.

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

DuPage Care Center is regulated by the IL Department of Public Health, which mandates & monitors our ongoing compliance with applicable State & Federal regulations that govern our practices, policies & procedures which in turn drive our care deliver system. Adherence to Physician diet orders & clearly defined meal period is necessary to avoid fines & penalties to ensure that we are allowed to bill for & be reimbursed for care provided to our residents/patient food supplies & chemicals for dish washing & general cleaning are operational necessities.

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					
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 Pur	chase Order To:	Send Invoices To:				
Vendor: Sysco Chicago, Incorporated	Vendor#: 10555	Dept: DuPage Care Center	Division: Dining Services			
Attn: Joshua Kackley	Email: joshua.kackley@sysco.com	Attn: Mario Plata	Email: mario.plata@dupagecounty.gov			
Address: 250 Weiboldt Drive	City: Des Plaines	Address: City: 400 N. County Farm Road Wheaton				
State: IL	Zip: 60016	State: Zip: 60187				
Phone: 847-699-4869	Fax:	Phone: 630-784-4416	Fax:			
Send Payments To:		Ship to:				
Vendor: Sysco Chicago, Incorporated	vendor.		Division: mario.plata@dupagecounty.gov			
Attn: Jillian Stadick	Email: jillian.stadick@sysco.com	Attn: Mario Plata	Email:			
Address: 250 Weiboldt Drive	City: Des Plaines	Address: City: 400 N. County Farm Road Wheaton				
State: IL	Zip: 60016	State:	Zip: 60187			
Phone: 847-699-4869	1		Fax:			
S	hipping	Cor	tract Dates			
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Contract End Date (PO25) December 1, 2023 November 30, 2024				

	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		Operating Supplies	FY24	1200	2025	52200		90,000.00	90,000.00
2	1	EA		Food and Beverage	FY24	1200	2025	52210		825,000.00	825,000.00
3	1	EA		Cleaning Supplies	FY24	1200	2025	52280		17,000.00	17,000.00
4	1	EA		Operating Supplies	FY24	1200	2100	52200		90,000.00	90,000.00
5	1	EA		Food and Beverage	FY24	1200	2100	52210		220,000.00	220,000.00
6	1	EA		Cleaning Supplies	FY24	1200	2100	52280		4,500.00	4,500.00
FY is required, assure the correct FY is selected. Requisition Total					\$ 1,246,500.00						

Comments						
HEADER COMMENTS	Provide comments for P020 and P025. Contract purchase order for Primary Food Supplies and chemicals for the DuPage Care Center, for the period December 1, 2023 through November 30, 2024, for a total contract amount not to exceed \$1,246,500.00, under bid renewal #22-082-DCC, first of three one-year optional renewals.					
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. November 7, 2023 Human Services November 14, 2023 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.					

The following documents have been attached:	W-9	✓ Vendor Ethics Disclosure Statement
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