



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

SECTION 1: DESCRIPTION

<i>General Tracking</i>		<i>Contract Terms</i>	
FILE ID#: 23-3011	RFP, BID, QUOTE OR RENEWAL #: 154175	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$34,999.00
COMMITTEE: TECHNOLOGY	TARGET COMMITTEE DATE: 10/03/2023	PROMPT FOR RENEWAL: 6 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$34,999.00
	CURRENT TERM TOTAL COST: \$34,999.00	MAX LENGTH WITH ALL RENEWALS: THREE YEARS	CURRENT TERM PERIOD: INITIAL TERM
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: CyberRisk Alliance LLC	VENDOR #:	DEPT: Information Technology	DEPT CONTACT NAME: Michelle Amanti
VENDOR CONTACT: Tom Ward	VENDOR CONTACT PHONE: 602-848-0178	DEPT CONTACT PHONE #: 630-407-5020	DEPT CONTACT EMAIL: Michelle.Amanti@dupageco.org
VENDOR CONTACT EMAIL: Tom.Ward@cyberriskalliance.com	VENDOR WEBSITE:	DEPT REQ #:	
<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.). Request for a three (3) year membership in the CyberSecurity Collaborative, purchased using 55 ILCS 5/5-1022 'Competitive Bids' (D) IT/Telecom Purchases Under \$35,000.			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished The County is at always at a great cybersecurity risk given the amount of people that we have working from home and remotely connecting to our network. This membership will give us access to tools, policies, and other vital information that will aid us in protecting the County against cyber threats.			

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. PER 55 ILCS 5/5-1022 'COMPETITIVE BIDS' (D) IT/TELECOM PURCHASES UNDER \$35,000.00
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.

SECTION 5: Purchase Requisition Information

<i>Send Purchase Order To:</i>		<i>Send Invoices To:</i>	
Vendor: CyberRisk Alliance LLC	Vendor#: 36670	Dept: Information Technology	Division:
Attn: Tom Ward	Email: Tom.Ward@cyberriskalliance.com	Attn: Sarah Godzicki	Email: sarah.godzicki@dupageco.org
Address: 400 Madison Ave, Suite 6C	City: New York	Address: 421 N. County Farm Road	City: Wheaton
State: NY	Zip: 10017	State: IL	Zip: 60187
Phone: 602-848-0178	Fax:	Phone: 630-407-5037	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: CyberRisk Alliance LLC	Vendor#: 36670	Dept: Information Technology	Division:
Attn:	Email:	Attn: Michelle Amanti	Email: michelle.amanti@dupageco.org
Address: PO Box 844698	City: Boston	Address: 421 N. County Farm Road	City: Wheaton
State: MA	Zip: 02284-4698	State: ILq	Zip: 60187
Phone:	Fax:	Phone:	Fax:
Shipping		Contract Dates	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): 11/24/2023	Contract End Date (PO25): 11/23/2026
Contract Administrator (PO25): Michelle Amanti			

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		National Leader Three (3) Year Membership in the CyberSecurity Collaborative	FY23	1100	1215	53020	COVID-19_ IT	34,999.00	34,999.00
<i>FY is required, assure the correct FY is selected.</i>										Requisition Total	\$ 34,999.00

<i>Comments</i>	
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 & Michelle Amanti 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.

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