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

SECTION 1: DESCRIPTION

General Tracking		*Contract Terms*	
FILE ID#: 26-1936	RFP, BID, QUOTE OR RENEWAL #: Quote #23-064-DOT-RE	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: $14,900.00
COMMITTEE: TRANSPORTATION	TARGET COMMITTEE DATE: 08/04/2026	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: $79,900.00
	CURRENT TERM TOTAL COST: $25,000.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: THIRD RENEWAL
Vendor Information		*Department Information*	
VENDOR: Patson Inc d/b/a TransChicago Truck Group	VENDOR #: 10096	DEPT: Division of Transportation	DEPT CONTACT NAME: Roula Eikosidekas
VENDOR CONTACT: Joe Cleary	VENDOR CONTACT PHONE: 630-279-0600 x4360	DEPT CONTACT PHONE #: 630-407-6920	DEPT CONTACT EMAIL: roula.eikosidekas@dupagecounty.gov
VENDOR CONTACT EMAIL: jcleary@transchicago.com	VENDOR WEBSITE:	DEPT REQ #: 26-1500-74	

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.).

Recommendation for the approval of a contract to Patson Inc d/b/a TransChicago Truck Group, to furnish and deliver Freightliner repair and replacement parts on an as-needed basis for the DOT Fleet, for the period of September 1, 2026 through August 31, 2027, for a contract total not to exceed $25,000.00 per low quote #23-064-DOT-RE, this will be the third and final renewal.

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

Repair and replacement parts for the County owned and maintained Freightliner vehicles.

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

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: Patson Inc d/b/a TransChicago Truck Group	Vendor#: 10096	Dept: Division of Transportation	Division: Accounts Payable
Attn: Joe Cleary	Email: jcleary@transchicago.com	Attn: Kathy Curcio	Email: DOTFinance@dupagecounty.gov
Address: 776 N. York St.	City: Elmhurst	Address: 421 N. County Farm Road	City: Wheaton
State: IL	Zip: 60126	State: IL	Zip: 60187
Phone: 630-279-0600 x4360	Fax:	Phone: 630-407-6900	Fax:
Send Payments To:		*Ship to:*	
Vendor: Patson Inc d/b/a TransChicago Truck Group	Vendor#: 10096	Dept: Division of Transportation	Division: Fleet Department
Attn:	Email:	Attn: William Bell	Email: william.bell@dupagecounty.gov
Address: same as above.	City:	Address: 180 N. County Farm Road	City: Wheaton
State:	Zip:	State: IL	Zip: 60187
Phone:	Fax:	Phone: 630-407-6931	Fax:
Shipping		Contract Dates	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Sep 1, 2026	Contract End Date (PO25): Aug 31, 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		Freightliner Repair & Replacement Parts	FY26	1500	3520	52250		10,000.00	10,000.00
2	1	EA		Freightliner Repair & Replacement Parts	FY27	1500	3520	52250		15,000.00	15,000.00
FY is required, ensure the correct FY is selected.										Requisition Total	$ 25,000.00

Comments	
HEADER COMMENTS	Provide comments for P020 and P025. To furnish and deliver Freightliner repair and replacement parts for the DOT Fleet.
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. Email Approved PO to: Joe Cleary, Brain Cary (bcary@transchicago.com), William Bell, Roula Eikosidekas and Mike Figuray.
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO. see above.
APPROVALS	Department Head signature approval for procurements under $15,000. Procurement Officer Approval for ETSB.