



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#: 23-1697	RFP, BID, QUOTE OR RENEWAL #: BID 21-038-IT	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: \$29,000.00
COMMITTEE: TECHNOLOGY	TARGET COMMITTEE DATE: 05/16/2023	PROMPT FOR RENEWAL: 6 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$127,800.00
	CURRENT TERM TOTAL COST: \$42,000.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: SECOND RENEWAL
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: Physicians Record Co.	VENDOR #: 10141	DEPT: Information Technology	DEPT CONTACT NAME: Shanita Thompson
VENDOR CONTACT: Chris Voller	VENDOR CONTACT PHONE: 708-749-1029	DEPT CONTACT PHONE #: 630-407-5000	DEPT CONTACT EMAIL: Shanita.Thompson@dupageco.org
VENDOR CONTACT EMAIL: chris@physicianrecord.com	VENDOR WEBSITE: https://physiciansrecord.com	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.). Renewal of contract to furnish and deliver Printed Carbonless (NCR) forms for all DuPage County department/agencies. Services include printed, multi-part carbonless forms of various styles and sizes with ink, control numbering, and paper color combinations for all groups and quantities. This is the second (12) month renewal of three (3).			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished The current PO 5855-0001 expires on 5/31/2023 and this renewal replaces it.			

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

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: Physicians Record Company	Vendor#: 10141	Dept: Information Technology	Division:
Attn: Chris Voller	Email: chris@physiciansrecord.com	Attn: Sarah Godzicki	Email: Sarah.Godzicki@dupageco.org
Address: 1958 Ohio Street	City: Lisle	Address: 421 N. County Farm Rd.	City: Wheaton
State: IL	Zip: 60402	State: IL	Zip: 60187
Phone: 708-749-1029	Fax: 708-749-0171	Phone: 630-407-5037	Fax: 630-407-5001
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: Same as above	Vendor#:	Dept: Information Technology	Division: IT Operations
Attn:	Email:	Attn: Shanita Thompson	Email: Shanita.Thompson@dupageco.org
Address:	City:	Address: 421 N. County Farm Road	City: Wheaton
State:	Zip:	State: IL	Zip: 60187
Phone:	Fax:	Phone: 630-407-5000	Fax: 630-407-5001
Shipping		Contract Dates	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): 06/01/2023	Contract End Date (PO25): 05/31/2024
Contract Administrator (PO25): Shanita Thompson			

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		Supervisor of Assessments - FY23	FY23	1000	1800	53800		1,000.00	1,000.00
2	1	EA		Supervisor of Assessments - FY24	FY24	1000	1800	53800		1,000.00	1,000.00
3	1	EA		County Coroner - FY23	FY23	1000	4100	53800		500.00	500.00
4	1	EA		County Coroner - FY24	FY24	1000	4100	53800		500.00	500.00
5	1	EA		Sheriff - FY23	FY23	1000	4400	53800		1,000.00	1,000.00
6	1	EA		Sheriff - FY24	FY24	1000	4400	53800		1,000.00	1,000.00
7	1	EA		Sheriff (4410) - FY23	FY23	1000	4410	53800		5,000.00	5,000.00
8	1	EA		Sheriff (4410) - FY24	FY24	1000	4410	53800		5,000.00	5,000.00
9	1	EA		Regional Office of Education - FY23	FY23	1000	5700	53800		500.00	500.00
10	1	EA		Regional Office of Education	FY24	1000	5700	53800		500.00	500.00
11	1	EA		Probation and Court Services - FY23	FY23	1000	6100	53800		500.00	500.00
12	1	EA		Probation and Court Services - FY24	FY24	1000	6100	53800		500.00	500.00
13	1	EA		Public Defender - FY23	FY23	1000	6300	53800		1,000.00	1,000.00
14	1	EA		Public Defender - FY24	FY24	1000	6300	53800		1,000.00	1,000.00
15	1	EA		Clerk of the Circuit Court - FY23	FY23	1000	6700	53800		11,000.00	11,000.00
16	1	EA		Clerk of the Circuit Court - FY24	FY24	1000	6700	53800		11,000.00	11,000.00
17	1	EA		Department of Transportation - FY23	FY23	1500	3500	53800		500.00	500.00
18	1	EA		Department of Transportation - FY24	FY24	1500	3500	53800		500.00	500.00
FY is required, assure the correct FY is selected.										Requisition Total	\$ 42,000.00

<i>Comments</i>	
HEADER COMMENTS	Provide comments for P020 and P025. BID #21-038-IT Furnish & deliver printed carbonless (NCR) forms for all DuPage County departments/agencies. This contract is subject to one (1) additional twelve month renewal.
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. Please send PO to Shanita Thompson & Sarah Godzicki 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