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: $27,000.00
COMMITTEE: JUDICIAL AND PUBLIC SAFETY	TARGET COMMITTEE DATE: 05/16/2023	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS: $27,000.00
	CURRENT TERM TOTAL COST: $27,000.00	MAX LENGTH WITH ALL RENEWALS: ONE YEAR	CURRENT TERM PERIOD: INITIAL TERM
Vendor Information		*Department Information*	
VENDOR: Kelly A. Graham	VENDOR #: 14161	DEPT: Probation and Court Services	DEPT CONTACT NAME: Sharon Donald
VENDOR CONTACT: Kelly A. Graham	VENDOR CONTACT PHONE: phone number on file	DEPT CONTACT PHONE #: 630-407-8413	DEPT CONTACT EMAIL: sharon.donald@dupageco.org
VENDOR CONTACT EMAIL: email on file	VENDOR WEBSITE:	DEPT REQ #:	

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.).
Employment Services Trainer to identify job placement for unemployed Probationers. The hourly rate for this contract is $30/hour.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished
This program will provide opportunities for Probationers to find work within their communities.

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.

DECISION MEMO REQUIRED Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required.
OTHER PROFESSIONAL SERVICES (DETAIL SELECTION PROCESS ON DECISION MEMO)

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. QUALITY OF LIFE
SOURCE SELECTION	Describe method used to select source. 3rd renewal from county website posting past year.
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). 1) Staff recommends issuance of this contract to Kelly A. Graham to find employment for probationers in Probation 2) Headcount does not included staff availability to provide these services.

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: Kelly A. Graham	Vendor#: 14161	Dept: Probation and Court Services	Division: Finance
Attn: Kelly A. Graham	Email: email on file	Attn: Sharon Donald	Email: sharon.donald@dupageco.org
Address: address on file	City: Batavia	Address: 503 N County Farm Road	City: Wheaton
State: Illinois	Zip: 60510	State: Illinois	Zip: 60187
Phone: phone number on file	Fax:	Phone: 630-407-8413	Fax: 630-407-2502
Send Payments To:		*Ship to:*	
Vendor: Kelly A. Graham	Vendor#: 14161	Dept: Probation and Court Services	Division: Finance
Attn: Kelly A. Graham	Email: email on file	Attn: Sharon Donald	Email: sharon.donald@dupageco.org
Address: address on file	City: Batavia	Address: 503 N County Farm Road	City: Wheaton
State: Illinois	Zip: 60510	State: Illinois	Zip: 60187
Phone: phone number on file	Fax:	Phone: 630-407-8413	Fax: 630-407-2502
Shipping		Contract Dates	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): May 29, 2023	Contract End Date (PO25): May 28, 2024
Contract Administrator (PO25):			

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		Contractual Employment Services Trainer to implement a job placement program for Probationers	FY23	1400	6120	53090		20,000.00	20,000.00
2	1	EA		Contractual Employment Services Trainer to implement a job placement program for Probationers	FY24	1400	6120	53090		7,000.00	7,000.00
3		EA									0.00
4		EA									0.00
5		EA									0.00
6		EA									0.00
7		EA									0.00

FY is required, assure the correct FY is selected.

Requisition Total $ 27,000.00

Comments	
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.
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