



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#: 25-2215	RFP, BID, QUOTE OR RENEWAL #: 25-037-SHF	INITIAL TERM WITH RENEWALS: 2 YRS + 1 X 2 YR TERM PERIOD	INITIAL TERM TOTAL COST: \$0.00
COMMITTEE: JUDICIAL AND PUBLIC SAFETY	TARGET COMMITTEE DATE: 09/16/2025	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$0.00
	CURRENT TERM TOTAL COST: \$0.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: INITIAL TERM
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: Aramark Correctional Services LLC	VENDOR #: 10254	DEPT: Sheriff's Office	DEPT CONTACT NAME: John Putnam
VENDOR CONTACT: Michael Cisar	VENDOR CONTACT PHONE: (630) 234-9456	DEPT CONTACT PHONE #: x2050	DEPT CONTACT EMAIL: John.Putnam@dupagesheriff.org
VENDOR CONTACT EMAIL: cisar-michael@aramark.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.). Provide inmate commissary services, credit card processing, and debit cards for inmate funds upon release from custody to the DuPage County jail. Initial term two-years, with the option to renewal with two one-year.			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Sheriff's Office is required to provide inmate commissary services to the inmates of DuPage County. Credit card processing is a benefit to assist inmates, along with family/friends in funding, and debit card for inmates released to have immediate access to funds.			

**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.
RFP (REQUEST FOR PROPOSAL)	

**SECTION 3: DECISION MEMO**

SOURCE SELECTION	Describe method used to select source. RFP# 25-037-SHF
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). Decision based on scoring committee from Sheriff's Office. Other options would be to redo RFP process or continue with current vendor (current contract expires in October and all renewal options are finished).

## SECTION 4: SOLE SOURCE MEMO/JUSTIFICATION

<b>JUSTIFICATION</b>	Select an item from the following dropdown menu to justify why this is a sole source procurement.
<b>NECESSITY AND UNIQUE FEATURES</b>	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.
<b>MARKET TESTING</b>	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.
<b>AVAILABILITY</b>	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: Aramark Correctional Services LLC	Vendor#: 10254	Dept: Sheriff's Office	Division:
Attn: Michael Cisar	Email: cisar-michael@aramark.com	Attn:	Email:
Address: 2400 Market Street	City: Philadelphia	Address: 501 N. County Farm Road	City: Wheaton
State: PA	Zip: 19103	State: IL	Zip: 60187
Phone: 630-234-9456	Fax:	Phone:	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: Same	Vendor#:	Dept: same	Division:
Attn:	Email:	Attn:	Email:
Address:	City:	Address:	City:
State:	Zip:	State:	Zip:
Phone:	Fax:	Phone:	Fax:
<b>Shipping</b>		<b>Contract Dates</b>	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Sep 24, 2025	Contract End Date (PO25): Jan 2, 2028

**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		Commissary Services	FY25						0.00
<b><i>FY is required, ensure the correct FY is selected.</i></b>										Requisition Total \$	0.00

*Comments*

HEADER COMMENTS	Provide comments for P020 and P025. This contract purchase order is to provide initial implementation set up and Commissary Services for DuPage County Jail for a two-year period at no fiscal impact or cost to the County or Sheriff's Office.
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.