

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:		
23-3138	22-112-FM	1 YR + 3 X 1 YR TERM PERIODS	\$131,061.70		
COMMITTEE:	TARGET COMMITTEE DATE:	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS:		
PUBLIC WORKS	11/07/2023	3 MONTHS	\$501,254.26		
	CURRENT TERM TOTAL COST: MAX LENGTH WITH ALL RENEWALS:		CURRENT TERM PERIOD:		
	\$123,397.52	FOUR YEARS	FIRST RENEWAL		
Vendor Information		Department Information			
VENDOR:	VENDOR #:	DEPT:	DEPT CONTACT NAME:		
Valdes Supply	s Supply 36338		Angela Bolton		
VENDOR CONTACT:	VENDOR CONTACT PHONE:	DEPT CONTACT PHONE #:	DEPT CONTACT EMAIL:		
Shahir Ahmed 847-657-6000			angela.bolton@dupageco.org		
VENDOR CONTACT EMAIL: shahir.ahmed@valdessupply.com	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.). Recommendation for the approval of a contract to Valdes Supply, to furnish and deliver restroom tissue and paper towels to the Judicial Office Facility, JTK Administration Building and the Jail on a monthly basis, and as needed for the Power Plant, Children's Center, Office of Emergency Management, and the Coroner's Office, for Facilities Management, for the period December 01, 2023 through November 30, 2024, for a total contract amount not to exceed \$123,397.52, per renewal option under bid award #22-112-FM, first option to renew.

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

Restroom tissue and paper towels are necessary for the operation of campus facilities restrooms.

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					
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.

Send	l Purchase Order To:	Send Invoices To:			
/endor: Vendor#: /aldes Supply 36338		Dept: Facilities Management	Division:		
Attn: Shahir Ahmed	Email: shahir.ahmed@valdessupply.com	Attn:	Email: FMAccountsPayable@dupageco.o g		
Address: 667 Chaddick Drive	City: Wheeling	Address: City: 421 N. County Farm Road Wheaton			
State: IL	Zip: 60090	State:	Zip: 60187		
Phone: 847-657-6000	Fax: 847-235-6869	Phone: 630-407-5700	Fax: 630-407-5701		
S	end Payments To:	Ship to:			
Vendor: Valdes Supply	Vendor#: 36338	Dept: Facilities Management	Division:		
Attn:	Email:	Attn:	Email:		
Address: 667 Chaddick Drive	,		City: Wheaton		
State:	Zip: 60090	State:	Zip: 60187		
Phone: Fax:		Phone: 630-407-5700	Fax:		
Shipping		Contract Dates			
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Dec 1, 2023	Contract End Date (PO25): Nov 30, 2024		

	Purchase Requisition Line Details										
LN	Qty	MOU	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	LO		Restroom Tissue / Paper Towels	FY24	1000	1100	52280		123,397.52	123,397.52
FY is required, assure the correct FY is selected. Requisition Total					\$ 123,397.52						

Comments						
HEADER COMMENTS	Provide comments for P020 and P025. Furnish and Deliver Restroom Tissue & Paper Towels, as needed, for County Facilities.					
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. Send PO to Vendor, Mary Ventrella, Cathie Figlewski, and Clara Gomez					
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO. Public works Committee: 11/07/23 County Board: 11/14/23					
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
---	-----	--------------------------------------