

DU PAGE COUNTY

421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

Human Services Final Regular Meeting Agenda

Tuesday, October 21, 2025

9:30 AM

Room 3500A

- 1. CALL TO ORDER
- 2. ROLL CALL
- 3. PUBLIC COMMENT
- 4. CHAIR REMARKS CHAIR SCHWARZE
- 5. APPROVAL OF MINUTES
 - 5.A. **25-2544**

Human Services Committee - Regular Meeting - October 7, 2025

6. COMMUNITY SERVICES - MARY KEATING

6.A. **25-2545**

Recommendation for the approval of a contract to Piedmont Global, to provide face-to-face and telephonic interpreter services, translation services, and American Sign Language, to assist clients in Community Services, for the period of December 1, 2025 through November 30, 2026, for a contract total amount of \$15,000; per RFP #23-072-CS, second of three optional one-year renewals. (Community Services)

7. DUPAGE CARE CENTER - JANELLE CHADWICK

7.A. **HS-R-0018-25**

DuPage Care Center Rate Increase to increase the per patient day charges last fixed by Resolution HS-R-0018-24, approved October 22, 2024, from \$468 per day to \$487 per day for Standard Custodial Care and from \$487 per day to \$506 per day for Alzheimer's Special Care and from \$668 per day to \$695 per day for Post-Acute Care, and \$400 per day for Respite Care, effective December 1, 2025. (DuPage Care Center)

7.B. <u>HS-P-0050-25</u>

Recommendation for the approval of a contract purchase order to Metropolitan Industries, Inc., to provide, deliver and install a Metropolitan "Metro-Prime" pump system, for the DuPage Care Center, for the period of October 28, 2025 through October 27, 2026, for a total contract amount not to exceed \$51,220. Per 55 ILCS 5/5-1022(c) not suitable for competitive bids. (Sole Source - sole manufacturer)

7.C. <u>HS-P-0051-25</u>

Recommendation for the approval of a contract purchase order to Valdes Supply, to furnish and deliver restroom tissue, paper towels and facial tissue (group 2), as needed for the DuPage Care Center, for the period of December 1, 2025 through November 30, 2026, for a contract total not to exceed \$69,000; per bid renewal #22-112-FM, third and final optional renewal.

7.D. **HS-P-0052-25**

Recommendation for the approval of a contract purchase order to AirGas USA, LLC, to provide liquid portable oxygen, for the residents at the DuPage Care Center, for the period of December 1, 2025 through November 30, 2026, for a contract total amount not to exceed \$50,000; under bid renewal #22-105-DCC, third and final optional renewal.

7.E. **HS-P-0053-25**

Recommendation for the approval of a contract purchase order to Sysco Chicago, Inc., to provide primary food, supplies and chemicals, for the DuPage Care Center, for the period of December 1, 2025 through November 30, 2026, for a total contract amount not to exceed \$1,363,020; under bid renewal #22-082-DCC, third and final optional renewal.

7.F. **25-2546**

Recommendation for the approval of a contract purchase order to Relias, for a Learning Management System, for the DuPage Care Center, for the period of January 1, 2026 through December 31, 2026, for a contract total amount not to exceed \$19,173.02; per RFP #24-114-DCC, first of three options to renewal.

- 8. RESIDENCY WAIVERS JANELLE CHADWICK
- 9. DUPAGE CARE CENTER UPDATE JANELLE CHADWICK
- 10. COMMUNITY SERVICES UPDATE MARY KEATING
- 11. OLD BUSINESS
- 12. NEW BUSINESS
- 13. ADJOURNMENT

Minutes



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: 25-2544 Agenda Date: 10/21/2025 Agenda #: 5.A.



DU PAGE COUNTY

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Human Services Final Summary

Tuesday, October 7, 2025

9:30 AM

Room 3500A

1. CALL TO ORDER

9:30 AM meeting was called to order by Chair Greg Schwarze at 9:30 AM.

Chair Schwarze stated a physical quorum of the members is physically present. He requested a motion to permit those members not physically present due to: personal illness or disability; employment purposes or for the business of the board; or family or other emergency to participate by video or teleconference.

Member LaPlante so moved, Member Garcia seconded, all ayes on a voice vote, motion passed.

2. ROLL CALL

Staff in attendance: Joan Olson (Chief Communications Officer), Renee Zerante (State's Attorney Office), Keith Jorstad (Finance), Valerie Calvente and Sara Rogers (Procurement), Natasha Belli (Senior Services Administrator), Mary Keating (Community Services Director), and Janelle Chadwick (Administrator of the DuPage Care Center).

PRESENT	Cronin Cahill, Galassi, Garcia, LaPlante, and Schwarze
REMOTE	DeSart

3. PUBLIC COMMENT

No public comments were offered.

4. CHAIR REMARKS - CHAIR SCHWARZE

No remarks were offered.

5. APPROVAL OF MINUTES

5.A. **25-2391**

Human Services Committee - Regular Meeting - September 2, 2025

RESULT: APPROVED

MOVER: Cynthia Cronin Cahill

SECONDER: Lynn LaPlante

6. LENGTH OF SERVICE AWARD

- 6.A. Length of Service Award Sunitha Doma 10 Years Community Services
- 6.B. Length of Service Award Christy Plasil Tang 10 Years Community Services
- 6.C. Length of Service Award Karina Vazquez 10 Years Community Services

7. COMMUNITY SERVICES - MARY KEATING

7.A. <u>FI-R-0161-25</u>

Acceptance and appropriation of the IACAA Employment Barrier Reduction Pilot Program PY26, Agreement No. FCSEG05509, Company 5000 - Accounting Unit 1675, in the amount of \$40,250. (Community Services)

RESULT: APPROVED AND SENT TO FINANCE

MOVER: Cynthia Cronin Cahill

SECONDER: Paula Garcia

7.B. <u>FI-R-0155-25</u>

Acceptance and appropriation of the Aging Case Coordination Unit Fund PY26 for Senior Services, Company 5000 - Accounting Units 1660 and 1720, in the amount of \$8,130,284. (Community Services)

Chair Schwarze asked if the funding comes from the federal government or state government. Mary Keating responded that this establishes the full Senior Services budget for the 2026 program year. Most of it is paid as a fee for service from Medicaid reimbursements through the Case Coordination or the Ombudsman program. The impact from the federal government shutdown may be a reduction of the number of people that are on Medicaid and then eligible for the program. This is not a case where they would overspend as the staffing is adjusted based on the caseload.

RESULT: APPROVED AND SENT TO FINANCE

MOVER: Paula Garcia

SECONDER: Cynthia Cronin Cahill

7.C. **FI-R-0157-25**

Acceptance of modification of funding allocation for the Illinois Home Weatherization Assistance Program (IHWAP) Income Eligible Retrofits Program Grant PY25, Company 5000 - Accounting Unit 1555, for a total amount not to exceed \$171,394. (Community Services)

RESULT: APPROVED AND SENT TO FINANCE

MOVER: Paula Garcia SECONDER: Lynn LaPlante

7.D. <u>FI-R-0158-25</u>

Appropriation of additional funding for the Low Income Home Energy Assistance Program HHS Grant PY25 Inter-Governmental Agreement no. 25-224028, Company 5000 - Accounting Unit 1420, from \$3,487,312 to \$4,050,265 (an increase of \$562,953). (Community Services)

RESULT: APPROVED AND SENT TO FINANCE

MOVER: Paula Garcia
SECONDER: Lynn LaPlante

7.E. **HS-P-0046-25**

Recommendation for the approval of a purchase order issued to WellSky Corporation, for the annual renewal of the Homeless Management Information System Software and Cloud Services Contract, renewal of licenses, training, support, and custom programming, for Community Services, for the period of November 1, 2025 through October 31, 2026, for a contract amount not to exceed \$64,028.90. (Sole Source - Sole maintenance/update provider.) (Community Services)

RESULT: APPROVED AND SENT TO FINANCE

MOVER: Paula Garcia

SECONDER: Cynthia Cronin Cahill

7.F. **HS-CO-0001-25**

Amendment to County Contract 7271-0001-SERV issued to DuPage Federation on Human Services Reform Language Access Resource Center (LARC) for interpretation, translation, and American Sign Language services, an increase of \$8,500, for a contract total not to exceed \$38,499. (Community Services)

RESULT: APPROVED AND SENT TO FINANCE

MOVER: Lynn LaPlante

SECONDER: Cynthia Cronin Cahill

7.G. <u>HS-R-0017-25</u>

Approval of issuance of payments by DuPage County to energy assistance providers through the Low-Income Home Energy Assistance Program (LIHEAP) HHS Grant PY25 Inter-Governmental Agreement no. 25-224028 in the amount of \$484,140. (Community Services)

RESULT: APPROVED AT COMMITTEE

MOVER: Paula Garcia
SECONDER: Lynn LaPlante

8. DUPAGE CARE CENTER - JANELLE CHADWICK

8.A. **HS-P-0047-25**

Recommendation for the approval of a contract purchase order issued to Pulmonary Exchange, Ltd., for the rental of respiratory care equipment, for the DuPage Care Center, for the period of November 20, 2025 through November 19, 2026, for a total contract not to exceed \$35,000; per lowest bid #25-099-DCC.

RESULT: APPROVED AND SENT TO FINANCE

MOVER: Paula Garcia SECONDER: Kari Galassi

8.B. **HS-P-0048-25**

Recommendation for the approval of a contract purchase order to HD Supply, Inc., to provide housekeeping and cleaning chemicals, as needed, for the DuPage Care Center, for the period of November 1, 2025 through October 31, 2028, for a total contract amount not to exceed \$189,000. Contract pursuant to the Intergovernmental Cooperation Act (OMNIA Partners #25-JH-011).

RESULT: APPROVED AND SENT TO FINANCE

MOVER: Paula Garcia
SECONDER: Lynn LaPlante

8.C. **HS-P-0049-25**

Recommendation for the approval of a contract purchase order to PointClickCare Technologies, for software maintenance, for the DuPage Care Center, for the period of December 1, 2025 through November 30, 2026, for a total contract amount not to exceed \$302,734.83. Per 55 ILCS 5/5-1022(c) not suitable for competitive bids. (Sole Source - renewal to sole maintenance/upgrade provider.)

RESULT: APPROVED AND SENT TO FINANCE

MOVER: Paula Garcia
SECONDER: Lynn LaPlante

8.D. **25-2392**

Recommendation for the approval of a contract purchase order to Xtivity Solutions, LLC, to furnish, install, program & test cameras, for the DuPage Care Center, for the period of October 8, 2025 through October 7, 2026, for a contract total amount not to exceed \$26,270.20; per lowest bid #25-091-DCC.

RESULT: APPROVED

MOVER: Paula Garcia

SECONDER: Kari Galassi

AYES: Cronin Cahill, Galassi, Garcia, LaPlante, and Schwarze

REMOTE: DeSart

9. INFORMATIONAL

9.A. **FM-P-0046-25**

Recommendation for the approval of a contract to City of Wheaton, for water utility services for the County campus, for Facilities Management, for the period October 1, 2025 through September 30, 2029, for a total contract amount not to exceed \$3,152,000. Per 55 ILCS 5/5-1022 "Competitive Bids" (c) Not suitable for competitive bids — Public Utility. (Facilities Management - \$2,740,000; DuPage Care Center - \$412,000)

RESULT: ACCEPTED AND PLACED ON FILE

MOVER: Paula Garcia SECONDER: Kari Galassi

9.B. **FM-P-0047-25**

Recommendation for the approval of a contract to Wheaton Sanitary District, for sanitary sewer utility services, for the County campus, for Facilities Management, for the period of October 1, 2025 through September 30, 2029, for a total contract amount not to exceed \$1,821,000. Per 55 ILCS 5/5-1022 "Competitive Bids" (c) Not suitable for competitive bids – Public Utility. (Facilities Management - \$1,540,000; DuPage Care Center - \$281,000)

RESULT: ACCEPTED AND PLACED ON FILE

MOVER: Paula Garcia SECONDER: Kari Galassi

AYES: Cronin Cahill, Galassi, Garcia, LaPlante, and Schwarze

REMOTE: DeSart

10. RESIDENCY WAIVERS - JANELLE CHADWICK

No residency waivers were offered.

11. DUPAGE CARE CENTER UPDATE - JANELLE CHADWICK

Janelle Chadwick, Administrator of the DuPage Care Center, updated the committee on the construction progress, stating work is coming along on units 2 North, 2 Center, and 2 South. The federal government shutdown stops any process of review for architect or construction approvals. Ms. Chadwick is hopeful that the government shutdown will end to coincide with the expected construction completion timeline in the next month.

The Care Center recently had their annual survey from the Illinois Department of Public Health (IDPH). The health survey was completed before the federal government shutdown. Staff from the Life Safety Code did come in and complete their survey. The Care Center's plans of correction will not be reviewed until after the federal government reconvenes. Care Center staff

are in the process of documentation for the Life Safety Code Survey. The survey on the health side is one of the few times there were no deficiencies on the part of the CNAs, staff complying with all regulations.

Ms. Chadwick read a gratitude letter from the spouse of a patient at the Care Center. The spouse was a nurse for over 50 years and her husband, the patient, was a doctor. The spouse singled out care from individual staff with high praises and added all staff members were excellent.

12. COMMUNITY SERVICES UPDATE - MARY KEATING

Mary Keating, Director of Community Services, gave the committee an update on some effects of the federal government shutdown, with continuing uncertainty of what will happen in 2026. Most of the Community Services' programs are operating on 2025 funds.

Staff are waiting on what is called 'the release of funds', which is the authorization to use grant funds, for the Full Circle Communities Project, an important project for Glen Ellyn. While waiting for HUD to sign off, the 15-day comment period closed on September 30, 2025.

Typically, the release would have been signed on October 1, 2025. Until HUD staff are back in the office, they will not receive the release of funds, which will cause a domino effect on the project deadlines. Glen Ellyn can't move forward with demolition, closing, or being able to access tax credits. which have a deadline.

Environmental reviews can't be completed for the Neighborhood Investment project for the Community Development Block Grant (CDBG) project to receive 2025 funds.

Most, if not all, construction projects would not have started this fall with the construction season coming to an end. Still, funding releases are on hold.

The County serves as the lead agency for the homeless Continuum of Care (CoC). There is about \$8.6M that comes from HUD to various agencies in the county. Serving as the planning organization, DuPage County runs the Homeless Management Information System. (HMIS) and our staff coordinates the applications. Much of the money goes to PADs, Catholic Charities, Midwest Shelter for Homeless Veterans, 360 Youth, Catholic Charities being the largest recipient. Although the Biden administration committed that the grants would be for a two-year program with a non-competitive renewal for the second year, early this year HUD changed the automatic renewal, and the County must re-apply.

There is talk regarding a significant reduction in the percentage of programs that can be permanent supportive housing (PSH). Currently, people with disabilities and the chronically homeless are able stay as long as they need or want with PSH, which would be affected by a reduction to the program. About 56% of the \$8.6M is used for PSH in DuPage County, affecting about 620 people currently in permanent supportive housing.

An evidence-based practice, called Housing First, allows people to move into housing that is funded through CoC funds and not required to engage in immediate services, such as for mental illness and substance abuse. Speculation is that engagement in services will be mandatory on day one for these programs. This will be a big challenge for agencies to adapt as many people are reluctant to address those requirements initially.

The Alden Network's Addison Horizon Senior building in Addison is now leasing and is prepared to have a ribbon cutting in early November. All committee members will receive an invitation.

13. OLD BUSINESS

No old business was discussed.

14. **NEW BUSINESS**

No new business was discussed.

15. ADJOURNMENT

With no further business, the meeting was adjourned at 10:13 AM.





File #: 25-2545 Agenda Date: 10/21/2025 Agenda #: 6.A.



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 #: RFP- 23-072-CS	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: \$10,000.00 CONTRACT TOTAL COST WITH ALL RENEWALS: \$55,000.00		
COMMITTEE: HUMAN SERVICES	TARGET COMMITTEE DATE: 10/21/2025	PROMPT FOR RENEWAL: 3 MONTHS			
	CURRENT TERM TOTAL COST: \$15,000.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: SECOND RENEWAL		
Vendor Information		Department Information			
VENDOR: VENDOR #: 42756		DEPT: Community Services	DEPT CONTACT NAME: Karen Graczyk		
VENDOR CONTACT: Brooke Smith	VENDOR CONTACT PHONE: 703-691-6180 Ext 723	DEPT CONTACT PHONE #: 630-407-6543	DEPT CONTACT EMAIL: karen.graczyk@dupagecounty.gov		
VENDOR CONTACT EMAIL: bsmith@pglsinc.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.). To provide face-to-face and telephonic interpreter services, translation services, and American Sign Language services, to assist clients in Community Services, primarily the Senior services' unit. PER RFP #23-072-CS, this it the optional second of three (3) one (1) year renewals.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Community Services assists clientele that speak many diverse languages. The ability to communicate effectively in order to provide necessary social services as mandated by the State of Illinois requires the assistance of interpreter services.

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 RENEWAL OF RFP	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. RFP - #23-072-CS				
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). Award a renewal to PGLS Global as their proposal was cost effective and met the requirements needed to provide necessary services, which they have been fulfilling. Award contract to another vendor per proposals and pay a higher cost for services. Do not award a renewal contract and Community Services will not be able to serve all of our clients due to language barriers.				

	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: Purch	ase Requisition Informat	ion	
Send Puro	chase Order To:	Send Invoices To:		
Vendor:	Vendor#:	Dept:	Division:	
Piedmont Global	42756	Community Services	All	
Attn:	Email:	Attn:	Email:	
Brooke Smith	bsmith@pglsinc.com	Karen Graczyk	karen.graczyk@dupagecounty.gov	
Address:	City:	Address:	City:	
1010 N. Glebe Road, Suite 450	Arlington	421 N. County Farm Road	Wheaton	
State:	Zip:	State:	Zip:	
VA	22201	IL	60187	
Phone:	Fax:	Phone:	Fax:	
703-691-6180 Ext 723		630-407-6543	630-407-6501	
Send Payments To:		Ship to:		
Vendor:	Vendor#:	Dept:	Division:	
Piedmont Global	42756	Community Services	ALL	
Attn:	Email:	Attn:	Email:	
Brooke Smith	bsmith@pglsinc.com	Karen Graczyk	karen.graczyk@dupagecounty.gov	
Address:	City:	Address:	City:	
1010 N. Glebe Road, Suite 450	Arlington	421 N. County Farm Road	Wheaton	
State:	Zip:	State:	Zip:	
VA	22201	IL	60187	
Phone:	Fax:	Phone:	Fax:	
703-691-6180		603-407-6543	630-407-6501	
Shipping		Contract Dates		
Payment Terms:	FOB:	Contract Start Date (PO25): Contract End Date (PO25)		
PER 50 ILCS 505/1	Destination	Dec 1, 2025	Nov 30, 2026	

	Purchase Requisition Line Details										
LN	LN Qty UOM Item Detail (Product #) Description FY Company AU Acct Code Sub-Accts/ Activity Code Unit Price Extension						Extension				
1	1	EA		Interpreter Services	FY26	1000	1750	53040		15,000.00	15,000.00
FY is required, ensure the correct FY is selected. Requisition Total					\$ 15,000.00						

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 County of DuPage Finance Department Procurement Division, Room 3-400 421 North County Farm Road Wheaton, Illinois 60187

CONTRACT RENEWAL AGREEMENT

This contract, made and entered into by The County of DuPage, 421 North County Farm Road, Wheaton, Illinois, 60187, hereinafter called the "COUNTY" and Piedmont Global Language Solutions located at 1010 N. Glebe Road, STE 450, Arlington, VA 22201, hereinafter called the "CONTRACTOR", witnesseth;

The COUNTY and the CONTRACTOR have previously entered into a Contract, pursuant to Bid #23-072-CS which became effective on 10/11/2023 and which will expire 11/30/2025. The contract is subject to the second of three options to renew for a twelve (12) month period.

The contract renewal shall be effective on the date of last signature and shall terminate on 11/30/2026.

The parties now agree to renew said agreement, upon the same terms as previously agreed to, as specified in the original contract.

THE COUNTY OF DUPAGE	CONTRACTOR
	Signature on File
SIGNATURE	SIGNATURE
Sara Rogers PRINTED NAME	Ken Anders PRINTED NAME
Buyer I	VP of Operations
PRINTED TITLE	PRINTED TITLE
	10/02/2025
DATE	DATE

SECTION 9 - PROPOSAL FORM

(PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION)

Full Name of Offeror	PGLS, LLC
Main Business Address	1010 N. Glebe Rd
	Suite 450
City, State, Zip Code	Arlington, VA 22201
Telephone Number	(703) 691-6180 x723
Fax Number	(703) 691-6180
Proposal Contact Person	Brooke Smith - Director of BD Proposal Operations & Capture
Email Address	bsmith@pglsinc.com
Proprietor herein after called the	a Member of the Partnership an Officer of the Corporation Joint Venture e Offeror and that the members of the Partnership or Officers of the Corporation are as follows: Scott Swanson - Vice President of Sales & Marketing (Vice-President or Partner)
(Secretary or Par	tner) (Treasurer or Partner) ares that the only person or parties interested in this Proposal as principals are those named
nerein; that this Proposal is many the proposed forms of agreem on the office of the Procurement other documents referred to	ent and the contract specifications for the above designated purchase, all of which are on file nt Manager, DuPage Center, 421 North County Farm Road, Wheaton, Illinois 60187, and all or mentioned in the contract documents, specifications and attached exhibits, including, and issued thereto;
apparatus and other means of equipment specified or referre Further, the undersigned certiful the Offeror and in accordance	poses and agrees, if this Proposal is accepted, to provide all necessary machinery, tools, of construction, including transportation services necessary to furnish all the materials and do to in the contract documents in the manner and time therein prescribed. The fies and warrants that he is duly authorized to execute this certification/affidavit on behalf of with the Partnership Agreement or by-laws of the Corporation, and the laws of the State of the is binding upon the Offeror and is true and accurate.
	fies that the Offeror is not barred from proposing on this contract as a result of a violation of atutes 5/33 E-3 or 5/33E-4, proposal rigging or proposal-rotating or as a result of a violation Illinois Prevailing Wage Act

The undersigned certifies that he has examined and carefully prepared this proposal and has checked the same in detail before submitting this proposal, and that the statements contained herein are true and correct.

If a Corporation, the undersigned further certifies that the recitals and resolutions attached hereto and made a part hereof were properly adopted by the Board of Directors of the Corporation at a meeting of said Board of Directors duly called and held and have not been repealed, nor modified and that the same remain in full force and effect. (Offeror may be requested to provide a copy of the corporate resolution granting the individual executing the contract documents authority to do so.)

Further, the offeror certifies that he has provided services comparable to the items specified in this contract to the parties listed in the reference section below and authorizes the County to verify references of business and credit at its option.

Finally, the offeror, if awarded the contract, agrees to do all other things required by the contract documents, and that he will take in full payment therefore the sums set forth in the cost schedule.

PROPOSAL AWARD CRITERIA

This proposal will be awarded to the most responsive, responsible vendor meeting specifications based upon the highest score compiled during evaluation of the proposals outlined in the selection process.

The Contractor agrees to provide the service described above and in the contract specifications under the conditions outlined in attached documents for the amount stated.

Signature on File		CORPORATE SEAL
(Signature and Title)	Vice President of Sales & Marketing	(If available)
F	ROPOSAL MUST BE SIGNED FOR CONSIDER,	ATION
Subscribed and sworn to before i	ne thisday of	AD, 2023
My Commission Expires:(Notary F	Public)	

SECTION 8 - BID FORM PRICING

Quantities provided are estimates only. Actual usage shall be on an "as-needed" basis.

NO	ITEM	UOM	QTY	PRICE	EXTENDED PRICE			
Face to Face	Face to Face Core Languages							
1	Standard Rate	Hour	200	\$65.00	\$ 13,000			
2	After Hours Rate	Hour	50	\$65.00	\$ 3,250			
3	Minimum Charge	Each	1	\$130.00	\$ 130.00			
4	Mileage Charge	Mile	1	\$ 0.65* charged at prevailing IRS mileage rate	\$0.65			
5	Cancellation Charge	Each	1	\$ cancelled less than 24 hour prior, 2-hour minimum	\$130.00			
Face to Face	Non-Core Languages							
6	Standard Rate	Hour	100	\$65.00	\$ 6,500.00			
7	After Hours Rate	Hour	25	\$65.00	\$1,625.00			
8	Minimum Charge	Each	1	\$130.00	\$130.00			
9	Mileage Charge	Mile	1	\$0.65* charged at prevailing IRS mileage rate	\$ 0.65			
10	Cancellation Charge	Each	1	\$ cancelled less than 24 hour prior, 2-hour minimum	\$130.00			
Telephonic In	terpretation							
11	Standard Rate	Minute	100	\$ Spanish: \$0.59/minute \$ All Other Languages: \$0.69/mir	nut\$ 69.00			
12	After Hours Rate	Minute	20	\$Spanish: \$0.59/minute All Other Languages; \$0.69/min	ute\$ 13.80			
13	Minimum Charge	Each	1	\$ unscheduled: no minimum scheduled: 30 minute minimum	\$ 20.70			
14	Mileage Charge	Mile	1	\$0.00	\$0.00			
15	Cancellation Charge	Each	1	\$scheduled cancelled less than 24 hours prior, 30 minute minim	um\$ 20.70			
Written Trans	lation			0.14/word - Spanish				
16	Charges by: WORD	Word	5000	\$ 0.20/word - Core Language Quote per project for non-	\$ 900.00			
17	Charges by: PAGES	Page	500	\$ core languages n/a	\$ n/a			
18	Charges by: TIME	Hour	100	\$60.00 for DTP if need	ed\$6,000.00			
American Sig	n Language							
<u>_</u> 19	Standard Rate	Hour	100	\$115.00	\$11,500.00			
20	After Hours Rate	Hour	20	\$115.00	\$ 2,300			
21	Minimum Charge	Each	1	\$230.00	\$230.00			
22	Mileage Charge	Mile	1	\$ 0.65* charged at prevailing IRS mileage rate	\$ 0.65			
23	Cancellation Charge	Each	1	\$230.00	\$230.00			
		•		GRAND TOTAL	\$ 91,181.15			
GRAND TOTA	AL ninety-one thousand	one hundr	ed and e	eighty-one dollars and	fifteen cents			

Pricing is approved by:

Dated: June 27, 2023

Brooke Smith



THE COUNTY OF DUPAGE FINANCE - PROCUREMENT INTERPRETER, TRANSLATOR, TRANSLATION & AMERICAN SIGN LANGUAGE SERVICES 23-072-CS **BID TABULATION**

1 /

		✓	✓									
Criteria	Available Points	Piedmont /PGLS	DuPage Federation on Human Services Reform	Interpretnet	Globo	Acutrans, Inc.	Homeland Language Services	Cal Interpreting & Translation	Traduce LLC	Linguistica International	Languagers.com	Global Language Services
Firm Qualifications	30	28	29	28	29	24	27	24	17	23	16	16
Key Qualifications	20	19	19	19	19	16	19	17	12	16	10	11
Project Understanding	20	19	19	18	19	16	18	16	12	15	13	10
Price	30	25	20	18	16	26	14	19	30	17	25	10
Total	100	91	85	83	83	81	77	75	71	70	64	46
Fee and Rate Proposal		\$ 33,281.15	\$ 42,498.31	\$ 47,395.98	\$ 52,966.90	\$ 32,737.00	\$ 61,386.07	\$ 45,151.65	\$ 27,863.25	\$ 49,445.00	\$ 33,977.57	\$ 83,100.00
Percentage of points		84%	66%	59%	53%	85%	45%	62%	100%	56%	82%	34%
Points awarded (wtd against lowest price)		25	20	18	16	26	14	19	30	17	25	10

- 1. Day Translations Inc. is deemed non-responsive for not submitting requested pricing.
- Language Line Services, Inc. is deemed non-responsive for not submitting requested pricing.
 Transfective Language Services LLC is deemed non-responsive for not submitting requested pricing.
- 4. Grand Totals were recalculated to account for internal usage estimates for the following bidders: Traduce LLC, Piedmont /PGLS, Acutrans, Inc., DuPage Federation on Human Services Reform, Global Language Services, Globo, Homeland Language Services, Interpretnet, Languagers.com, and Linguista International.

RFP Posted on 06/02/2023	
Bid Opened On 06/27/2023, 2:30 PM CST by	DW, MP
Invitations Sent	24
Total Requesting Documents	4
Total Bid Responses Received	14



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	23-072-CS
COMPANY NAME:	PGLS, LLC dba Piedmont Global Language Solutions
CONTACT PERSON:	Brooke Smith
CONTACT EMAIL:	bsmith@pgls.com

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

Has the	e Bidder made contributions as described above?
	Yes
X	No

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- · Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

Ethics | DuPage Co, IL

The full text of the County's Procurement Ordinance is available at:

ARTICLE VI. - PROCUREMENT | Code of Ordinances | DuPage County, IL | Municode Library

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Printed Name:Brooke Smith	Signature on File
Title: Director of Proposals & Growth Solutions	Date: October 03, 2025

Care Center Resolution





File #: HS-R-0018-25 Agenda Date: 10/21/2025 Agenda #: 7.A.

DUPAGE CARE CENTER RATE INCREASE

WHEREAS the cost per person for care and services to residents at the DuPage Care Center has increased since the rates were last adjusted by Resolution HS-R-0018-24 approved October 22, 2024, and

WHEREAS it is necessary that the charges per person for care and select services be changed to offset the costs for such care and services and be in conjunction with the increased Medicaid Rate.

NOW, THEREFORE BE IT RESOLVED by the DuPage County Board that, effective December 1, 2025, the charges per patient day at the DuPage Care Center will be changed from \$468.00 per day to \$487.00 per day for Standard Custodial Care and from \$487.00 per day to \$506.00 per day for Alzheimer's Special Care and from \$668.00 per day to \$695.00 per day for Post-Acute Care, and \$400.00 per day for Respite Care.

BE IT FURTHER RESOLVED by the DuPage County Board that for the Private Pay residents residing at the DuPage Care Center as of November 30, 2023, the above rates will be contractually adjusted to only reflect a 4% increase of rates as per Resolution HS-R-008-24 approved October 22, 2024.

Enacted and approved this 28th day of October, 2025 at Wheaton, Illinois.

DEBORAH A. CONROY, CHAIR
DU PAGE COUNTY BOARD

JEAN KACZMAREK, COUNTY CLERK

Care Center Requisition \$30,000 and Over





File #: HS-P-0050-25 Agenda Date: 10/21/2025 Agenda #: 7.B.

AWARDING RESOLUTION ISSUED TO METROPOLITAN INDUSTRIES INCORPORATED TO PROVIDE, FURNISH AND INSTALL A METROPOLITAN "METRO-PUMP" SYSTEM FOR THE DUPAGE CARE CENTER (CONTRACT TOTAL NOT TO EXCEED \$51,220.00)

WHEREAS, a sole source quotation has been obtained in accordance with 55 ILCS 5/5-1022 and County Board policy; and

WHEREAS, the County is authorized to enter into a Sole Source Agreement pursuant to Section 2-350 of the DuPage County Procurement Ordinance; and

WHEREAS, based upon supporting documentation provided by the using Department, the Chief Procurement Officer has determined that it is not feasible to secure bids or that there is only one source for the required goods or services, and/or has determined that it is in the best interests of the County to consider only one supplier who has previous expertise relative to the subject procurement; and

WHEREAS, in accordance with the Chief Procurement Officer's determination, the Human Services Committee recommends County Board approval for the issuance of a contract to Metropolitan Industries, Inc., to provide, deliver and install a Metropolitan "Metro-Prime" pump system, for the period of October 28, 2025 through October 27, 2026, for the DuPage Care Center.

NOW, THEREFORE BE IT RESOLVED, that County Contract, covering said, to provide, furnish, and install a Metropolitan "Metro-Prime" pump system for the period of October 28, 2025 through October 27, 2026 for the DuPage Care Center, be, and it is hereby approved for issuance of a contract by the Procurement Division to, Metropolitan Industries, Inc., 37 Forestwood Drive, Romeoville, Illinois 60446-1343, for a contract total amount not to exceed \$ 51,221.00. Pursuant to 55 ILCS 5/5-1022 (c) not suitable for competitive bids. (Sole provider manufacturer.)

Enacted and approved this 28th day of October, 2025 at Wheaton, Illinois.

DEBORAH A. CONROY, CHAIR DU PAGE COUNTY BOARD	
DU PAGE COUNTY BOARD	DEBORAH A. CONROY, CHAIR
	DU PAGE COUNTY BOARD



Procurement Review Comprehensive Checklist Procurement Services Division

This form must accompany all Purchase Order Requisitions

SECTION 1: DESCRIPTION					
General Tracking		Contract Terms			
FILE ID#: 25-2341	RFP, BID, QUOTE OR RENEWAL #:	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$51,220.00		
COMMITTEE: HUMAN SERVICES	TARGET COMMITTEE DATE: 10/21/2025	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS: \$51,220.00		
	CURRENT TERM TOTAL COST: \$51,220.00	MAX LENGTH WITH ALL RENEWALS: ONE YEAR	CURRENT TERM PERIOD: INITIAL TERM		
Vendor Information		Department Information			
VENDOR: Metropolitan Industries, Inc.	VENDOR #:	DEPT: DuPage Care Center	DEPT CONTACT NAME: Nick Jensen		
VENDOR CONTACT: Kent Swanson	VENDOR CONTACT PHONE: 815-886-9200	DEPT CONTACT PHONE #: 630-784-4435	DEPT CONTACT EMAIL: Nicholas.Jensen@dupagecounty.go v		
VENDOR CONTACT EMAIL: kswanson@metropolitanind.com	VENDOR WEBSITE: metroplitanind.com	DEPT REQ #: 7537			

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 purchase order to Metropolitan Industries, Inc., to provide, deliver & install a Metropolitan "Metro-Prime" pump system for the DuPage Care Center, for the period October 28, 2025 through October 27, 2026, for a total contract amount not to exceed \$51,220.00, per Single Source per DuPage Ordinance, Section 2-350 (manufacturer)

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Replacement pumps for the underground pit area at the DuPage Care Center. The current pumps are no longer operable and currently have temporary undersized storm water ejector pumps in place and are manually testing pumps to ensure are properly working.

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.				
SOLE SOURCE PER DUPAGE ORDINANCE, SECTION 2-350 (MUST FILL OUT SECTION 4)					
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. MANUFACTURER
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. The replacement pumps are surface pumps versus underground pit pumps.
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. FM plumbers researched and put out quotes, this vendor was the only vendor that offered this product
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 Informat	ion	
Send P	Purchase Order To:	Send Invoices To:		
Vendor: Metropolitan Industries, Inc.	Vendor#:	Dept: DuPage Care Center	Division: DuPage Care Center	
Attn: Kent Swanson	Email: kswanson@metropolitanind.com	Attn: Nick Jensen	Email: Nicholas.Jensen@dupagecounty.g ov	
Address: 37 Forestwood Drive	City: Romeoville	Address: City: 400 N. County Farm Road Wheaton		
State: IL	Zip: 60446-1343	State:	Zip: 60187	
Phone: 815-886-9200	Fax:	Phone: 630-784-4435	Fax:	
Sen	d Payments To:	Ship to:		
Vendor: Metropolitan Industries	Vendor#:	Dept: DuPage Care Center	Division: Facilities Management	
Attn: Kent Swanson	Email: kswanson@metropolitanind.com	Attn: Nick Jensen	Email: Nicholas.Jensen@dupagecounty.g ov	
Address: 37 Forestwood Drive	City: Romeoville	Address: 400 N. County Farm Road	City: Wheaton	
State: IL	Zip: 60446-1343	State:	Zip: 60187	
Phone: 815-886-9200	Fax:	Phone: 630-784-4435	Fax:	
	Shipping	Contract Dates		
Payment Terms: FOB: PER 50 ILCS 505/1 Destination		Contract Start Date (PO25): October 28, 2025	Contract End Date (PO25): October 27, 2026	

	Purchase Requisition Line Details											
l	-N	Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
	1 1 EA 2 Model 35MKPC300 self-priming pumps with 4-inch discharge, duplex control panel, alternator switch, basin cover and check valves & gate valves for the DuPage Care Center 54010 51,220.00 51,220.00						51,220.00					
F	FY is required, ensure the correct FY is selected. Requisition Total					\$ 51,220.00						

	Comments				
HEADER COMMENTS	Provide comments for P020 and P025. Recommendation for the approval of a contract purchase order to Metropolitan Industries, Inc., to provide, deliver & install a Metropolitan "Metro-Prime" pump system for the DuPage Care Center, for the period October 28, 2025 through October 27, 2026, for a total contract amount not to exceed \$51,220.00, per Single Source, per DuPage Ordinance, Section 2-350 (manufacturer)				
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. October 21, 2025 Human Service Committee October 28, 2025 County Board Meeting				
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.				

QUOTATION



PUMP COMPANY

A Division of METROPOLITAN INDUSTRIES, INC. 37 FORESTWOOD DR. • ROMEOVILLE, IL 60446-1343 PH (815) 886-9200 • FAX (815) 886-4573

www.metropolitanind.com

TO: Mr. Kirk Koneiczka

DuPage County Facilities Management

421 N. County Farm Road Wheaton, IL 60187

DuPage Care Center

Wheaton, IL

BIDS DUE: For Purchase

ENGINEER:	

TURNKEY INSTALLATION CONTRACT PROPOSAL

PROJECT:

We are pleased to provide a quotation for the following complete "Turnkey-Installation Contract", to install a Metropolitan "Metro-Prime" pump system: Metropolitan proposes to provide all necessary materials and labor to perform the following: Remove the existing pumps and controls. Install the new pumps as required and start-up as a complete turnkey project.

ITEM	QTY	DESCRIPTION
1	1	 New Equipment to Include: Qty. (2) Model 35MPC300 self-priming pumps with 4-inch discharge. Each pump is close coupled to a TEFC motor rated 208-Volt, 3-Phase, 1150-RPM, 3-HP. Qty. (1) U.L. listed duplex control panel with main disconnect, overloads, H-O-A switches, circuit breakers, Ion Intellipump smart logic controller, and high water alarm. Factory wired & tested in a NEMA-3R wall mounted enclosure. Qty. (1) Mechanical alternator switch with stainless steel float ball and rod. Qty. (1) 54-inch diam. steel basin cover with all required openings. Qty. (2) 4-inch check valves & gate valves with 4-inch piping as required from new pumps to existing.
2	1	 Scope of Work The existing pumps, controls, valves, and piping will be disconnected. Existing temporary pump will be utilized during this time. The new self-priming pumps will be installed with new cover, valves and piping as required. The new control panel will be mounted to wall and wired to existing power feeder. The new pumps and float switches will be wired to the control system After installation is complete Metropolitan will start-up and test operation of new pump system. All plumbing and electrical installation is included.

Cost to furnish & install pumps and accessories as described above is:.....\$51,220.00

Note: Unless otherwise noted above:

Taxes, permits, fees, payment & performance bonds are not included in price. Overtime is not included; work to be completed during normal business hours (except as noted). Price is FOB <u>Destination</u>, freight is included. Price includes one start-up trip per system. Additional service shall be billed at "Current Labor-Rates". Metropolitan's standard 12-Month warranty applies. Existing electrical feed to pumps is assumed adequate for the new pumps with no allowance for increased service. MBE, WBE, and Residency Requirements not included. Pricing firm for purchase & release within 30-Days only. Price-Escalation may apply: Price in effect at time of release to production.

TERMS: Net 60, in accordance with the provisions of the Illinois Local Government Prompt Payment Act, 50 ILCS 505/1 et. seq.

THIS QUOTATION, SUBJECT TO THE CONDITIONS ON THE REVERSE SIDE HEREOF, MAY BE ACCEPTED ONLY BY SIGNING ONE COPY OF THIS QUOTATION AND RETURNING IT TO METROPOLITAN PUMP CO. NOT LATER THAN THE DATE INDICATED ON THE FACE HEREOF AFTER WHICH THIS QUOTATION IS VOID. THIS QUOTATION AFTER ACCEPTANCE BY BUYER MAY BE CANCELLED BY EITHER PARTY WITH NO PENALTY ONLY IF ENGINEER FAILS TO APPROVE SELLERS APPROVAL BROCHURE.

ACCEPTED:	QUOTE NO: <u>1124C21265</u> SUBMITTED: <u>9/9/25</u>
FIRM:	THIS QUOTATION VOID AFTER: 90 Days
P.V.	Signature on File
BY:	PREPARED BY:
TITLE:	
	Kent Swanson

STANDARD CONDITIONS OF SALE (Domestic Shipments)

1. TERMS

Standard terms are net -sixty days from date of invoice in accordance with the provisions of the Illinois Local Government Prompt Payment Act, 50 ILCS 505/1 et seq. Products are sold F.O.B. Destination at Purchaser's address unless otherwise stated. Interest on overdue accounts shall accrue at the rate provided for by the Illinois Local Government Prompt Payment Act (50 ILCS 505/1 et seq.

Quotations are subject to acceptance within thirty days from the date, and in the interim, are subject to changes in price or other particulars upon notice.

All offers to purchase, quotations, and contracts of sales are subject to final acceptance by Metropolitan Pump (hereinafter called the Company) at its office at Romeoville IL; and shall be and constitute an Illinois Contract, subject to the laws of the State of Illinois.

SALES AND SIMILAR TAXES

Applicable Sales, use, occupational, excise, or other similar taxes are not included in the prices quoted and if this transaction is subjected to any such tax by any taxing authority whatever, the same must be added to the purchase price. Purchaser may provide Company proof of state and federal tax exemption upon request.

3 DELIVERIES

Neither party shall be under any liability for failure to make deliveries where such failure to deliver may be due to fires, strikes, accidents, labor or transportation difficulties, car shortage, failure to obtain deliveries of materials, action of any State, Federal or local governments or other causes beyond the Party's reasonable control.

4. ESTIMATED SHIPPING WEIGHTS

The Company will not be responsible for the accuracy of shipping weights submitted in quotations, as these weights are estimated weights, for use in computing probable freight charges.

5. GUARANTEES

RATED OUTPUT

The Company guarantees that the apparatus manufactured by it will deliver successfully its output as indicated on the nameplate, provided such apparatus is properly installed and maintained, correctly lubricated, operated under normal conditions and with competent supervision.

REPLACEMENT OF DEFECTIVE MATERIAL

Any parts which show faulty workmanship or material will be repaired or replaced without charge. F.O.B. Destination as to company's works, provided such defects develop under normal and proper use within three months after date of shipment and provided Purchaser shall give notice in writing to the Company and a chance to inspect such defects before repairing or altering the product in any way. The correction of such defects by repair or replacement by the Company shall constitute a fulfillment of its obligation to the Purchaser.

NON-LIABILITY FOR LOSS OR DAMAGE

The Company will not be responsible for or liable for any loss or damage resulting from improper storage or handling prior to placing the apparatus in service and will not assume any responsibility, expense or liability for repairs made outside its works without proper written consent of the Company. The Company will not be responsible or liable for any damage or loss resulting from installation or operation in any manner not complying with installation or operating instructions or drawings or with the ratings marked thereon.

CONTINGENT LIABILITY

The Company will not be responsible or liable in any way for consequential damage or contingent liability resulting from nondelivery, late delivery, function, malfunction or nonfunction or any equipment sold hereunder or resulting from any service provided or from malfeasance or nonfeasance of any service provided hereunder not to exceed twice the total amount(s) paid by Purchaser pursuant to this agreement.

CHANGES

In event the Purchaser finds it necessary to make changes in the work to be performed hereunder, he may do so only by written order. If such changes cause an increase or decrease in the amount due for apparatus sold hereunder, or in the time required for completion of resulting order, an equitable adjustment shall be made and the order shall be modified accordingly. All changes shall comply with the Illinois Criminal Code, 720 ILCS 5/33E-9.

7. TERMINATION

In the event the Purchaser, due to good and sufficient cause, desires to effect cancellation of sales or services sold hereunder, notice shall be given in writing to the Company.

The Company shall thereupon, as directed, cease work and deliver to the Purchaser all completed and partially completed articles and materials and work in process. The Purchaser shall pay the Company the following:

- (a) The price provided in the order for all articles or materials which have been completed prior to termination.
- (b) Actual expenditures made by the Company in connection with the incompleted portion of the order, including reasonable cancellation charges paid by the Company for which it may be liable on account of commitments made under the order.

Deferred deliveries are subject to Company's approval. Should the Purchaser for good and sufficient cause desire that we hold up or defer deliveries until some later date, same shall be acceptable on the following conditions only:

- (c) Deferment period is not to exceed sixty days, at the end of which time, if no release is given, Company reserves the right to render invoice and make shipment of the completed portion of order to destination specified in Purchaser's order, or to warehouse such apparatus at Purchaser's expense.
- (d) On the incompleted portion of the order, if release is not given by the Purchaser at the expiration of sixty days, the Company reserves the right to make a cancellation charge on the same conditions and terms of payment as outlined above under "Termination".

8. PATENTS

The Company certifies that to the best of its knowledge the apparatus sold hereunder does not infringe any Letters Patent granted to others by the United States of America or by any country foreign thereto. The Company does not assume any responsibility or liability for any claim of infringement brought against the Purchaser, its successors, assigns, customers or users of its product.

9. PAYMENTS

If, in the judgment of the Company, the financial condition of the Purchaser at any time does not justify continuance of the production or shipment on the terms of payment specified, the Company may require full or partial payment in advance.

Pro rata payments shall become due as shipments are made. If shipments are delayed by the Purchaser, payments shall become due from date when the Company is prepared to make shipment. If manufacture is delayed by the Purchaser, payment shall be made based on the contract price and the percentage of completion. Apparatus held for the Purchaser shall be at the risk and expense of the Purchaser.

10 FEDERAL AND STATE LAWS

The Company, to the best of its knowledge, is complying with The Fair Labor Standards Act, Public Contracts Act and all other applicable State and Federal Laws, and the orders and regulations issued thereunder.

11. GENERAL

There are no understandings, agreements or warranties, either verbal or written, relating to the apparatus sold hereunder that are not fully expressed herein and no change in the terms hereof may be made except by a writing signed by both parties.

No statement, recommendation or assistance made or offered by Company through its representatives to the Purchaser or his representatives in connection with the use of any product sold by us shall be or constitute a waiver by Company of any of the provisions hereof or change the Purchaser's liability as herein defined.

Seller represents that with respect to the production of the articles and/or the performance of the services covered by this proposal, it has fully complied with Section 12 (a) of the fair labor standards act of 1938 as amended.

(815) 886-9200 Outside IL (800) 323-1665 Fax (815) 886-4573 www.metropolitanind.com

September 22, 2025

Mr. Nicholas Jensen
DuPage County
421 N. County Farm Road
Wheaton, IL 60187

Subject: Sole Source Justification – Metropolitan Industries, Inc.

Mr. Jensen,

This letter serves as a sole source justification for the purchase of equipment and services from Metropolitan Industries, of Romeoville, IL. Metropolitan Industries is the sole manufacturer and supplier of the duplex sump pump system, control panel, and components specified for this project.

The new duplex sump pump system will include all controls, pumps, and motors and will be furnished by one equipment supplier, Metropolitan Industries. Metropolitan Industries shall have responsibility for the complete and proper operation of the new pumping equipment and control equipment as furnished. Metropolitan Industries will furnish a factory trained service technician for start-up and shall include operating instruction to the operators.

Due to these unique capabilities and the lack of authorized alternative suppliers, procurement from another source is not feasible.

If you have any further questions, please do not hesitate to contact me.

Respectfully,

Kent Swanson Metropolitan Industries, Inc.



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	Care Center Building Quotation
COMPANY NAME:	Metropolitan Industries, Inc.
CONTACT PERSON:	Diane Ahrendt
CONTACT EMAIL:	dahrendt@metropolitanind.com

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

las the Bidder ma	de contributions a	as described	above?
-------------------	--------------------	--------------	--------

	Yes
X	No

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE
			9	

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

1	
•	

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- · With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

http://www.dupagecounty.gov/government/county_board/ethics_at_the_county/

The full text of the County's Procurement Ordinance is available at:

https://www.dupagecounty.gov/government/departments/finance/procurement/procurement ordinance and guiding principles.php

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Printed Name: Diam Ahrundt	Signature on File
Title: Vice Przsident	Date: September 24,2025

Rev. 1-2025

Care Center Requisition \$30,000 and Over



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: HS-P-0051-25 Agenda Date: 10/21/2025 Agenda #: 7.C.

AWARDING RESOLUTION ISSUED TO VALDES SUPPLY FOR RESTROOM TISSUE, PAPER TOWELS AND FACIAL TISSUE (GROUP 2) FOR THE DUPAGE CARE CENTER (CONTRACT TOTAL AMOUNT \$69,000.00)

WHEREAS, bids have been taken and evaluated in accordance with County Board policy; and

WHEREAS, the Human Services Committee recommends County Board approval for the issuance of a contract to Valdes Supply, for restroom tissue, paper towels and facial tissue (group 2), for the period of December 1, 2025 through November 30, 2026, for the DuPage Care Center.

NOW, THEREFORE BE IT RESOLVED, that said contract is for restroom tissue, paper towels and facial tissue (group 2), for the period of December 1, 2025 through November 30, 2026 for the DuPage Care Center per bid renewal #22-112-FM, be, and it is hereby approved for the issuance of a contract purchase order by the Procurement Division to Valdes Supply, 667 Chaddwick Drive, Wheeling, Illinois 60090, for a contract total amount of \$69,000.00.

Enacted and approved this 28th day of October, 2025 at Wheaton, Illinois.

	DEBORAH A. CONROY, CHAIR
	DU PAGE COUNTY BOARD
Attest:	
	JEAN KACZMAREK, COUNTY CLERK



Procurement Review Comprehensive Checklist Procurement Services Division

This form must accompany all Purchase Order Requisitions

SECTION 1: DESCRIPTION						
General Tracking		Contract Terms				
FILE ID#: 25-2487	RFP, BID, QUOTE OR RENEWAL #: 22-112-FM	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: \$98.808.00			
COMMITTEE:	TARGET COMMITTEE DATE:	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL			
HUMAN SERVICES	10/21/2025	3 MONTHS	RENEWALS: \$325,808.00			
	CURRENT TERM TOTAL COST: \$69,000.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: THIRD RENEWAL			
Vendor Information		Department Information				
VENDOR: Valdes Supply	VENDOR #: 36338	DEPT:	DEPT CONTACT NAME:			
VENDOR CONTACT:	VENDOR CONTACT PHONE:	DuPage Care Center DEPT CONTACT PHONE #:	Vinit Patel/Annabel Leonida DEPT CONTACT EMAIL:			
Shahir Ahmed	847-657-6000	630-784-4273/630-784-4250	vinit.patel@dupagecounty.gov/ annabel.Leonida@dupagecounty.go			
VENDOR CONTACT EMAIL: VENDOR WEBSITE:		V V				
shahir.ahmed@valdessupply.com		DEPT REQ #: - 7541				

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 for restroom tissue, paper towels and facial tissue (group 2), as needed for the DuPage Care Center, for the period December 1, 2025 through November 30, 2026, for a contract total not to exceed \$69,000.00, under bid renewal #22-112-FM, third and final optional renewal.

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

Paper towels and facial tissue are necessary supplies in providing care to the residents of the DPCC. The nurses keep a supply of these products on their medication carts to be used in the administration of medications. Residents are provided with facial tissues to keep at their bedside for personal use. Hard roll towels and restroom tissue are necessary to be provided in all of the washrooms to meet IDPH Health and safety standards for infection control.

	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 Informat	ion			
Send	Purchase Order To:	Send Invoices To:				
endor: Vendor#: Dept:			Division:			
Valdes Supply	36388	DuPage Care Center	Environmental Concerns			
Attn:	Email:	Attn:	Email:			
Shahir Ahmed	shahir.ahmed@valdessupply.com	Vinit Patel	vinit.patel@dupagecounty.gov			
Address:	City:	Address:	City:			
667 Chaddwick Drive	Wheeling	400 N. County Farm Road	Wheaton			
State:	Zip:	State:	Zip:			
IL	60090	IL	60187			
Phone:	Fax:	Phone:	Fax:			
847-657-6000		630-784-4273				
Se	end Payments To:	Ship to:				
Vendor:	Vendor#:	Dept:	Division:			
Valdes Supply	36388	DuPage Care Center				
Attn:	Email:	Attn:	Email:			
Shahir Ahmed	shahir.ahmed@valdessupply.com		vinit.patel@dupagecounty.gov			
Address:	City:	Address:	City:			
667 Chaddwick Drive	Wheeling	400 N. County Farm Road	Wheaton			
State:	Zip:	State:	Zip:			
IL	60090	IL	60187			
Phone:	Fax:	Phone:	Fax:			
847-657-6000		630-784-4273				
	Shipping	Contract Dates				
Payment Terms:	FOB:	Contract Start Date (PO25):	Contract End Date (PO25):			
PER 50 ILCS 505/1	Destination	December 1, 2025	November 30, 2026			

					Purchas	se Requis	ition Lin	e Details			
LN	Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	EA		Restroom tissue & hard roll towels for Environmental Services	FY26	1200	2035	52280		60,000.00	60,000.00
2	1	EA		Facial Tissue, multi fold paper towels & perforated roll towels for the Nursing Department	FY26	1200	2050	52200		9,000.00	9,000.00
FY is required, ensure the correct FY is selected. Requisition Total						\$ 69,000.00					

	Comments				
HEADER COMMENTS	Provide comments for P020 and P025. Recommendation for the approval for restroom tissue, paper towels and facial tissue (group 2), as needed for the DuPage Care Center, for the period December 1, 2025 through November 30, 2026, for a contract total not to exceed \$69,000.00, under bid renewal #22-112-FM, third and final optional renewal.				
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. October 21, 2025 Human Services Committee October 28, 2025 County Board				
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB.				



The County of DuPage Finance Department Procurement Division, Room 3-400 421 North County Farm Road Wheaton, Illinois 60187

CONTRACT RENEWAL AGREEMENT

This contract, made and entered into by The County of DuPage, 421 North County Farm Road, Wheaton, Illinois, 60187, hereinafter called the "COUNTY" and Valdes LLC dba Valdes Supply located at 667 Chaddick Drive, Wheeling, IL 60090, hereinafter called the "CONTRACTOR", witnesseth;

The COUNTY and the CONTRACTOR have previously entered into a Contract, pursuant to Bid #22-112-FM which became effective on 12/1/2022 and which will expire 11/30/2025. The contract is subject to the third and final option to renew for a twelve (12) month period.

The contract renewal shall be effective on the date of last signature and shall terminate on 11/30/2026.

The parties now agree to renew said agreement, upon the same terms as previously agreed to, as specified in the original contract.

THE COUNTY OF DUPAGE	CONTRACTOR
SIGNATURE	SIGNATURE
Sara Rogers	Shahir Ahmed
PRINTED NAME	PRINTED NAME
Buyer I	President
PRINTED TITLE	PRINTED TITLE
	09/25/2025
DATE	DATE



THE COUNTY OF DUPAGE FINANCE - PROCUREMENT FURNISH & DELIVER PAPER PRODUCTS (RESTROOM TISSUE, PAPER TOWELS, ETC.) 22-112-FM BID TABULATION

																1	
				All America	n Paper Co.	Central Pol	y Bag Corp.	Garvey's Of	fice Products	Lapo	ort Inc.	Malor & Co	ompany Inc.	Standard	d Company	Valde	es LLC
NO.	ITEM	UOM	QTY	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE
Item A	A - Conventional Size Restroom Tissue																
1	SCA Tork #TM1616 500 shts/rl, 96 rls/cs, 4.00" length sheet size	cs	1,800					\$ 55.00	\$ 99,000.00			\$ 59.81	\$ 107,658.00	\$ 44.14	\$ 79,452.00		
2	Cascades North River #4064 500 shts/rl, 96 rls/cs, 4.00" length sheet size	cs	2,105														
3	Bedford Paper #SBT-503 500 shts/rl, 96 rls/cs, 3.75" length sheet size	cs	1,595														
4	Bedford Paper #SBT-501 500 shts/rl, 96 rls/cs, 3.50" length sheet size	cs	1,900													\$ 39.41	\$ 74,879.00
	Other: LaPort - Kruger 0575 96/500 2-ply All American Paper Co GJO2550096 Central Poly Bag Corp Resolute #235 4.4:x3.5", 2 ply, 500 sheets, 96 rolls/case	cs	1,595	\$ 50.60	\$ 80,707.00	\$ 60.00	\$ 95,700.00			\$ 39.44	\$ 62,906.80						
Item B	3 - 9" Jumbo Junior Size Restroom Tissue																
6	Tork USA #TJ0922A 1000'/rl, 12 rls/cs, 3.50" length sheet size	cs	590					\$ 43.00	\$ 25,370.00			\$ 49.00	\$ 28,910.00				
7	Kruger Products Embassy #05620 1000'/rl, 8 rls/cs 3.50" length sheet size	cs	880														
8	Kimberly Clark/Scott Essential #07805 1000'/rl, 12 rls/cs 3.55" length sheet size	cs	590														
9	Cascades North River #4097 1000'/rl, 12 rls/cs 3.50" length sheet size	cs	590														
10	Bedford Paper #JRT-404 1000'/rl, 12 rls/cs 3.30" length sheet size	cs	590							\$ 25.98	\$ 15,328.20			\$ 32.56	\$ 19,210.40	\$ 25.08	\$ 14,797.20
11	Other: All American Paper Co GJO2510012 Central Poly Bag Corp Resolute #700, 3.4'x1000' 2 ply, G, 12 rolls/cs	cs	590	\$ 36.45	\$ 21,505.50	\$ 29.99	\$ 17,694.10										

				All Ar	nericar	n Paper Co.	Cer	ntral Poly	y Bag Corp.	Ga	arvey's Of	fice Products	La	port Inc.		Malor & Co	ompany Inc.	Stan	ard Company	Valo	ies LLC
NO.	ITEM	UOM	QTY	PRIC	E	EXTENDED PRICE	PRI	ICE	EXTENDED PRICE	Р	RICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	-	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE
Item C	- Multi-Fold Paper Towels						•						•	•	•				•		•
12	Tork USA Premium #MB540A / 420580 250 towels/pk,12 pks/cs, 9" x 10"sheet	cs	2,838	\$	34.30	\$ 97,343.40				\$	33.00	\$ 93,654.00			\$	49.00	\$ 139,062.00	\$ 23	31 \$ 66,153.78		
13	Kruger Embassy Premium #01540 334 towels/pk, 12 pks/cs, 9" x 9.5" sheet	cs	2,838																		
14	Kruger White Swan Classic #01920 334 towels/pk, 12 pks/cs, 9" x 9.5" sheet	CS	2,838										\$ 21.6	5 \$ 61,442.70)						
15	Bedford Paper #MF101 250 towels/pk, 16 pks/cs, 9.25" x 9.50" sheet	cs	2,838																	\$ 21.00	\$ 59,598.00
16	Cascades North River #1342 250 towels/pk, 16 pks/cs, 9.10" x 9.50"	cs	2,838																		
17	Scott Essential #01840 250 towels/pk,16 pks/cs, 9.20" x 9.40"	CS	2,838																		
18	Other: Central Poly Bag Corp Maral #P2003, 9.25"x9,5" 16/250/cs (4000)	CS	2,838				\$	34.00	\$ 96,492.00												
Item D	- Conventional Size Restroom Tissue								1			•	•	•					•		•
19	Wausau Bay West Eco Soft #54000 500 shts/rl, 96 rls/cs, 4.00" length sheet size	cs	712							\$	55.00	\$ 39,160.00			\$	59.00	\$ 42,008.00				
20	SCA Tork #TM1616 500 shts/rl, 96 rls/cs, 4.00" length sheet size	cs	712															\$ 44	14 \$ 31,427.68		
21	Cascades North River #4064 500 shts/rl, 96 rls/cs, 4.00" length sheet size	cs	712																		
22	Atlas #A250 500 shts/rl, 96 rls/cs, 4.50" sheet size	cs	634																		
23	Bedford Paper #SBT-501 500 shts/rl, 96 rls/cs, 3.50" length sheet size	cs	712																	\$ 39.4	\$ 28,059.92
24	Other: Laport Inc Kruger 0575 96/500 2-ply All American Paper Co GJ02550096 Central Poly Bag Corp Resolute #235, 4.4"x3.5", 2 ply, 500 sheets, 96 rolls/cs - Multi-Fold Paper Towels	cs	712	\$	50.60	\$ 36,027.20	\$	60.00	\$ 42,720.00				\$ 39.4	4 \$ 28,081.28	3						
ILEIII E	Georgia Pacific Blue Basic (Previously Acclaim)																				
25	#20204 250 towels/pk,16 pks/cs, 9.4" x 9.2" sheet	cs	194												\$	29.21	\$ 5,666.74				
26	Kimberly Clark Scott Essential #01804 250 towels/pk, 16 pks/cs, 9.2" x9.4" sheet	cs	194																		
27	Tork USA Premium #MB540A / 420580 250 towels/pk,12 pks/cs, 9" x 10"sheet	cs	194	\$:	34.30	\$ 6,654.20				\$	33.00	\$ 6,402.00						\$ 28	31 \$ 5,492.14		
28	Cascades Décor #1759 250 towels/pk,16 pks/cs, 9 " x 9.5" sheet	cs	194																		
29	Tork USA #CB530 250 towels/pk, 16 pks/cs, 10.13" x 12.75" sheet	cs	194																		
30	Bedford Paper #MF101 250 towels/pk, 16 pks/cs, 9.25" x 9.50" sheet	CS	194																	\$ 21.00	\$ 4,074.00
31	Other: Laport Inc Kruger 01920 MF White 4,000/cs Central Poly Bag Corp Marcal #P2003, 9,5" x 9.25" 16/250/cs (4000)	cs	194				\$	34.00	\$ 6,596.00				\$ 21.6	5 \$ 4,200.10)						

				All A	mericar	n Paper Co.	Central Pol	y Bag Corp.	Garvey's O	ffice Products	Lapo	ort Inc.	Malor & 0	Company Inc.	Standard	Company	Vald	es LLC
NO.	ITEM	UOM	QTY	PRIC	CE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE
Item F	- Perforated Roll Towels		l			PRICE		PRICE		PRICE		PRICE		PRICE		PRICE		PRICE
32	Wausau Bay West Eco Soft #41090 90 shts/rl, 30 rls/cs,11" x 9" sheet	cs	166										\$ 70.00	\$ 11,620.00				
33	Georgia Pacific Blue (formally Preference) #27385 85 shts/rl, 20 rls/cs, 11" x 8.8" sheet	cs	270															
34	Kimberly Clark Scott #41482 128 shts/rl, 20 rls/cs, 11" x 8.75"	CS	180															
35	Tork USA Universal #HB1995 210 shts/rl, 12 rls/cs, 11" x 9" sheet	CS	222						\$ 39.00	\$ 8,658.00								
36	Kruger White Swan #01656 80 shts/rl, 30 rls/cs, 10.9" x 8.6" sheet	cs	184								\$ 23.23	\$ 4,274.32						
37	Bedford Paper #HHT085 85 sheets/rl, 30 rls.cs, 8" x 11" sheet	cs	194												\$ 34.38	\$ 6,669.72	\$ 22.49	\$ 4,363.06
38	Other: All American Paper Co GJO25012 Central Poly Bag Corp Marcal #06350, 11x8 2 ply, 85 sheets, 30/cs	cs	194	\$	32.70	\$ 6,343.80	\$ 36.00	\$ 6,984.00										
Item G	- Boxed Facial Tissue (Large)	1	1				1		1		I	1			Т			
39	Marcal Sani-Hanks #682 40 shts/bx, 200 bx/cs, 7.5" sheet size	cs	96				No	Bid	N	o Bid			\$ 39.00	\$ 3,744.00	No	o Bid		
40	Kruger Products White Swan #08500 80 shts/bx, 135 bx/cs, 8.0" sheet size	cs	72				No	Bid	N	o Bid	\$ 72.45	\$ 5,216.40			No	o Bid		
41	Sani Facial Tissue #MoreX 40 shts/bx, 200 bx/cs, 7.88" sheet size	cs	96				No	Bid	N	o Bid					No	o Bid		
42	Other: Valdes - Sani Facial Tissue #MoreX 40 shts/bx All American Paper Co GPCW 548550	cs	80	\$	40.30	\$ 3,224.00	No	Bid	N	o Bid					Ne	o Bid	\$ 45.00	\$ 3,600.00
Item H	- Boxed Facial Tissue (Large)			1														
43	Wausau Bay West Eco Soft #13000 100 shts/bx, 30 bxs/cs, 8" sheet size	cs	24						\$ 29.00	\$ 696.00			\$ 50.00	\$ 1,200.00	No	o Bid		
44	Georgia-Pacific Preference #48100 100 shts/bx, 30 bxs/cs, 8" sheet size	cs	24												No	o Bid		
45	Kruger Products White Swan #08301 100 shts/bx, 30 bxs/cs, 7.4" sheet size	cs	24								\$ 21.50	\$ 516.00			No	o Bid		
46	Cascades North River #4082 100 shts/bx, 30 bxs/cs, 7.5" sheet	CS	24												No	o Bid		
47	Georgia Pacific #GP47410 100 sheets/bx, 30 bxs/cs, 8.00" sheet	cs	24												No	o Bid	\$ 19.50	\$ 468.00
48	Other: All American Paper Co MRC2930CT Central Poly Bag Corp Central Poly# 2930 8.5x7.5;, 2 ply, 100/bx, 30/cs	cs	24	\$	21.00	\$ 504.00	\$ 39.00	\$ 936.00										
item I -	- Hard Roll Paper Towels	I	1											1				
49	Kleenex #11090 White 1 ply, 8" x 600', 6 rls/cs, 3,600 ft/cs	cs	3,400				No	Bid	\$ 75.00	\$ 255,000.00			\$ 49.00	\$ 166,600.00				
50	Georgia Pacific #280-55 Pref Ultra White 1 ply, 7.87" x 600', 12 rls/cs, 7,200 ft/cs	cs	1,728				No	Bid										
51	Kruger Embassy Supreme #01240 White 1 ply, 8" x 600', 6 rls/cs, 3,600 ft/cs	CS	3,400				No	Bid										
52	Bedford Paper #HWTW552 White 1 ply, 7.81" x 800', 6 rls/cs, 4,800ft/cs	CS	3,400	\$	48.30	\$ 164,220.00	No	Bid			\$ 29.59	\$ 100,606.00			\$ 33.82	\$ 114,988.00	\$ 26.75	\$ 90,950.00
						\$ 416,529.10		\$ 267,122.10		\$ 527,940.00		\$ 282,571.80		\$ 506,468.74		\$ 323,393.72		\$ 280,789.18

NOTES
1. Contractor shall provide only one (1) response per item.

Bid Opening 10/4/2022 @ 2:30 PM	DW, NE, YQ
Invitations Sent	24
Total Vendors Requesting Documents	0
Total Bid Responses	7

SECTION 7 - BID FORM PRICING

Contractor shall provide only one (1) response per Item. For example, Item A – Conventional Size Restroom response shall only include a response for either A-1, A-2, A-3, etc. No multiple bids per item are allowed.

GROUP 1 - EAST CAMPUS

Item A - Conventional Size Restroom Tissue

NO.	ITEM	UOM	QTY	PRICE	EXTENDED PR	RICE
1	SCA Tork #TM1616 500 sheets/rl, 96 rls/cs, 3.75" length sheet size	cs	1,800		\$	-
			OR			
2	Cascades North River #4064 500 sheets/rl, 96 rls/cs, 4.00" length sheet size	cs	2,105		\$	-
		•	OR			
3	Bedford Paper #SBT-503 500 sheets/rl, 96 rls/cs, 3.75" length sheet size	cs	1,595		\$	-
			OR			
4	Bedford Paper #SBT-501 500 sheets/rl, 96 rls/cs, 3.50" length sheet size	cs	1,900	39.41	\$ 74,879.	υυ ⁻
			OR			
5	Or Equal (Provide Description)	cs	1,595		\$	-
	Item A - C	onventio	nal Size Restr	oom Tissue Subtotal	\$74,879.0	υ -
					PERCENTAG	3E
	Provide Percentage of Rec	ycled Po	st Consumer Co	ontent of your Product	65	%
	Provide Percent	age of Re	cycled Fiber Co	ontent of your Product	100	%

NO.	ITEM	UOM	QTY	PRICE	EXTENDED P	RICE
1	Tork USA #TJ0922A 1000'/rl, 12 rls/cs, 3.50" length sheet size	cs	590		\$	-
2	Kruger Products Embassy #05620 1000'/rl, 8 rls/cs 3.50" length sheet size	cs	880		\$	
3	Kimberly Clark/Scott Essential #07805 1000'/rl, 12 rls/cs 3.55" length sheet size	cs	590		\$	
4	Cascades North River #4097 1000'/rl, 12 rls/cs 3.50" length sheet size	cs	590		\$	
5	Bedford Paper #JRT-404 1000'/rl, 12 rls/cs 3.30" length sheet size	cs	590	25.08	\$ 14,797.	25
6	Or Equal (Provide Description)	cs	590		\$14,797.7	D .
	Item B - 9" Ju	ımbo Jun	ior Size Rest	room Tissue Subtotal	\$	
					PERCENTAC	GE
	Provide Percentage of Rec	cycled Pos	st Consumer C	Content of your Product	65	(
				Content of your Product	1110	

NO.	ITEM	UOM	QTY	PRICE	EXTENDED F	DIC
1	Tork USA Premium #MB540A 250 towels/pk,16 pks/cs, 9" x 9.5" sheet	CS	2,838	TRICE	\$	KIC
	Too					-
2	Kruger Embassy Premium #01540 334 towels/pk, 12 pks/cs, 9" x 9.5" sheet	cs	2,838		\$	
						- 8
3	Kruger White Swan Classic #01920 334 towels/pk, 12 pks/cs, 9" x 9.5" sheet	CS	2,838		\$	
4	Bedford Paper #MF101 250 towels/pk, 16 pks/cs, 9.25" x 9.50" sheet	CS	2,838	21.00	\$ 59598	,or
				<u> </u>		
5	Cascades North River #1342 250 towels/pk, 16 pks/cs, 9.10" x 9.50"	cs	2,838		\$	
6	Scott Essential #01840 250 towels/pk,16 pks/cs, 9.20" x 9.40"	CS	2,838		\$	
7	Or Equal (Provide Description)	cs	2,838		\$	
		Item C	- Multi-Fold P	aper Towels Subtotal	\$ 595 9 84	00
					PERCENTA	GF
	Provide Percentage of Rec	ycled Pos	st Consumer C	Content of your Product	65	
	Provide Percenta	age of Re	cycled Eibor C	Content of your Product	100	-

GROUP 2 - WEST CAMPUS

		INOUI Z	- WEST CAMP	13	
NO.	ITEM	UOM	QTY	PRICE	EXTENDED PRICE
tem D -	Conventional Size Restroom Tissue	9			
1	Wausau Bay West Eco Soft #54000 500 sheets/rl, 96 rls/cs, 4.00" length sheet size	cs	712		\$ -
2	SCA Tork #TM1616 500 shts/rl, 96 rls/cs, 4.00" length sheet size	CS	712		\$ -
3	Cascades North River #4064 500 sheets/rl, 96 rls/cs, 4.00" length sheet size	CS	712		\$ -
4	Atlas #A250 500 sheets/rl, 96 rls/cs, 4.50" sheet size	CS	634		\$ -
5	Bedford Paper #SBT-501 500 sheets/rl, 96 rls/cs, 3.50" length sheet size	CS	712	39.41	\$ 28,059.92
					, o
6	Or Equal (Provide Description)	cs	712		\$28Y08VV2-
	Item D - 0	Conventi	ional Size Restr	oom Tissue Subtotal	\$ 28,059.92 -
					PERCENTAGE
	Provide Percentage of Re				65 9
	Provide Percen	tage of F	Recycled Fiber Co	ontent of your Product	(OP %

NO.	ITEM	UOM	QTY	PRICE	EXTENDED PR	RICE
1	Georgia Pacific Blue Basic (Previously Acclaim) #20204 250 towels/pk,16 pks/cs, 9.4" x 9.2" sheet	CS	194		\$	
132	Kimberly Clark Scott Essential					
2	#01804 250 towels/pk, 16 pks/cs, 9.2" x9.4" sheet	CS	194		\$	
		· · · · · · · · · · · · · · · · · · ·				
3	Tork USA Premium #MB540A / 420580 250 towels/pk,12 pks/cs, 9" x 10" sheet	cs	194		\$	
4	Cascades Décor #1759 250 towels/pk,16 pks/cs, 9" x 9.5" sheet	cs	194		\$	
		•				-
5	Tork USA #CB530 250 towels/pk, 16 pks/cs, 10.13" x 12.75" sheet	CS	194		\$	-
6	Bedford Paper #MF101 250 towels/pk, 16 pks/cs, 9.25" x 9.50" sheet	cs	194	21.00	\$ 4074.a	, -
	Sileet			2110	1 11.00	_
	Or Equal (Provide Description)					
7		CS	194		\$	-
		Item E	- Multi-Fold P	Paper Towels Subtotal	\$ 4074.00	-
					PERCENTAG	E
	Provide Percentage of Re	cycled Pos	st Consumer (Content of your Product	65	C
	Provide Percen	tage of Re	cycled Fiber C	Content of your Product	(00	C

NO.	ITEM	UOM	QTY	PRICE	EXTENDED P	DICE
1	Wausau Bay West Eco Soft #41090 90 sheets/rl, 30 rls/cs,11" x 9" sheet	CS	166		\$	·
2	Georgia Pacific Blue (formally Preference) #27385 85 sheets/rl, 20 rls/cs, 11" x 8.8" sheet	cs	270		\$	-
3	Kimberly Clark Scott #41482 128 sheets/rl, 20 rls/cs, 11" x 8.75"	CS	180		\$	
4	Tork USA Universal #HB1995 210 sheets/rl, 12 rls/cs, 11" x 9" sheet	CS	222		\$	
					L	
5	Kruger White Swan #01656 80 sheets/rl, 30 rls/cs, 10.9" x 8.6" sheet	CS	184		\$	
6	Bedford Paper #HHT085 85 sheets/rl, 30 rls.cs, 8" x 11" sheet	CS	194	22.49	\$ 4363.00	2 -
					.0 0,0	_
7	Or Equal (Provide Description)	cs	194		\$	_
		Item F	- Perforated	Roll Towels Subtotal	\$H2(2.0)	
					\$4363.06	
	Provide Percentage of De-	waled D	1.0		PERCENTAG	E
	Provide Percentage of Rec	ycled Pos	t Consumer (Content of your Product	65	%
	Provide Percent	age of Rec	cycled Fiber C	Content of your Product	100	%

NO.	ITEM	UOM	QTY	PRICE	EX	TENDED PR	≀ICI
1	Marcal Sani-Hanks #682 40 sheets/bx, 200 bx/cs, 7.5" sheet size	CS	96		\$		
			OR				
2	Kruger Products White Swan #08500 80 sheets/bx, 135 bx/cs, 8.0" sheet size	cs	72		\$		
ora access segm			OR				
3	Sani Facial Tissue #MoreX 40 sheets/bx, 200 bx/cs, 7.88" sheet size	cs	96		\$		
			OR				
4	Or Equal (Provide Description) Soni Paga (7:55 & (WOW)	cs	80	45.00	\$	3600	-
	2 pt while 40 1 BUX	tem G - Bo	xed Facial T	issue (Large) Subtotal	\$	3600 3600	
					Р	ERCENTAG	E
	Provide Percentage of Re	ecycled Po	st Consumer	Content of your Product		65	(
	Provide Percer	ntage of Re	cycled Fiber	Content of your Product		(00)	
m H -	Boxed Facial Tissue (Large)						
1	Wausau Bay West Eco Soft #13000 100 sheets/bx, 30 bxs/cs, 8" sheet size	cs	24		\$		-
			OR				
2	Georgia-Pacific Preference #48100 100 sheets/bx, 30 bxs/cs, 8" sheet size	cs	24		\$		-
			OR				
3	Kruger Products White Swan #08301 100 sheets/bx, 30 bxs/cs, 7.4" sheet size	CS	24		\$		_
			OR				
4	Cascades North River #4082 100 sheets/bx, 30 bxs/cs, 7.5" sheet	cs	24		\$		-
			OR				
5	Georgia Pacific #GP47410 100 sheets/bx, 30 bxs/cs, 8.00" sheet	cs	24	19.50	\$	468,00	-
		(OR			***************************************	
6	Or Equal (Provide Description)	cs	24		\$		-
	It	em H - Bo	xed Facial Ti	ssue (Large) Subtotal	\$	464.00	-
-55.55					PE	RCENTAGE	=
	Provide Percentage of Re	cycled Pos	t Consumer (Content of your Product		65	%
				Content of your Product		60	9/

NO.	ITEM	UOM	QTY	PRICE	EXTENDED I	PRICE
1	Kleenex #11090 White 1 ply, 8" x 600', 6 rls/cs, 3,600 ft/cs	cs	3,400		\$	
			OR			
2	Georgia Pacific #280-55 Pref Ultra White 1 ply, 7.87" x 600', 12 rls/cs, 7,200 ft/cs	cs	1,728		\$	-
			OR			
3	Kruger Embassy Supreme #01240 White 1 ply, 8" x 600', 6 rls/cs, 3,600 ft/cs	cs	3,400		\$	-
			OR			
4	Bedford Paper #HWTW552 White 1 ply, 7.81" x 800', 6 rls/cs, 4,800ft/cs	CS	3,400	26.75	40,95 \$ 88000	-
		Item	I - Hard Roll	Paper Towels Subtotal	\$ 86,000	90,95
					PERCENTA	
	Provide Percentage of Re	ecycled Po	st Consumer	Content of your Product	65	%
	Provide Percer	ntage of Re	ecycled Fiber	Content of your Product	100	%
				GRAND TOTAL	\$ 280,789.	ıē

SECTION 8 - BID FORM SIGNATURE PAGE

The Contractor agrees to provide the service, and/or supplies as described in this solicitation and subject, without limitation, to all specifications, terms, and conditions herein contained. Bidder shall acknowledge receipt of each addendum issued in the space provided on the bid form.

Presidet

(Signature and Title)		
		CORPORATE SEAL (If available)
BID MUST BE SIGNED A	ND NOTARIZED (WITH SEAL) FO	OR CONSIDERATION
Subscribed and sworp to before me this 3	day of _OCTUBE R	AD, 20 <u>2</u>
Public)	OFFICIAL SEAL MARIA E ROMERO NOTARY PUBLIC, STATE OF ILLINOIS My Commission Expires Dec. 17, 2022	2/17/2025

Signature on File

SEAL

SECTION 9 - MANDATORY FORM FURNISH & DELIVER PAPER PRODUCTS (RESTROOM TISSUE, PAPER TOWELS, ETC.) 22-112-FM

(PLEASE TYPE OR	PRINT TH	E FOLLOW	ING INFOR	AOITAM	1)		
Full Name of Bidder	Valdes	LLC				1		
Main Business Address	667 Chad	dick [Dr.			316		
City, State, Zip Code	Wheeling,	IL, 61	0000	0.199				
Telephone Number	847-657-6		Email Address	Shahir	.ahma	00	aldes:	supply.
Bid Contact Person	Shahir	Ahmed	7					
The undersigned certifies that	he is:				.48 29			
the Owner/Sole Proprietor	a Member au sign on beha Partnership	alf of the		rporation	of the		Venture	of the Joi
Herein after called the Bidder	9	rs of the Pa	artnership c	r Officers of	f the Cor	poration	are as fo	llows:
Shahir Ah (President or Par	med		-		(\ /: - D			
(Flesidelit of Par	ner)				(Vice-P	residen	t or Partne	r)
(Secretary or Par	tner)		0.00		(Treasu	rer or P	Partner)	_
hat this bid is made without or orms of agreement and the co of the Procurement Officer, I locuments referred to or ment	ontract specifications DuPage County, 42	s for the ab 21 North C	ove design County Fari	ated purcha n Road, W	se, all of heaton,	which Illinois	are on file 60187, a	in the offic
Addenda No. <u>I</u> ,,	, and issued th	ereto.						
Further, the undersigned propound other means of constructing pecified or referred to in the c	on, including transp	ortation se	rvices nece	essary to fu	rnish all	/ machi the ma	nery, tools terials and	, apparatus I equipmer
Further, the undersigned certif he Bidder and in accordance llinois and that this Certificatio	with the Partnership	Agreemer	nt or by-law	s of the Co	rporation	tification , and th	n/affidavit ne laws of	on behalf o the State o
Further, the undersigned certificither 720 Illinois Compiled Sta LCS 130/1 et seq., the Illinois	atutes 5/33 E-3 or 5	/33 E-4, bid	I from biddi I rigging or	ng on this cobid-rotating	ontract a , or as a	s a resu result o	ult of a viol f a violatio	ation of n of 820
he undersigned certifies that I ubmitting this bid, and that the	ne has examined an statements contain	d carefully ned herein a	prepared thare true and	nis bid and h I correct.	nas chec	ked the	same in d	etail before
a Corporation, the undersign vere properly adopted by the E eld and have not been repeal opprovide a copy of the corpora	Board of Directors of ed nor modified, and	the Corpo that the sa	ration at a r ame remain	neeting of s in full force	aid Boar and effe	d of Dir	ectors duly der may be	y called and e requested
urther, the Bidder certifies that ontract to the parties listed in								

credit at its option.

Finally, the Bidder, if awarded the contract, agrees to do all other things required by the contract documents, and that he will take in full payment therefore the sums set forth in the bidding schedule (subject to unit quantity adjustments based upon actual usage).

CONTRACT ADMINISTRATION INFORMATION:

CORRESPONDENCE TO CONTRACTOR:		REMIT TO CONTRACTOR:		
NAME	Valdes LLC	NAME	Valdes LLC	
CONTACT	Shahir Ahmed	CONTACT	Shahir Ahmed	
ADDRESS	667 Chaddick Dr.	ADDRESS	667 Chaddick Dr.	
CITY ST ZIP	Wheeling, IL, 60090	CITY ST ZIP	Wheeling, IL, 60090	
TX	847-657-6000	TX	847-657-6000	
FX	MA	FX	NA	
EMAIL	Shahir, Ahmad @ Valdessupply	,EMAIL .	Shahir. Ahmed@	
	com		Valdessupply.com	
COUNTY BILL	TO INFORMATION:	COUNTY SHIP TO INFORMATION:		
EAST CAMPU	S	EAST CAMPU	S	
DuPage County	y Facilities Management	DuPage Count	y	
421 North Cour	nty Farm Road	Various Location	ons	
Wheaton, IL 60	187	Wheaton, IL 60	187	
TX: (630) 407-	5700	TX: (630) 407-5705		
EMAIL: FMAcco	ountsPayable@dupageco.org	EMAIL: mary.ventrella@dupageco.org		
WEST CAMPU	S	WEST CAMPU	S	
DuPage County Care Center		DuPage County Care Center		
400 North County Farm Road		421 North County Farm Road		
Wheaton, IL 60187		Wheaton, IL 60187		
TX: (630) 784-	4273	TX: (630) 784-4273		
		EMAIL: vinit.pa	tel@dupageco.org	

ALL MATERIALS MUST BE BID AND SHIPPED F.O.B. DELIVERED (FREIGHT INCLUDED IN PRICE)



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	22-112-FM
COMPANY NAME:	Valdes LLC
CONTACT PERSON:	Shahir Ahmed
CONTACT EMAIL:	shahir.ahmed@valdessupply.com

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

Has the Bidder made contributions as described above?	
☐ Yes	
XI No	

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

Yes

☑ No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

Ethics | DuPage Co, IL

The full text of the County's Procurement Ordinance is available at:

ARTICLE VI. - PROCUREMENT | Code of Ordinances | DuPage County, IL | Municode Library

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Printed	Shahir Ahmed Name:	Signati	ure:
Title:	President	Date:	09/25/2025

Care Center Requisition \$30,000 and Over



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: HS-P-0052-25 Agenda Date: 10/21/2025 Agenda #: 7.D.

AWARDING RESOLUTION ISSUED TO AIRGAS USA, LLC TO PROVIDE LIQUID PORTABLE OXYGEN FOR THE RESIDENTS FOR THE DUPAGE CARE CENTER (CONTRACT TOTAL AMOUNT \$50,000.00)

WHEREAS, bids have been taken and evaluated in accordance with County Board policy; and

WHEREAS, the Human Services Committee recommends County Board approval for the issuance of a contract to AirGas USA, LLC, to provide liquid portable oxygen, for the period of December 1, 2025 through November 30, 2026, for the DuPage Care Center.

NOW, THEREFORE BE IT RESOLVED, that said contract is to provide liquid portable oxygen, for the period of December 1, 2025 through November 30, 2026 for the DuPage Care Center per bid renewal #22-105-DCC, be, and it is hereby approved for the issuance of a contract purchase order by the Procurement Division to AirGas USA, LLC, Post Office Box 73445, Chicago, Illinois 60673-4445, for a contract total amount of \$50,000.00.

Enacted and approved this 28th day of October, 2025 at Wheaton, Illinois.

	DEBORAH A. CONROY, CHAIR
	DU PAGE COUNTY BOARD
Attest:	
	JEAN KACZMAREK, COUNTY CLERK



Procurement Review Comprehensive Checklist Procurement Services Division

This form must accompany all Purchase Order Requisitions

SECTION 1: DESCRIPTION				
General Tracking		Contract Terms		
FILE ID#: 25-2490	RFP, BID, QUOTE OR RENEWAL #: 22-105-DCC	INITIAL TERM WITH RENEWALS:	INITIAL TERM TOTAL COST:	
		1 YR + 3 X 1 YR TERM PERIODS	\$35,000.00	
COMMITTEE:	TARGET COMMITTEE DATE:	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS:	
HUMAN SERVICES	10/21/2025	3 MONTHS	\$185,000.00	
	CURRENT TERM TOTAL COST:	MAX LENGTH WITH ALL RENEWALS:	CURRENT TERM PERIOD:	
	\$50,000.00	FOUR YEARS	SECOND RENEWAL	
Vendor Information		Department Information		
VENDOR:	VENDOR #:	DEPT:	DEPT CONTACT NAME:	
AirGas USA, LLC	10674	DuPage Care Center	Vinit Patel	
VENDOR CONTACT:	VENDOR CONTACT PHONE:	DEPT CONTACT PHONE #:	DEPT CONTACT EMAIL:	
Joel Thoms	630-231-7760	630-784-4273	vinit.patel@dupagecounty.gov	
VENDOR CONTACT EMAIL:	VENDOR WEBSITE:	DEPT REQ #:		
joel.thoms@airgas.com		7540		

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 purchase order for liquid portable oxygen for the residents at the DuPage Care Center, for the period December 1, 2025 through November 30, 2026, for a contract total amount not to exceed \$50,000.00, under bid renewal #22-105-DCC, third and final optional renewal.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Residents of the DuPage Care Center, with compromised breathing abilities often times are confined to their room for breathing treatments. Through the use of portable liquid oxygen, those residents are allowed greater independence and a greater quality of life.

	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: Purcha	se Requisition Informat	ion	
Send Pu	rchase Order To:	Seno	l Invoices To:	
Vendor:	Vendor#:	Dept:	Division:	
AirGas USA, LLC	10674	DuPage Care Center	Environmental Concerns	
Attn:	Email:	Attn:	Email:	
Joel Thoms	joel.thoms@airgas.com	Vinit Patel	vinit.patel@dupagecounty.gov	
Address:	City:	Address:	City:	
PO Box 73445	Chicago	400 N. County Farm Road	Wheaton	
State:	Zip:	State:	Zip:	
IL	60673-4445	IL	60187	
Phone:	Fax:	Phone:	Fax:	
630-231-7760		630-784-4273		
Send Payments To:		Ship to:		
Vendor:	Vendor#:	Dept:	Division:	
AirGas USA, LLC	10674	DuPage Care Center		
Attn:	Email:	Attn:	Email:	
Joel Thoms	joel.thoms@airgas.com		dupagecounty.gov	
Address:	City:	Address:	City:	
1250 W. Washington Street	West Chicago	400 N. County Farm Road	Wheaton	
State:	Zip:	State:	Zip:	
IL	60185	IL	60187	
Phone:	Fax:	Phone:	Fax:	
630-231-7760		630-784-4273		
	Shipping	Cor	tract Dates	
Payment Terms:	FOB:	Contract Start Date (PO25):	Contract End Date (PO25):	
PER 50 ILCS 505/1	Destination	December 1, 2025 November 30, 2026		

	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		Liquid Portable Oxygen	FY25	1200	2075	52320		35,000.00	35,000.00
2	1	EA		monthly repair costs flat rate \$1,250	FY25	1200	2075	53370		15,000.00	15,000.00
FY is required, ensure the correct FY is selected. Requisition Total						\$ 50,000.00					

	Comments			
HEADER COMMENTS	Provide comments for P020 and P025. Recommendation for the approval of a contract purchase order for liquid portable oxygen for the residents at the DuPage Care Center, for the period December 1, 2025 through November 30, 2026, for a contract total amount not to exceed \$50,000.00, under bid renewal #22-105-DCC, third and final optional renewal.			
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. October 21, 2025 Human Services Committee October 28,2025 County Board			
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 County of DuPage
Finance Department
Procurement Division, Room 3-400
421 North County Farm Road
Wheaton, Illinois 60187

CONTRACT RENEWAL AGREEMENT

This contract, made and entered into by The County of DuPage, 421 North County Farm Road, Wheaton, Illinois, 60187, hereinafter called the "COUNTY" and Airgas, Inc. dba Airgas USA, LLC, located at 1250 W. Washington St., West Chicago, IL 60185, hereinafter called the "CONTRACTOR", witnesseth;

The COUNTY and the CONTRACTOR have previously entered into a Contract, pursuant to Bid #22-105-DCC which became effective on 12/1/2022 and which will expire 11/30/2025. The contract is subject to the third of three options to renew for a twelve (12) month period.

The contract renewal shall be effective on the date of last signature and shall terminate on 11/30/2026.

The parties now agree to renew said agreement, upon the same terms as previously agreed to, as specified in the original contract.

THE COUNTY OF DUPAGE	CONTRACTOR
	Signature on File
SIGNATURE	SIGNATURE
Brian Rovik PRINTED NAME	Migan Jack- PRINTED NAME
Buyer I PRINTED TITLE	VP Health Care
DATE	9/18/2025



THE COUNTY OF DUPAGE FINANCE - PROCUREMENT LIQUID PORTABLE OXYGEN 22-105-DCC BID TABULATION

AIRGAS USA LLC NO. ITEM UOM QTY PRICE EXTENDED PRICE LIQUID OXYGEN LB 80,000 \$ 0.65 52,000.00 REPAIR OF CANISTERS EΑ \$ 800.00 800.00 GRAND TOTAL \$ 52,800.00

NOTES 1. AIRGAS LINE TWO EXTENDED PRICE CORRECTED DUE TO MATH ERROR.

Bid Opening 10/12/22 @ 2:30 PM	NE, DW
Invitations Sent	5
Total Vendors Requesting Documents	2
Total Bid Responses	1

SECTION 7 - BID FORM PRICING

Quantities are estimated annual usage amounts.

EMERGENCY DELIVERIES: (Do not include in Grand Total)

NO	ITEM	UOM	QTY	PRICE	EXTENDED PRICE
1	LIQUID OXYGEN	LB	80,000	\$ 0.65	\$ 52,000.00
2	REPAIR OF CANISTERS	EA	1	\$ 800.00	\$ 16,000.00
				GRAND TOTAL	\$ 68,000.00

Emergency De	livery Charges, if and when i	required, will be prices as follows:
Liquid Medical	Oxygen Delivery, Evenings,	Weekends and Holidays: \$ 1.05 Per Liquid Oxygen Pound
DELIVERY: _	1-2	_ DAYS AFTER RECEIPT OF ORDER
	This depends	on When order is communicated with Airgus the current system in place.

THE COUNTY OF DUPAGE LIQUID PORTABLE OXYGEN 22-105 DCG Page 17 of 29

SECTION 8 - BID FORM SIGNATURE PAGE

The Contractor agrees to provide the service, and/or supplies as described in this solicitation and subject, without limitation, to all specifications, terms, and conditions herein contained. Bidder shall acknowledge receipt of each addendum issued in the space provided on the bid form.

Signature on File X (Signature and Title)	theure Specialist		
		CORPORATE SEAL (If available)	
BID MUST BE SIGNE	D AND NOTARIZED (WITH SEAL)	FOR CONSIDERATION	
Subscribed and sworn to before me this	day of	AD, 20	
(Notary Public)	My Commission Expires:		
	SEAL		
•			
· · · · · · · · · · · · · · · · · · ·	THE COUNTY OF DUPAGE LIQUID PORTABLE OXYGEN 22-105-DCC	•	

SECTION 9 - MANDATORY FORM LIQUID PORTABLE OXYGEN 22-105-DCC

(PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION)

Full Name of Bidder Main Business Address W Wishington City, State, Zip Code Telephone Number Email Jul. Thems Dairges. Lom Address **Bid Contact Person** Thoms The undersigned certifies that he is: the Owner/Sole a Member authorized to Officer a Member of the Joint an sign on behalf of the Venture Proprietor Corporation Partnership Herein after called the Bidder and that the members of the Partnersh Vice-President or Partner) (President or Partner) (Treasurer or Partner) (Secretary or Partner) Further, the undersigned declares that the only person or parties interested in this bid as principals are those named herein; that this bid is made without collusion with any other person, firm or corporation; that he has fully examined the proposed forms of agreement and the contract specifications for the above designated purchase, all of which are on file in the office of the Procurement Officer, DuPage County, 421 North County Farm Road, Wheaton, Illinois 60187, and all other documents referred to or mentioned in the contract documents, specifications and attached exhibits, including _, and ___ issued thereto. Addenda No. ___. Further, the undersigned proposes and agrees, if this bid is accepted, to provide all necessary machinery, tools, apparatus, and other means of construction, including transportation services necessary to furnish all the materials and equipment specified or referred to in the contract documents in the manner and time therein prescribed. Further, the undersigned certifies and warrants that he is duly authorized to execute this certification/affidavit on behalf of the Bidder and in accordance with the Partnership Agreement or by-laws of the Corporation, and the laws of the State of Illinois and that this Certification is binding upon the Bidder and is true and accurate. Further, the undersigned certifies that the Bidder is not barred from bidding on this contract as a result of a violation of either 720 Illinois Compiled Statutes 5/33 E-3 or 5/33 E-4, bid rigging or bid-rotating, or as a result of a violation of 820 ILCS 130/1 et seq., the Illinois Prevailing Wage Act. The undersigned certifies that he has examined and carefully prepared this bid and has checked the same in detail before submitting this bid, and that the statements contained herein are true and correct. If a Corporation, the undersigned, further certifies that the recitals and resolutions attached hereto and made a part hereof were properly adopted by the Board of Directors of the Corporation at a meeting of said Board of Directors duly called and held and have not been repealed nor modified, and that the same remain in full force and effect. (Bidder may be requested to provide a copy of the corporate resolution granting the individual executing the contract documents authority to do so.) Further, the Bidder certifies that he has provided equipment, supplies, or services comparable to the Items specified in this contract to the parties listed in the reference section below and authorizes the County to verify references of business and credit at its option.

CONTRACT 22-105-DCC BETWEEN AIRGAS USA LLC. AND THE COUNTY OF DUPAGE

THIS AGREEMENT is entered into this 1ST day of December, 2022, between the County of DuPage, Illinois a body corporate and politic, located at 421 North County Farm Road, Illinois, 60187-3978 (hereinafter referred to as the COUNTY), and Airgas USA LLC., licensed to do business in the State of Illinois, located at 1250 W. Washington St. West Chicago, IL 60185 (hereinafter referred to as the CONTRACTOR).

RECITALS

WHEREAS, the COUNTY requires the goods and/or services specified in Bid 22-105-DCC for DuPage County Care Center, located at the DuPage County Center, 501 North County Farm Road, Wheaton, Illinois 60187; and

WHEREAS, the CONTRACTOR is the vendor selected pursuant to the bid process and is willing to perform under the terms of the Bid and this Contract.

NOW, THEREFORE, in consideration of the premises and mutual covenants contained herein, the parties agree that:

1.0 CONTRACT DOCUMENTS

- 1.1 This Contract includes all of the following component parts, all of which are fully incorporated herein and made a part of the obligations undertaken by the parties:
 - 1.1.a Project Information
 - 1.1.b Instructions to Bidders
 - 1.1.c General Conditions
 - 1.1.d Special Conditions
 - 1.1.e Insurance/Bonding Requirements and Certificates
 - 1.1.f Bid Form (including Certification/Proposal, Signature Affidavit Including Proposal Pricing)
 - 1.1.g Specifications (including any addenda, interpretations and approved exceptions)
 - 1.1.h Exhibits
 - 1.1.i County Purchase Order
- 1.2 All documents are or will be on file in the office of the Procurement Services Division, DuPage Center, 421 North County Farm Road, Room 3-400, Wheaton, Illinois 60187.
- 1.3 In the event of a conflict between any of the above documents, the document control from top to bottom, i.e., "a" control over "b".

2.0 DURATION OF THIS CONTRACT

- 2.1 Unless terminated as provided in the Bid Invitation, the term of this Contract shall be a one (1) year period beginning on 12/01/2022 and continuing through 11/30/2023.
- 2.2 The Contract term is subject to renewal per the Bid Invitation Specifications. In no event, shall the term plus renewals exceed four (4) years.

3.0 TERMINATION

- 3.1 Except as otherwise set forth in this AGREEMENT, County shall have the right to terminate this AGREEMENT for any cause or without cause thirty (30) days after having served written notice upon the Contractor, except in the event of Contractor's insolvency, bankruptcy or receivership, in which case termination shall be effective immediately upon receipt of notice.
- 3.2 Upon such termination, the liabilities of the parties to this AGREEMENT shall cease, but they shall not be relieved of the duty to perform their obligations up to the date of termination, or to pay for deliverables tendered prior to termination. There shall be no termination expenses.
- 3.3 Upon termination of this AGREEMENT, all data, work products, reports and documents produced, because of this AGREEMENT shall become the property of the COUNTY. Further, Vendor shall provide all deliverables within fourteen (14) days of termination in accordance with the other provisions of this AGREEMENT.

-

4.0 BID PRICES AND PAYMENT

- 4.1 The Contractor shall provide the required goods and or services described in the Bid Specifications for the prices quoted on the Bid Form.
- 4.2 The County shall make payment pursuant to the Illinois Local Government Prompt Payment Act, except that no payment shall be approved where the Contractor has failed to comply with certified payroll requirements of the Illinois Prevailing Wage Act or Davis Bacon Act.

5.0 AMENDMENTS

- 5.1 This Contract may be amended by agreement of both parties.
- 5.2 All amendments will conform to State of Illinois Statutes and County procedures for Change Orders.

6.0 CONTRACT ENFORCEMENT - ATTORNEY'S FEES

6.1 If the County is required to take legal action to enforce performance of any of the terms, provisions, covenants and conditions of this Contract, and by reason thereof, the County is required to use the services of an attorney, including the States Attorney, then the County shall be entitled to reasonable attorney's fees and all expenses and costs incurred by the County pertaining thereto and in enforcement of any remedy, including costs and fees relating to any appeal.

7.0 SEVERABILITY CLAUSE

If any section, paragraph, clause, phrase or portion of this Contract is for any reason determined by a court of competent jurisdiction to be invalid and unenforceable, such portion shall be deemed separate, distinct and an independent provision, and the court's determination shall not affect the validity or enforceability of the remaining portions of this Contract.

8.0 GOVERNING LAW

3.1 This Contract shall be governed by the laws of the State of Illinois both as to interpretation and enforcement. Venue for all disputes will be exclusively in the circuit court for the Eighteenth Judicial Circuit in DuPage County, Illinois and that Illinois law will control.

9.0 ENTIRE AGREEMENT

- 9.1 This Contract, including the documents listed in 1.0, contains the entire agreement between the parties.
- 9.2 There are no covenants, promises, conditions, or understandings; either oral or written, other than those contained herein.

IN WITNESS, WHEREOF, the parties set their hands and seals as of the date first written above.

THE COUNTY OF DUPAGE, ILLINOIS

CONTRACTOR

By:	Signature on File	By: Signature on File
	NATURE	SIGNATURE
	Mary Catherine Wells	Megan Speck
PRI	NTED NAME	PRINTED NAME
	Acting Chief Procurement Officer	VP HCIS
PRI	NTED TITLE	PRINTED TITLE
	12/13/2022	12/11/2022
DAT	TE.	DATE



REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	22-105-DCC	
COMPANY NAME:	Airgas USA LLL	
CONTACT PERSON:	Joel Thoms	
CONTACT EMAIL:	Jod. Thoms@airgas.com	

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

Has	the	Bidder	made	contributions	as	described	above?



If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

occur.	The second secon	,
Has the Bidder had or will the Bidder have cont having contact with county officers or employee		entatives or individuals who are or will be
□ yes		
12 No		
If "Yes", list the name, phone number, and email having contact with county officers or employee	il of lobbyists, agents, representates in the table below.	tives, and all individuals who are or will be
NAME	PHONE	EMAIL
Section III: Violations		
A contractor or vendor that knowingly violates the are not limited to, the immediate cancellation Continuing and supplemental disclosure is required. If information changes, within five (5) do 30 days prior to the optional renewal of Annual disclosure for multi-year contract. With any request for change order excelled.	n of the contract and possible duired. The Bidder agrees to update ays of change, or prior to county a fany contract; cts on the anniversary of said contept those issued by the county for	disbarment from future County contracts to this disclosure form as follows: action, whichever is sooner;
Ethics DuPage Co, IL		
The full text of the County's Procurement Ordin-	ance is available at:	
ARTICLE VI PROCUREMENT Code of	Ordinances DuPage County, IL	Municode Library
Section IV: Certification		
By signing below, the Bidder hereby acknowled certifies that the information submitted on this formation submitted on the formati	form is true and correct to the best	d understands these requirements, and to the knowledge. nature on File
Printed Name: Use 1 hom5	Signature:	
Title: Healthcare Specialist	Date:	7/18/2025

county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may

CUNTY OF SUPAGE

Care Center Requisition \$30,000 and Over

421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: HS-P-0053-25 Agenda Date: 10/21/2025 Agenda #: 7.E.

AWARDING RESOLUTION ISSUED TO SYSCO CHICAGO, INCORPORATED TO PROVIDE PRIMARY FOOD, SUPPLIES AND CHEMICALS FOR THE DUPAGE CARE CENTER (CONTRACT TOTAL AMOUNT \$1,363,020.00)

WHEREAS, bids have been taken and evaluated in accordance with County Board policy; and

WHEREAS, the Human Services Committee recommends County Board approval for the issuance of a contract to Sysco Chicago, Inc., to provide primary food, supplies and chemicals, for the period of December 1, 2025 through November 30, 2026, for the DuPage Care Center.

NOW, THEREFORE BE IT RESOLVED, that said contract is to provide primary food, supplies and chemicals, for the period of December 1, 2025 through November 30, 2026 for the DuPage Care Center per bid renewal #22-082-DCC, be, and it is hereby approved for the issuance of a contract purchase order by the Procurement Division to Sysco Chicago, Inc., 250 Weiboldt Drive, Des Plaines, Illinois 60016, for a contract total amount of \$1,363,020.00.

Enacted and approved this 28th day of October, 2025 at Wheaton, Illinois.

	DEBORAH A. CONROY, CHAIR
	DU PAGE COUNTY BOARD
Attest:	
	JEAN KACZMAREK, COUNTY CLERK



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:	
25-2491	22-082-DCC	1 YR + 3 X 1 YR TERM PERIODS	\$869,168.00	
COMMITTEE:	TARGET COMMITTEE DATE:	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS:	
HUMAN SERVICES	10/21/2025	3 MONTHS	\$4,775,708.00	
	CURRENT TERM TOTAL COST:	MAX LENGTH WITH ALL RENEWALS:	CURRENT TERM PERIOD:	
	\$1,363,020.00	FOUR YEARS	THIRD RENEWAL	
Vendor Information		Department Information		
VENDOR:	VENDOR #:	DEPT:	DEPT CONTACT NAME:	
Sysco Chicago, Inc.	10555	DuPage Care Center	Mario Plata	
VENDOR CONTACT:	VENDOR CONTACT PHONE:	DEPT CONTACT PHONE #:	DEPT CONTACT EMAIL:	
Joshua Kackley	847-699-4869	630-784-4416	Mario.plata@dupagecounty.gov	
VENDOR CONTACT EMAIL:	VENDOR WEBSITE:	DEPT REQ #:		
joshua.kackley@sysco.com		7536		

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 purchase order for primary food, supplies and chemicals for the DuPage Care Center, for the period December 1, 2025 through November 30, 2026, for a contract total amount not to exceed \$1,363,020.00, under bid renewal #22-082-DCC, third and final optional renewal.

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

DuPage Care Center is regulated by the IL Department of Public Health, which mandates & monitors our ongoing compliance with applicable State & Federal regulations that govern our practices, policies & procedures which in turn drive our care deliver system. Adherence to Physician diet orders & clearly defined meal period is necessary to avoid fines & penalties to ensure that we are allowed to bill for & be reimbursed for care provided to our residents/patient food and supplies & chemicals for dish washing & general cleaning are operational necessities.

	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: Purchas	e Requisition Informat	ion		
Send	d Purchase Order To:	Send Invoices To:			
Vendor:	Vendor#:	Dept:	Division:		
Sysco Chicago, Inc.	10555	DuPage Care Center	Dining Services		
Attn:	Email:	Attn:	Email:		
Joshua Kackley	joshua.kackley@sysco.com	Mario Plata	mario.plata@dupagecounty.gov		
Address:	City:	Address:	City:		
250 Weiboldt Drive	Des Plaines	400 N. County Farm Road	Wheaton		
State:	Zip:	State:	Zip:		
IL	60016	IL	60187		
Phone:	Fax:	Phone:	Fax:		
847-699-4869		630-784-4416			
S	end Payments To:	Ship to:			
Vendor:	Vendor#:	Dept:	Division:		
Sysco Chicago, Inc.	10555	DuPage Care Center	Dining Services		
Attn:	Email:	Attn:	Email:		
Jillian Stadick	jillian.stadick@sysco.com	Mario Plata	mario.plata@dupagecounty.gov		
Address:	City:	Address:	City:		
250 Weiboldt Drive	Des Plaines	400 N. County Farm Road	Wheaton		
State:	Zip:	State:	Zip:		
IL	60016	IL	60187		
Phone:	Fax:	Phone:	Fax:		
847-699-4869		630-784-4416			
	Shipping	Con	ntract Dates		
Payment Terms:	FOB:	Contract Start Date (PO25):	Contract End Date (PO25):		
PER 50 ILCS 505/1	Destination	December 1, 2025	November 30, 2026		

	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		Operating Supplies	FY26	1200	2025	52200		77,380.00	77,380.00
2	1	EA		Food and Beverage	FY26	1200	2025	52210		910,350.00	910,350.00
3	1	EA		Cleaning Supplies	FY26	1200	2025	52280		22,050.00	22,050.00
4	1	EA		Operating Supplies	FY26	1200	2100	52200		46,640.00	46,640.00
5	1	EA		Food and Beverage	FY26	1200	2100	52210		302,400.00	302,400.00
6	1	EA		Cleaning Supplies	FY26	1200	2100	52280		4,200.00	4,200.00
FYi	FY is required, ensure the correct FY is selected. Requisition Total \$							\$ 1,363,020.00			

	Comments
HEADER COMMENTS	Provide comments for P020 and P025. Recommendation for the approval of a contract purchase order for primary food, supplies and chemicals for the DuPage Care Center, for the period December 1, 2025 through November 30, 2026, for a contract total amount not to exceed \$1,363,020.00, under bid renewal #22-082-DCC, third and final optional renewals.
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. October 21, 2025 Human Services Committee October 28, 2025 County Board
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 COUNTY OF BURACE

The County of DuPage Finance Department Procurement Division, Room 3-400 421 North County Farm Road Wheaton, Illinois 60187

CONTRACT RENEWAL AGREEMENT

This contract, made and entered into by The County of DuPage, 421 North County Farm Road, Wheaton, Illinois, 60187, hereinafter called the "COUNTY" and Sysco Chicago Inc. located at 250 Wieboldt Drive, Des Plaines, IL 60016, hereinafter called the "CONTRACTOR", witnesseth;

The COUNTY and the CONTRACTOR have previously entered into a Contract, pursuant to Bid #22-082-DCC which became effective on 12/1/2022 and which will expire 11/30/2025. The contract is subject to the third and final option to renew for a twelve (12) month period.

The contract renewal shall be effective on the date of last signature and shall terminate on 11/30/2026.

The parties now agree to renew said agreement, upon the same terms as previously agreed to, as specified in the original contract.

THE COUNTY OF DUPAGE	CONTRACTOR	
	Signature on File	
SIGNATURE	SIGNATURE	
Henry Kocker	Jillian Stadick	
PRINTED NAME	PRINTED NAME	
Buyer I	Customer Experience Manager	
PRINTED TITLE	PRINTED TITLE	
	09/22/2025	
DATE	DATE	



THE COUNTY OF DUPAGE FINANCE - PROCUREMENT PRIMARY AND SECONDARY FOOD SERVICE 22-082-DCC BID TABULATION

	✓										
				SYSCO CHICAGO				GORDON FOOD SERVICE			
NO.	ITEM	UOM	QTY		PRICE EXTENDED PRICE			PRICE		EXTENDED PRICE	
PART 1	- MEAT AND PRODUCE										
1	Bananas Fresh Ripe/Ready	CASE	15	\$	25.83	\$	387.45	\$	27.45	\$	411.75
2	Beef Ground Bulk Fine 81/19, 8/10# average	CASE	7	\$	146.56	\$	1,025.92	\$	261.60	\$	1,831.20
3	Beef Patties Raw 80/20	CASE	21	\$	37.31	\$	783.51	\$	51.00	\$	1,071.00
4	Beef Stew Meat Diced (size and shape may vary) 85% lean	CASE	35	\$	47.22	\$	1,652.70	\$	42.60	\$	1,491.00
5	Beef Certified Angus Flat Raw Boneless Bottom Round 171B (meat buyers guide number)	CASE	5	\$	198.16	\$	990.80	\$	188.20	\$	941.00
6	Carrots Grade A Diced (3/8" pieces)	CASE	19	\$	32.31	\$	613.89	\$	22.49	\$	427.31
7	Chicken Breast 4oz boneless/skinless in controlled vacuum packaging	CASE	11	\$	115.97	\$	1,275.67	\$	127.16	\$	1,398.76
8	Chicken breast 4oz B/S (boneless/skinless) IFZ (Individually quick frozen) in Ziplock Bags	CASE	11	\$	60.65	\$	667.15	\$	72.19	\$	794.09
9	Chicken Meat Diced 80D/20W (80% dark meat / 20% white meat)	CASE	25	\$	36.10	\$	902.50	\$	103.20	\$	2,580.00
10	Chicken Meat Fully Cooked Diced (1/2") WT/DK (white & dark meat)	CASE	8	\$	37.85	\$	302.80	\$	103.20	\$	825.60
11	Chicken Quarters IF (individually frozen)	CASE	6	\$	82.84	\$	497.04	\$	83.56	\$	501.36
12	Green Beans Frozen Cut Grade A	CASE	14	\$	37.32	\$	522.48	\$	24.59	\$	344.26
13	Pork Loin CC (center cut) BNLS (boneless) STRP/ON (side strap intact)	CASE	6	\$	57.36	\$	344.16	\$	101.70	\$	610.20
14	Pork Sausage LNK (link) SKLS (skinless) Mild	CASE	9	\$	35.91	\$	323.19	\$	25.52	\$	229.68
15	Sausage Pork Patty Mild CKD (cooked)	CASE	11	\$	34.84	\$	383.24	\$	34.59	\$	380.49
16	Turkey Breast Raw BNLS (boneless/skinless) foil wrapped	CASE	10	\$	74.16	\$	741.60	\$	70.38	\$	703.80
17	Veal Fritter Beer Breaded Raw Frozen w/BF (beef trimmings)	CASE	9	\$	48.33	\$	434.97	\$	34.08	\$	306.72

PART 1 TOTAL \$

11,849.07

\$

14,848.22

PART 2 - MISCELLANEOUS ITEMS

PART 2 - WISCELLANEOUS II EWS					SYSCO	CHI	CAGO	GORDON FOOD SERVICE			
NO.	ITEM	UOM	QTY		PRICE	E	EXTENDED PRICE		PRICE	E	EXTENDED PRICE
1	Cheese Mozzarella Shredded LMPS (low moisture part skim) Wisconsin	CASE	8	\$	57.96	\$	463.68	\$	54.34	\$	434.72
2	Coffee Decaf Ground 30/6.3oz packages	CASE	18	\$	136.10	\$	2,449.80	\$	141.96	\$	2,555.28
3	Containers Foam Hinged 3 Compartment Double Tab 8x8x3	CASE	29	\$	23.63	\$	685.27	\$	19.49		565.21
4	Detergent RTU (ready to use) Blue Liquid Pot/Pan	CASE	12	\$	36.73	\$	440.76	\$	59.46	\$	713.52
5	Eggs White Medium Shell USDA AA (AA indicates egg whites are thickn & firm with yolks that are high & round)	CASE	8	\$	65.23	\$	521.84	\$	56.94	\$	455.52
6	Eggs Whole Liquid Fresh with Citric Acid TFF (Trans Fat Free) 15/2LB containers	CASE	28	\$	59.25	\$	1,659.00	\$	37.58	\$	1,052.24
7	Green Peas Frozen	CASE	10	\$	44.02	\$	440.20	\$	32.91	\$	329.10
8	Ice Cream Cup Chocolate 4oz	CASE	23	\$	20.87	\$	480.01	\$	20.52	\$	471.96
9	Ice Cream Cups Vanilla 4oz	CASE	49	\$	20.78	\$	1,018.22	\$	20.52	\$	1,005.48
10	Juice Apple Frozen 6oz	CASE	37	\$	13.09	\$	484.33	\$	13.07	\$	483.59
11	Juice Cranberry Blend Frozen 6oz	CASE	31	\$	14.75	\$	457.25	\$	12.85	\$	398.35
12	Orange Juice Cup Frozen 6oz	CASE	57	\$	14.12	\$	804.84	\$	13.68	\$	779.76
13	Juice Orange Nectar Thick L2 (mildly thick)	CASE	24	\$	20.13	\$	483.12	\$	18.59	\$	446.16
14	Margarine Soft Buttery Spread (non-dairy) 600/5gm	CASE	35	\$	28.59	\$	1,000.65	\$	23.57	\$	824.95
15	Margarine Solid ZTF (zero trans fat)	CASE	11	\$	40.64	\$	447.04	\$	37.52	\$	412.72
16	Milk 2% Dairy Nectar Thickened Consistency L2 (mildly thick) 24/8oz per case	CASE	76	\$	20.71	\$	1,573.96	\$	19.99	\$	1,519.24
17	Milk 2% Dairy Honey Thick Consistency L3 (moderately thick) 24/8oz per case	CASE	50	\$	20.80	\$	1,040.00	\$	19.95	\$	997.50
18	Peaches Irregular Sliced in Extra LS (light syrup)	CASE	9	\$	43.23	\$	389.07	\$	49.21	\$	442.89
19	Pear CH (choice) Diced in Extra LS (light syrup)	CASE	7	\$	57.36	\$	401.52	\$	74.04	\$	518.28
20	Plastic Lid for Shoreline Collection (fits 5oz bowl/8oz mug)	CASE	13	\$	57.52	\$	747.76	\$	37.98	\$	493.74
21	Plastic Lid Disposable for Shoreline Collection 9oz Bowl	CASE	11	\$	48.15	\$	529.65	\$	35.69	\$	392.59
22	Potatoes Mashed Complete (w/Vitamin C) Dried in a Plastic Safety Resealable Can 6/5.1LB per case	CASE	12	\$	68.40	\$	820.80	\$	68.85	\$	826.20
23	Soup Base Instant Cream Gluten Free / No Added MSG	CASE	17	\$	39.72	\$	675.24	\$	39.08	\$	664.36
24	Supplement MedPlus Vanilla 2.0 (2 calories per milliliter) Nectar Consistency L2 (mildly thick) 12/32oz	CASE	27	\$	41.57	\$	1,122.39	\$	43.31	\$	1,169.37
25	Supplement Nutritional Treat Orange Flavor L4 (extremely thick)	CASE	19	\$	26.84	\$	509.96	\$	27.28	\$	518.32
26	Supplement Nutritional Treat Wild Berry Flavor L4 (extremely thick)	CASE	18	\$	26.98	\$	485.64	\$	27.29	\$	491.22
27	Yogurt Low Fat Strawberry Pouch	CASE	14	\$	37.24	\$	521.36	\$	30.85	\$	431.90
28	Yogurt Low Fat Vanilla Pouch	CASE	16	\$	37.24	\$	595.84	\$	30.85	\$	493.60
				PAR	T 2 TOTAL	\$	21,249.20		_	\$	19,887.77
			•	GRA	ND TOTAL	\$	33,098.27			\$	34,735.99

PART 3 - CATEGORY MARK-UP RATE SHEET

				1
			SYSCO CHICAGO	GORDON FOOD SERVICE
Category	Product Category			
	Meat General (poultry, seafood, pork, beef, etc Frozen	.) Fresh and	4%	6.5%
2	Produce		8%	11.0%
3	Non-Fluid Dairy		6%	9.5%
4	Frozen		6%	8.5%
5	Juices		3%	10.6%
6	Coffee		7%	10.6%
7	Fluid Dairy		5%	9.5%
8	Dairy Other		6%	9.5%
9	Dietary Supplements		6%	10.6%
10	Chemicals and Cleaning		9%	10.6%
11	Dry Goods		5%	7.5%
12	Smallwares and Disposables		5%	10.5%

- NOTES:
 1. US Foods, Inc. was deemed non-responsive due to declining to provide the required menu management software.
 2. Gordon Food Service, Inc. declined to be considered for the secondary food service award.

Bid Opening 9/16/22 @ 2:30 PM	DW, NE
Invitations Sent	24
Total Vendors Requesting Documents	1
Total Bid Responses	3

PART 1 - MEAT AND PRODUCE

Quantities are usage estimates per month.

Alternate items will be considered and nutritional labels and/or samples shall be provided upon request. Any and all exceptions or variances from Item description, Casepack Quantity, Item Size or Brand are to be noted on the line below each item. If no exceptions are noted, the item is understood to be an exact match.

Tabulations shall be based on Case Price provided. Price per unit is requested for comparison and clarification purposes.

		Tabulations Shall be t					7/29/			2022		8/12/	!		ERAGE		ERAGE		
NO	ITEM	BRAND	ITEM SIZE	UOM	QTY	CASEPACK QTY	CASE PRICE	ICE PER UNIT	CASE PRICE		CE PER INIT	CASE PRICE	CE PER JNIT	F BA 3 [(7 P) 8	CASE PRICE SED ON DATES: 7/29/22 RICE + 8/5/22 RICE + /12/22 ICE) ÷ 3	3 E 3 E (7 PF 8 PF 8/	CE PER JNIT SED ON ATES: /29/22 RICE + /5/22 RICE + 12/22 CE) ÷ 3	PRI	(TENDED CE (QTY X VERAGE SE PRICE)
1	Bananas Fresh Ripe/Ready	PACKER / ANTHONY MARANO CO.	40 LB	CASE	15	1	\$ 26.73	\$ 26.73	\$ 25.38	\$	25.38	\$ 25.38	\$ 25.38	\$	25.83	\$	25.83	\$	387.45
Exceptions:																			
2	Beef Ground Bulk Fine 81/19, 8/10# average	PACKER / NATIONAL BEEF	10 LB	CASE	7	8	\$ 146.56	\$ 18.32	\$ 146.56	\$	18.32	\$ 146.56	\$ 18.32	\$	146.56	\$	18.32	\$	1,025.92
Exceptions:																			
3	Beef Patties Raw 80/20	FIRE CLASSIC / CARGILL MEAT SOLUTIONS	4 OZ	CASE	21	80	\$ 37.35	\$ 0.93	\$ 37.07	\$	0.93	\$ 37.52	\$ 0.94	\$	37.31	\$	0.93	\$	783.59
Exceptions:																			
4	Beef Stew Meat Diced (size and shape may vary) 85% lean	BUCKHEAD MEAT	5 LB	CASE	35	2	\$ 47.22	\$ 23.61	\$ 47.22	\$	23.61	\$ 47.22	\$ 23.61	\$	47.22	\$	23.61	\$	1,652.70
Exceptions:														\$	-	\$	-	\$	-
5	Beef Certified Angus Flat Raw Boneless Bottom Round 171B (meat buyers guide number)	CERTIFIED ANGUS BEEF / NATIONAL BEEF	10-13 LB	CASE	5	4	\$ 197.30	\$ 49.33	\$ 198.59	\$	49.65	\$ 198.59	\$ 49.65	\$	198.16	\$	49.54	\$	990.80
Exceptions:																			
6	Carrots Grade A Diced (3/8" pieces)	NATIONAL FROZEN FOODS	30LB	CASE	19	1	\$ 32.28	\$ 32.28	\$ 32.32	\$	32.32	\$ 32.32	\$ 32.32	\$	32.31	\$	32.31	\$	613.83
Exceptions:																			
7	Chicken Breast 4oz boneless/skinless in controlled vacuum packaging	KOCH FOODS	5 LB	CASE	11	4	\$ 115.97	\$ 28.99	\$ 115.97	\$	28.99	\$ 115.97	\$ 28.99	\$	115.97	\$	28.99	\$	1,275.67
Exceptions:																			
8	Chicken breast 4oz B/S (boneless/skinless) IFZ (Individually quick frozen) in Ziplock Bags	KOCH FOODS	4 OZ	CASE	11	48	\$ 62.18	\$ 1.30	\$ 60.89	\$	1.27	\$ 58.88	\$ 1.23	\$	60.65	\$	1.26	\$	667.15
Exceptions:										<u></u>									
9	Chicken Meat Diced 80D/20W (80% dark meat / 20% white meat)	RENAISSANCE	5 LB	CASE	25	2	\$ 35.05	\$ 17.53	\$ 36.63	\$	18.32	\$ 36.63	\$ 18.32	\$	36.10	\$	18.05	\$	902.58
Exceptions:										<u></u>									
10	Chicken Meat Fully Cooked Diced (1/2") WT/DK (white & dark meat)	TYSON	5 LB	CASE	8	2	\$ 38.31	\$ 19.16	\$ 38.38	\$	19.19	\$ 36.86	\$ 18.43	\$	37.85	\$	18.93	\$	302.80
Exceptions:																			

11	Chicken Quarters IF (individually frozen)	TYSON FOODS	12 OZ	CASE	6	40	\$ 82.84	\$ 2.07	\$ 82.84	\$ 2.07	\$ 82.84	\$	2.07	\$	82.84	\$	2.07	\$ 497.04
Exceptions:																		
12	Green Beans Frozen Cut Grade A	LAKESIDE FOODS	30 LB	CASE	14	1	\$ 37.42	\$ 37.42	\$ 37.27	\$ 37.27	\$ 37.27	\$	37.27	\$	37.32	\$	37.32	\$ 522.48
Exceptions:																		
13	Pork Loin CC (center cut) BNLS (boneless) STRP/ON (side strap intact)	BUTCHER BLOCK / JBS	6-10#	CASE	6	4	\$ 55.00	\$ 13.75	\$ 58.04	\$ 14.51	\$ 59.04	\$	14.76	\$	57.36	\$	14.34	\$ 344.16
Exceptions:																		
14	Pork Sausage LNK (link) SKLS (skinless) Mild	HILLSHIRE BRANDS	1 OZ	CASE	9	160	\$ 35.56	\$ 0.22	\$ 35.56	\$ 0.22	\$ 36.60	\$	0.23	\$	35.91	\$	0.22	\$ 323.16
Exceptions:																		
15	Sausage Pork Patty Mild CKD (cooked)	HILLSHIRE BRANDS	1 OZ	CASE	11	160	\$ 34.51	\$ 0.22	\$ 34.51	\$ 0.22	\$ 35.50	\$	0.22	\$	34.84	\$	0.22	\$ 383.24
Exceptions:																		
16	Turkey Breast Raw BNLS (boneless/skinless) foil wrapped	BUTTERBALL	8-10#	CASE	10	2	\$ 74.16	\$ 37.08	\$ 74.16	\$ 37.08	\$ 74.16	\$	37.08	\$	74.16	\$	37.08	\$ 741.60
Exceptions:																		
17	Veal Fritter Beer Breaded Raw Frozen w/BF (beef trimmings)	ADVANCE PIERRE FOODS	4 OZ	CASE	9	40	\$ 49.24	\$ 1.23	\$ 49.24	\$ 1.23	\$ 46.52	\$	1.16	\$	48.33	\$	1.21	\$ 435.00
Exceptions:																		
											TO	OTAL	L PART	1 - M	EAT ANI) PR	ODUCE	\$ 11,849.17

PART 2 - MISCELLANEOUS ITEMS

Quantities are usage estimates per month.

Alternate items will be considered and nutritional labels and/or samples shall be provided upon request. Any and all exceptions or variances from Item description, Casepack Quantity, Item Size or Brand are to be noted on the line below each item. If no exceptions are noted, the item is understood to be an exact match.

Tabulations shall be based on Case Price provided. Price per unit is requested for comparison and clarification purposes.

1 mois Exceptions: 2 Coffe Exceptions: 3 Cont Doul Exceptions:	isture part skim) Wisconsin Ifee Decaf Ground 30/6.3oz packages Intainers Foam Hinged 3 Compartment Juble Tab 8x8x3 Itergent RTU (ready to use) Blue Liquid	FOLGERS PACTIV	5LB 6.3 OUNCE 8X8X3"	CASE	8 18	4	\$ 57.96	\$ 14.49	\$ 463.68
2 Coffe Exceptions: 3 Confe Doul Exceptions:	ntainers Foam Hinged 3 Compartment uble Tab 8x8x3 tergent RTU (ready to use) Blue Liquid			CASE	18	00			
Exceptions: 3 Cont Double Exceptions:	ntainers Foam Hinged 3 Compartment uble Tab 8x8x3 tergent RTU (ready to use) Blue Liquid			CASE	18				
3 Cont Doul Exceptions:	uble Tab 8x8x3 tergent RTU (ready to use) Blue Liquid	PACTIV	8X8X3"			30	\$ 136.10	\$ 4.54	\$ 2,449.80
Exceptions:	uble Tab 8x8x3 tergent RTU (ready to use) Blue Liquid	PACTIV	8X8X3"						
Dete			0710710	CASE	29	150	\$ 23.63	\$ 0.16	\$ 685.27
Dete									
4 Pot/F	/Fall	KEYSTONE / ECOLAB	1GAL	CASE	12	2	\$ 36.73	\$ 18.37	\$ 440.76
Exceptions:									
5 indic	gs White Medium Shell USDA AA (AA icates egg whites are thickn & firm with ks that are high & round)	SUNRISE ACRES INC	30 DZ	CASE	8	1	\$ 65.23	\$ 65.23	\$ 521.84
Exceptions:									
	gs Whole Liquid Fresh with Citric Acid TFF ans Fat Free) 15/2LB containers	MICHAELS FOODS	2 LB	CASE	28	15	\$ 59.25	\$ 3.95	\$ 1,659.00
Exceptions:									
7 Gree	een Peas Frozen	NATIONAL FROZEN FOODS	30LB	CASE	10	1	\$ 44.02	\$ 44.02	\$ 440.20
Exceptions:									
	Cream Cup Chocolate 4oz	WELLS DAIRY	4 OZ	CASE	23	48	\$ 20.87	\$ 0.43	\$ 480.01
Exceptions:				2125			• • • •		A
	Cream Cups Vanilla 4oz	WELLS DAIRY	4 OZ	CASE	49	48	\$ 20.78	\$ 0.43	\$ 1,018.22
Exceptions:		ARDMORE / COUNTRY PURE							
10 Juice	ce Apple Frozen 6oz	FOODS	6 OZ	CASE	37	48	\$ 13.09	\$ 0.27	\$ 484.33
Exceptions:									
11 Juice	ce Cranberry Blend Frozen 6oz	ARDMORE / COUNTRY PURE FOODS	4 OZ	CASE	31	96	\$ 14.75	\$ 0.15	\$ 457.25
Exceptions:									
12 Orar	ange luice Cun Frozen 607	ARDMORE / COUNTRY PURE FOODS	6 OZ	CASE	57	48	\$ 14.12	\$ 0.29	\$ 804.84
Exceptions:		10003							
13 Juice	ce Orange Nectar Thick L2 (mildly thick)	LYONS MAGNUS	4OZ	CASE	24	48	\$ 20.13	\$ 0.42	\$ 483.12
Exceptions:									
	3	SMART BALANCE / VENTURA FOODS	5 GM	CASE	35	600	\$ 28.59	\$ 0.05	\$ 1,000.65
Exceptions:									
	rgarine Solid ZTF (zero trans fat)	VENTURA FOODS	1LB	CASE	11	30	\$ 40.64	\$ 1.35	\$ 447.04
Exceptions:									
	k 2% Dairy Nectar Thickened Consistency (mildly thick) 24/8oz per case	LYONS MAGNUS	8 OZ	CASE	76	24	\$ 20.71	\$ 0.86	\$ 1,573.96
Exceptions:									

17	Milk 2% Dairy Honey Thick Consistency L3 (moderately thick) 24/8oz per case	LYONS MAGNUS	8 OZ	CASE	50	24	\$ 20.80	\$ 0.87	\$ 1,040.00
Exceptions:	, , ,								
18	Peaches Irregular Sliced in Extra LS (light syrup)	PACIFIC COAST PRODUCERS	#10	CASE	9	6	\$ 43.23	\$ 7.21	\$ 389.07
Exceptions:									
19	Pear CH (choice) Diced in Extra LS (light syrup)	NEIL JONES FOODS	#10	CASE	7	6	\$ 57.36	\$ 9.56	\$ 401.52
Exceptions:									
	Plastic Lid for Shoreline Collection (fits 5oz bowl/8oz mug)	CAMBRO	3.5 IN	CASE	13	1500	\$ 57.52	\$ 0.04	\$ 747.76
Exceptions:									
	Plastic Lid Disposable for Shoreline Collection 9oz Bowl	CAMBRO	1000CT	CASE	11	1	\$ 48.15	\$ 48.15	\$ 529.65
Exceptions:									
22	Potatoes Mashed Complete (w/Vitamin C) Dried in a Plastic Safety Resealable Can 6/5.1LB per case	BASIC AMERICAN FOODS	5.1 LB	CASE	12	6	\$ 68.40	\$ 11.40	\$ 820.80
Exceptions:									
23	Soup Base Instant Cream Gluten Free / No Added MSG	VENTURA FOODS	28 OZ	CASE	17	6	\$ 39.72	\$ 6.62	\$ 675.24
Exceptions:									
24	Supplement MedPlus Vanilla 2.0 (2 calories per milliliter) Nectar Consistency L2 (mildly thick) 12/32oz	LYONS MAGNUS	32 OZ	CASE	27	12	\$ 41.57	\$ 3.46	\$ 1,122.39
Exceptions:									
25	Supplement Nutritional Treat Orange Flavor L4 (extremely thick)	LYONS MAGNUS	4 OZ	CASE	19	48	\$ 26.84	\$ 0.56	\$ 509.96
Exceptions:									
	Supplement Nutritional Treat Wild Berry Flavor L4 (extremely thick)	LYONS MAGNUS	4 OZ	CASE	18	48	\$ 26.98	\$ 0.56	\$ 485.64
Exceptions:	-								
27	Yogurt Low Fat Strawberry Pouch	YOPLAIT / GENERAL MILLS	4 LB	CASE	14	6	\$ 37.24	\$ 6.21	\$ 521.36
Exceptions:									
	Yogurt Low Fat Vanilla Pouch	YOPLAIT / GENERAL MILLS	4 LB	CASE	16	6	\$ 37.24	\$ 6.21	\$ 595.84
Exceptions:								ĺ	
						тоти	AL PART 2 - MISCE	LLANEOUS ITEMS	\$ 21,249.20

PART 3 - CATEGORY MARK-UP RATE SHEET

0	fferor shall submit applicable Percent Mark-Up on Cost for the	categories listed below.
Category	Product Category	Percent Mark-Up On Cost (Cost Defined as: Direct Product Cost including freight charge, less all vendor invoice allowances, discounts & promotions.)
1	Meat General (poultry, seafood, pork, beef, etc.) Fresh and Frozen	4%
2	Produce	8%
3	Non-Fluid Dairy	6%
4	Frozen	6%
5	Juices	3%
6	Coffee	7%
7	Fluid Dairy	5%
8	Dairy Other	6%
9	Dietary Supplements	6%
10	Chemicals and Cleaning	9%
11	Dry Goods	5%
12	Smallwares and Disposables	5%

SECTION 8 - BID FORM SIGNATURE PAGE

The Contractor agrees to provide the service, and/or supplies as described in this solicitation and subject, without limitation, to all specifications, terms, and conditions herein contained. Bidder shall acknowledge receipt of each addendum issued in the space provided on the bid form.

\	Signature on File				
X_{-}		Director of	Contract Sales	L	
	(Signat	ure and Title)			
					CORPORATE SEAL (If available)
	BID MUS	T BE SIGNED AN	ID NOTARIZED (W	ITH SEAL) FC	R CONSIDERATION
Subsc	ribed and sworn to befo	re me this <u>15th</u>	day of <u>Septeml</u>	ber	AD, 20 22
	(Notary Public)		My Commission	Expires:	
			SEAL		

SECTION 9 - MANDATORY FORM PRIMARY AND SECONDARY FOOD SERVICE 22-082-DCC

(PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION)

Sysco Chicago

Full Name of Bidder

	Main Business Address	250 Wieboldt Drive			
	City, State, Zip Code	Des Plaines, IL 60016			
	Telephone Number	847-699-5400	Email Address	joshua.kackley@sysco.com	
	Bid Contact Person	Josh Kackley			
The	e undersigned certifies that	: he is:			
	the Owner/Sole Proprietor	a Member authorized to sign on behalf of the Partnership	X an	Officer of the a Member orporation Venture	of the Joint
Her	rein after called the Bidder	and that the members of the Pa	•	or Officers of the Corporation are as foll re on File VP of Finar	
	(President or Par	rtner)		(Vice-President or Partner	r)
	(Secretary or Par	 rtner)		(Treasurer or Partner)	-
that forr	t this bid is made without on the of agreement and the countries. The Procurement Officer,	collusion with any other person, contract specifications for the ab DuPage County, 421 North C	firm or co ove desigr County Far	ted in this bid as principals are those na reporation; that he has fully examined the nated purchase, all of which are on file rm Road, Wheaton, Illinois 60187, are ations and attached exhibits, including	ne proposed in the office
Add	denda No,,	_, and issued thereto.			
anc	d other means of construct	_	ervices nec	provide all necessary machinery, tools cessary to furnish all the materials and ne therein prescribed.	

Further, the undersigned certifies and warrants that he is duly authorized to execute this certification/affidavit on behalf of the Bidder and in accordance with the Partnership Agreement or by-laws of the Corporation, and the laws of the State of Illinois and that this Certification is binding upon the Bidder and is true and accurate.

Further, the undersigned certifies that the Bidder is not barred from bidding on this contract as a result of a violation of either 720 Illinois Compiled Statutes 5/33 E-3 or 5/33 E-4, bid rigging or bid-rotating, or as a result of a violation of 820 ILCS 130/1 et seq., the Illinois Prevailing Wage Act.

The undersigned certifies that he has examined and carefully prepared this bid and has checked the same in detail before submitting this bid, and that the statements contained herein are true and correct.

If a Corporation, the undersigned, further certifies that the recitals and resolutions attached hereto and made a part hereof were properly adopted by the Board of Directors of the Corporation at a meeting of said Board of Directors duly called and held and have not been repealed nor modified, and that the same remain in full force and effect. (Bidder may be requested to provide a copy of the corporate resolution granting the individual executing the contract documents authority to do so.)

Further, the Bidder certifies that he has provided equipment, supplies, or services comparable to the items specified in this contract to the parties listed in the reference section below and authorizes the County to verify references of business and credit at its option.

Finally, the Bidder, if awarded the contract, agrees to do all other things required by the contract documents, and that he will take in full payment therefore the sums set forth in the bidding schedule (subject to unit quantity adjustments based upon actual usage).

CONTRACT ADMINISTRATION INFORMATION:

CORRESPON	DENCE TO CONTRACTOR:	REMIT TO CONTRACTOR:						
NAME	Sysco Chicago	NAME	Sysco Chicago					
CONTACT	Joshua Kackley	CONTACT	Jillian Stadick					
ADDRESS	250 Weiboldt Drive	ADDRESS	250 Weiboldt Drive					
CITY ST ZIP	Des Plaines, IL 60016	CITY ST ZIP Des Plaines, IL 60016						
TX	847-699-4869	TX 847-699-6720						
FX		FX						
EMAIL	joshua.kackley@sysco.com	EMAIL	jillian.stadick@sysco.com					
COUNTY BILL	. TO INFORMATION:	COUNTY SHI	P TO INFORMATION:					
DuPage Care (Center	DuPage Care	Center					
Attn: Nancy P	Palima	Attn: Mario Plata						
400 North Cou	nty Farm Road	400 North County Farm Road						
Wheaton, IL 60	0187	Wheaton, IL 6	0187					
TX: (630) 784-	4422	TX: (630) 784-4416						
		DuPage Coun	ty JTK Administration Building					
		Attn: Rafael L	opez					
		421 North Cou	unty Farm Road					
		Wheaton, IL 6	0187					
		TX: (630) 407	-5760					
		DuPage Coun	ty Judicial Office Facility					
		Attn: Tom Fia	la					
		505 North County Farm Road						
		Wheaton, IL 60187						
		TX: (630) 407-8293						

ALL MATERIALS MUST BE PROPOSED AND SHIPPED F.O.B. DELIVERED (FREIGHT INCLUDED IN PRICE)



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	22-082-DCC
COMPANY NAME:	Sysco Chicago
CONTACT PERSON:	Jillian Stadick
CONTACT EMAIL:	jillian.stadick@sysco.com

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

Has the Bidder made contributions as described above?	
□ Yes	
☑ No	

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

☐ Yes

No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- · With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

Ethics | DuPage Co, IL

The full text of the County's Procurement Ordinance is available at:

ARTICLE VI. - PROCUREMENT | Code of Ordinances | DuPage County, IL | Municode Library

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Printed Name: Jillian Stadick	Signature on File Signature:_
Title: Customer Experience Manager	Date: 09/22/2025

Care Center Requisition Under \$30,000



421 N. COUNTY FARM ROAD WHEATON, IL 60187 www.dupagecounty.gov

File #: 25-2546 Agenda Date: 10/21/2025 Agenda #: 7.F.



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:
25-2488	24-114-DCC	1 YR + 3 X 1 YR TERM PERIODS	\$21,673.02
COMMITTEE:	TARGET COMMITTEE DATE:	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS:
HUMAN SERVICES	10/21/2025	3 MONTHS	\$79,192.08
	CURRENT TERM TOTAL COST:	MAX LENGTH WITH ALL RENEWALS:	CURRENT TERM PERIOD:
	\$19,173.02	FOUR YEARS	FIRST RENEWAL
Vendor Information		Department Information	
VENDOR:	VENDOR #:	DEPT:	DEPT CONTACT NAME:
Relias	27475	DuPage Care Center	Anita Rajagopal
VENDOR CONTACT:	VENDOR CONTACT PHONE:	DEPT CONTACT PHONE #:	DEPT CONTACT EMAIL:
Joshua Weekman	877-200-0020	630-784-4200	anita.rajagopal@dupagecounty.gov
VENDOR CONTACT EMAIL:	VENDOR WEBSITE:	DEPT REQ #:	
jweekman@relias.com		7539	

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 purchase order for a Learning Management System for the DuPage Care Center, for the period January 1, 2026 through December 31, 2026, for a contract total not to exceed \$19,173.02, under renewal of RFP #24-114-DCC.

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

This is a centralized platform that delivers courses to the DuPage Care Center to enable staff to complete annual in-services while at the same time gaining continuing education credits for licensed staff, automating reports quickly from one central place to all levels of leadership to increase transparency and visibility throughout and to be able to report various information per CMS and IDPH guidelines and regulations.

	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 RFP (REQUEST FOR PROPOSAL)	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. Customer Service
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) Approve contract to Relias for Learning Management System for the DuPage Care Center, for the period January 1, 2026 through December 31, 2026, for a contract total not to exceed \$19,173.02. 2) Do not approve contract to Relias for Learning Management System for the DuPage Care Center, for the period January 1, 2026 through December 31, 2026, for a contract total not to exceed \$19,173.02, which does not allow staff to customize and improve quality of trainings, or efficiently track and report continuing education which is a CMS and IDPH requirement.

Form under revision control 05/17/2024

	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: Purcha	se Requisition Informat	ion
Send Pu	rchase Order To:	Seno	l Invoices To:
Vendor:	Vendor#:	Dept:	Division:
Relias	27475	DuPage Care Center	Administration
Attn:	Email:	Attn:	Email:
Joshua Weekman	jweekman@relias.com	Anita Rajagopal	anita.rajagopal@dupagecounty.go v
Address:	City:	Address:	City:
1010 Sync Street, Suite 100	Morrisville	400 N. County Farm Road	Wheaton
State:	Zip:	State:	Zip:
NC	27560	IL	60187
Phone:	Fax:	Phone:	Fax:
877-200-0020		630-784-4200	
Send	Payments To:		Ship to:
Vendor:	Vendor#:	Dept:	Division:
Relias	27475	DuPage Care Center	
Attn:	Email:	Attn:	Email:
Joshua Weekman	jweekman@relias.com		anita.rajagopal@dupagecounty.gov
Address:	City:	Address:	City:
1010 Sync Street, Suite 100	Morrisville	400 N. County Farm Road	Wheaton
State:	Zip:	State:	Zip:
NC	27560	IL	60187
Phone:	Fax:	Phone:	Fax:
877-200-0020		630-784-4200	
9	Shipping	Cor	ntract Dates
Payment Terms:	FOB:	Contract Start Date (PO25):	Contract End Date (PO25):
PER 50 ILCS 505/1	Destination	January 1, 2026	December 31, 2026

Form under revision control 05/17/2024 87

						Purchas	se Requis	ition Lin	e Details			
	LN	Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
	1	1	EA		learning management system (subscription)	FY26	1200	2000	53807		19,173.02	19,173.02
,	FY is	require	l, ensure	the correct FY i	s selected.						Requisition Total	\$ 19,173.02

	Comments
HEADER COMMENTS	Provide comments for P020 and P025. Recommendation for the approval of a contract purchase order for a Learning Management System for the DuPage Care Center, for the period January 1, 2026 through December 31, 2026, for a contract total not to exceed \$19,173.02, under renewal of RFP #24-114-DCC.
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. October 21, 2025 Human Services Committee
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.

Form under revision control 05/17/2024



THE COUNTY OF DUPAGE FINANCE - PROCUREMENT LEARNING MANAGEMENT SYSTEM FOR THE DUPAGE CARE CENTER 24-114-DCC BID TABULATION

Criteria	Available Points	Relias	Absorb	NEOGOV	Synegen	Mercurius Inc.
Firm Qualifications	20	20	16	11	12	10
Key Qualifications	30	28	22	17	14	15
Project Understanding	30	29	20	16	16	15
Price	20	20	16	16	4	4
Total	100	97	75	60	46	44
Fee and Rate Proposal (Design Only)		\$ 26 673 02	\$ 33.360.00	e 32 714 00	£ 134 933 99	200
Percentage of points		100%	82%	82%	20%	18%
Points awarded (wtd against lowest price)		20	16	16	4	4

NOTES

- 1. Dayforce US, Inc. has been deemed non-responsive for not including required documents.
 2. Curriculum Global Learn LLC has been deemed non-responsive for not including required documents.
 3. MedTrainer, Inc. has been deemed non-responsive for not including required documents.

RFP Posted on 10/18/2024	
Bid Opened On 11/07/2024, 2:30 PM by	חא, פא
Invitations Sent	9
Total Requesting Documents	4
Total Bid Responses Received	8

BIDDER: Relias LLC

SECTION 8 - BID FORM PRICING

Quantities listed are canvasing quantities and are intended to establish pricing.

NO.	ITEM/DESCRIPTION	UOM	QTY	PRICE	EXTENDED PRICE	
1	Software Licensing/Subscription	EA	1	\$19,173.02 annually	\$19,173.02 annually	
2	Implementation Services	EA	1	\$2,500 one-time fee	\$2,500 one-time fee	
3	Data Migration*	EA	1	\$2,000 one-time fee (optional)	\$2,000 one-time fee (optional)	
4	Customization*	EA	1	\$3,000 one-time fee (optional)	\$3,000 one-time fee (optional)	
5	Training and Onboarding	EA	400	Included in Line-Item 2	Included in Line-Item 2	
6	Support and Maintenance	EA	1	Included in Line-Item 1	Included in Line-Item 1	
OTHER COSTS (SPECIFY)						
7		EA	1	\$	\$	
8		EA	1	\$	\$	
9		EA	1	\$	\$	
10		EA	1	\$	\$	
GRAND TOTAL \$24,673.02 (includes all options)						
GRAND TOTAL (In words) Twenty-four thousand six hundred seventy-three dollars and two cents						

^{*}Line-Item 3 includes migration of up to 10,000 lines of historical data. If more than 10,000 lines of data are needed, costs may change.

Additional pricing information has been attached immediately following this page.

^{**}Line-Item 4 includes Single Sign On configuration (\$1,000) and HRIS integration support (\$2,000). Both are optional add-ons.

Executive Summary – DuPage Care Center

Current Needs:

*A centralized platform that delivers courses to your staff enabling them to complete annual in-services while at the same time gaining continuing education credits for licensed staff, automating reports quickly from one central place to all levels of leadership to increase transparency and visibility throughout.

Solution Recommendation:

Implement the Relias platform with the following libraries of content: Regulatory and Compliance,
 Skilled Nursing, Rehab Therapy, MDS/CMAC Quality, in conjunction with the Professional
 Development library. These together will help increase the knowledge, deliver better outcomes, and
 ensure quality improvement through a single, trusted vendor. These libraries will include all
 compliance requirements for the state of Illinois, continuing education credits for those
 licensed staff, and soft skills courses that are job role specific.

Platform and Package Overview:

 Access to a library of 2,500+ high quality, interactive courses that meet the skilled acuity level of the Skilled Nursing library. These libraries will include all compliance requirements for the state of Illinois, continuing education credits for those licensed staff. Additionally, you will have the ability to upload your own created content.

Implementation Services Include:

Your implementation consultant will work closely with you to: build your custom website, teach you how to create training plans, upload your users into the system, customize and save reports, and make sure you can function efficiently as an administrator of your own site. You will also receive Relias Support for the entire length of the contract as part of this cost. We can migrate historical data to Relias from your existing platform, as well as integrate to your HR platform, and roll out a single sign tool if warranted, all for a fee as listed below.

Timeline Expectations:

• Target timeline for Go-Live is 30-45 days after project is assigned to your implementation consultant.



ANNUAL COST BREAKDOWN: 1 - YEAR SUBSCRIPTION

		Skilled Nursing Package	
Platform	Relias Platform	400 Total Users	
Maria de la companya	Regulatory and Compliance for PAC	400 users	
	Skilled Nursing	180 users	
Solutions	MDS/CMAC Quality	3 users	
	Professional Development for PAC	40 users	
	Rehab Therapy Services	12 users	
Services	Client Support	Ongoing service to ensure you deliver valuable education to your employees	
	Implementation	Onboarding/training to ensure success	
Annual Subscription		\$19,173.02 for Years 2, 3, etc	
Price per Employee, Per Year		\$47.93	
Implementation (One time set-up fee)		\$2,500.00	
HRIS Integration Fee		\$2,000 (Optional)	
Single Sign On		\$1,000 (Optional)	
Historical Data Migration	\$2,	000 for up to 10,000 lines of data (Optional)	
Total Cost (Year 1)		\$24,673.02 (Including all options)	

Feel free to dive into our terms and conditions here:

Relias MSA

Relias Schedule A



SECTION 9 - PROPOSAL FORM

(PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION) Full Name of Offeror Relias LLC Main Business Address 1010 Sync Street Suite 100 City, State, Zip Code Morrisville, NC 27560 877-200-0020 Telephone Number Fax Number Proposal Contact Person Joseph Nelthorpe, Account Executive

Email Address	jnelthorpe@relias.com				
The undersigned certifies that	he is:				
the Owner/Sole Proprietor	a Member of the Partnership	X	an Officer of the Corporation (LLC)		a Member of the Joint Venture
herein after called the	Offeror and that the members of	the Pa	tnership or Officers of t	he Corp	ooration are as follows
Kay Krafft, CEO (President or Par	tner)	<u>Ma</u>	aysa Dhadouli, Senior \ (Vice-Pr		esident or Partner)
Christopher Benecke, Secret (Secretary or Par		Ro	oss Golden, Chief Finan (Treasur		
nerein; that this Proposal is make proposed forms of agreem on the office of the Procurement of the documents referred to	ares that the only person or particate without collusion with any or ent and the contract specification of Manager, DuPage Center, 421 or mentioned in the contract down, and issued	ther pe is for th North ocume	rson, firm or corporatione above designated pur County Farm Road, Wints, specifications and	n; that rchase, heaton,	he has fully examine all of which are on fil Illinois 60187, and a
apparatus and other means of equipment specified or referred Further, the undersigned certiful he Offeror and in accordance	poses and agrees, if this Propositions from the construction, including transport to in the contract documents in lies and warrants that he is duly with the Partnership Agreement in is binding upon the Offeror and	ortation the ma authoria or by-l	services necessary to nner and time therein p zed to execute this cert aws of the Corporation	furnish prescrib tification	all the materials an ed. n/affidavit on behalf o
Further, the undersigned certife the result of the result	ies that the Offeror is not barred atutes 5/33 E-3 or 5/33E-4, prop	from p osal rig	roposing on this contra ging or proposal-rotatin	ct as a ig or as	result of a violation of a result of a violation

of 820 ILCS 130/1 et seq., the Illinois Prevailing Wage Act.

The undersigned certifies that he has examined and carefully prepared this proposal and has checked the same in detail before submitting this proposal, and that the statements contained herein are true and correct.

If a Corporation, the undersigned further certifies that the recitals and resolutions attached hereto and made a part hereof were properly adopted by the Board of Directors of the Corporation at a meeting of said Board of Directors duly called and held and have not been repealed, nor modified and that the same remain in full force and effect. (Offeror may be requested to provide a copy of the corporate resolution granting the individual executing the contract documents authority to do so.) Further, the offeror certifies that he has provided services comparable to the items specified in this contract to the parties

listed in the reference section below and authorizes the County to verify references of business and credit at its option.

Finally, the offeror, if awarded the contract, agrees to do all other things required by the contract documents, and that he will take in full payment therefore the sums set forth in the cost schedule.

PROPOSAL AWARD CRITERIA

My Commission Expires:

(Notary Public)

This proposal will be awarded to the most responsive, responsible vendor meeting specifications based upon the highest score compiled during evaluation of the proposals outlined in the selection process.

The Contractor agrees to provide the service described above and in the contract specifications under the conditions outlined in attached documents for the amount stated.

(Signature and Title)	CORPORATE SEAL (If available)
PROPOSAL MUST BE SIGNED FOR CONSIDERA	ATION
Subscribed and sworn to before me thisday of	AD, 2024



The County of DuPage Finance Department Procurement Division, Room 3-400 421 North County Farm Road Wheaton, Illinois 60187

CONTRACT RENEWAL AGREEMENT

This contract, made and entered into by The County of DuPage, 421 North County Farm Road, Wheaton, Illinois, 60187, hereinafter called the "COUNTY" and Relias LLC, located at 1010 Sync Street, Suite 100, Morrisville, NC 27560, hereinafter called the "CONTRACTOR", witnesseth:

The COUNTY and the CONTRACTOR have previously entered into a Contract, pursuant to Bid #24-114-DCC which became effective on 1/1/2025 and which will expire 12/31/2025. The contract is subject to the first of three options to renew for a twelve (12) month period.

The contract renewal shall be effective on the date of last signature and shall terminate on 12/31/2026.

The parties now agree to renew said agreement, upon the same terms as previously agreed to, as specified in the original contract.

THE COUNTY OF DUPAGE	CONTRACTOR
SIGNATURE	
Henry Kocker	Ross Golden
PRINTED NAME	PRINTED NAME
Buyer I	CFO
PRINTED TITLE	PRINTED TITLE
	40.0-4.0005
DATE	10-Oct-2025 DATE
DATE	DATE



DuPage County Finance Department Procurement Division 421 North County Farm Road Room 3-400 Wheaton, Illinois 60187-3978

REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	24-114-DCC
COMPANY NAME:	RELIAS LLC
CONTACT PERSON:	Hilton Mitchell or Michael Allen
CONTACT EMAIL:	mallen@relias.com or hmitchell@relias.com

Section II: Procurement Ordinance Requirements

Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the County, shall provide to the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. The contractor, union, or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors, and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

If "Yes", complete the required information in the table below.

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RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

All contractors and vendors who have obtained or are seeking contracts with the County shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

Yes

□_K No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL

Section III: Violations

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future County contracts. Continuing and supplemental disclosure is required. The Bidder agrees to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner;
- 30 days prior to the optional renewal of any contract;
- Annual disclosure for multi-year contracts on the anniversary of said contract
- · With any request for change order except those issued by the county for administrative adjustments

The full text of the County's Ethics Ordinance is available at:

Ethics | DuPage Co, IL

The full text of the County's Procurement Ordinance is available at:

ARTICLE VI. - PROCUREMENT | Code of Ordinances | DuPage County, IL | Municode Library

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Printed Name:	Ross Golden	Signatu	re:	
050				
Title: CFO		Date: _	10-Oct-2025	