



Procurement Review Comprehensive Checklist
 Procurement Services Division
 This form must accompany all Purchase Order Requisitions

SECTION 1: DESCRIPTION			
<i>General Tracking</i>		<i>Contract Terms</i>	
FILE ID # 25-0032	RFP, BID, QUOTE OR RENEWAL #:	INITIAL TERM WITH RENEWALS:	INITIAL TERM TOTAL COST: \$23,400.00
COMMITTEE: JUDICIAL AND PUBLIC SAFETY	TARGET COMMITTEE DATE: 01/07/2025	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS:
	CURRENT TERM TOTAL COST: \$23,400.00	MAX LENGTH WITH ALL RENEWALS: ONE YEAR	CURRENT TERM PERIOD: INITIAL TERM
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: Dr. Michaela Mozley	VENDOR #: 43493	DEPT: Probation & Court Services	DEPT CONTACT NAME: Sharon Donald
VENDOR CONTACT: Dr. Michaela Mozley	VENDOR CONTACT PHONE: 412-992-0634	DEPT CONTACT PHONE #: 630-407-8413	DEPT CONTACT EMAIL: sharon.donald@dupagecounty.gov
VENDOR CONTACT EMAIL: michaela.m.mozley@gmail.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.). Forensic Psychologist to provide expertise, experience, and knowledge to complete court-ordered psycho-sexual evaluations for court-involved individuals. The hourly rate is \$45.00 per hour.			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished The number of forensic evaluation cases has increased over the last several years. These cases take a longer time for the evaluations to be completed. Within the last two years, we have seen a consistent increase in the number of referrals for psychological evaluations. Psycho-sexual evaluations require a great deal of clinical resources and are the most time-involved evaluations we conduct in the department; each psycho-sexual evaluation takes, on average, a minimum of 20 hours to complete.			

SECTION 2: DECISION MEMO REQUIREMENTS	
DECISION MEMO NOT REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required.
DECISION MEMO REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required.
OTHER PROFESSIONAL SERVICES (DETAIL SELECTION PROCESS ON DECISION MEMO)	

SECTION 3: DECISION MEMO	
SOURCE SELECTION	Describe method used to select source. Dr. Michaela Mozley is licensed as a clinical psychologist and is a Licensed Sex Offender Evaluator in the State of Illinois. Dr. Mozley also has specialized experience with completing forensic assessments, including but not limited to psychosexual evaluations, and providing the Court with written reports and expert opinions.
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) The service is required by the court. 2) Staff recommends issuance of this contract for Dr. Michaela Mozley as a part-time Forensic Psychologist.

SECTION 4: SOLE SOURCE MEMO/JUSTIFICATION

JUSTIFICATION	Select an item from the following dropdown menu to justify why this is a sole source procurement.
NECESSITY AND UNIQUE FEATURES	Describe the product or services that are not available from other vendors. Explain necessary and unique features or services. Attach letters from manufacturer, letters from distributor, warranties, licenses, or patents as needed. Be specific.
MARKET TESTING	List and describe the last time the market has been tested on the applicability of the sole source. If it has not been tested over the last 12 months, explain why not.
AVAILABILITY	Describe steps taken to verify that these features are not available elsewhere. Included a detailed list of all products or services by brand/manufacturer examined and include names, phone numbers, and emails of people contacted.

SECTION 5: Purchase Requisition Information

<i>Send Purchase Order To:</i>		<i>Send Invoices To:</i>	
Vendor: Dr. Michaela Mozley	Vendor#: 43493	Dept: Probation & Court Services	Division: Finance
Attn: Dr. Michaela Mozley	Email: michaela.m.mozley@gmail.com	Attn: Sharon Donald	Email: sharon.donald@dupagecounty.gov
Address: 801 S. Financial Place, Apt #709	City: Chicago	Address: 503 N County Farm Road	City: Wheaton
State: Illinois	Zip: 60605	State: Illinois	Zip: 60187
Phone: 412-992-0634	Fax:	Phone: 630-407-8413	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: Dr. Michaela Mozley	Vendor#: 43493	Dept: Probation & Court Services	Division: Finance
Attn: Dr. Michaela Mozley	Email: michaela.m.mozley@gmail.com	Attn: Sharon Donald	Email: sharon.donald@dupagecounty.gov
Address: 801 S. Financial Place, Apt #709	City: Chicago	Address: 503 N County Farm Road	City:
State: Illinois	Zip: 60605	State: Illinois	Zip: 60187
Phone: 412-992-0634	Fax:	Phone: 630-407-8413	Fax:
Shipping		Contract Dates	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Jan 17, 2025	Contract End Date (PO25): Jan 16, 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		To provide sexual offending risk assessments and various other related evaluation to the probationers.	FY25	1400	6120	53090		17,900.00	17,900.00
2	1	EA			FY26	1400	6120	53090		5,500.00	5,500.00
<i>FY is required, ensure the correct FY is selected.</i>										Requisition Total	\$ 23,400.00

<i>Comments</i>	
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.