



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#: 26-0957	RFP, BID, QUOTE OR RENEWAL #: 24-033-DOT	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: \$30,000.00
COMMITTEE: TRANSPORTATION	TARGET COMMITTEE DATE: 04/07/2026	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$120,000.00
	CURRENT TERM TOTAL COST: \$30,000.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: SECOND RENEWAL
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: First Aid Corp. d/b/a 1st Ayd Corp	VENDOR #: 10579	DEPT: Division of Transportation	DEPT CONTACT NAME: Roula Eikosidekas
VENDOR CONTACT: Steve Schuttinga	VENDOR CONTACT PHONE: 630-417-9464	DEPT CONTACT PHONE #: 630-407-6920	DEPT CONTACT EMAIL: roula.eikosidekas@dupagecounty.gov
VENDOR CONTACT EMAIL: 1staydsteve@gmail.com	VENDOR WEBSITE:	DEPT REQ #: 26-1500-43	
<i>Overview</i>			
DESCRIPTION Identify scope of work, item(s) being purchased, total cost and type of procurement (i.e., lowest bid, RFP, renewal, sole source, etc.). Recommendation for the approval of a contract to 1st Ayd Corp., to furnish and deliver automotive aerosols and shop supplies on an as-needed basis for the Division of Transportation, for the period May 1, 2026 through April 30, 2027, for a contract total not to exceed \$30,000.00; per renewal option under bid award #24-033-DOT, second of three options to renew.			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Automotive aerosols and shop supplies are needed to maintain County owned and operated equipment and vehicles.			

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.
RENEWAL	
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 Information

<i>Send Purchase Order To:</i>		<i>Send Invoices To:</i>	
Vendor: First Aid Corp. d/b/a 1st Ayd Corp	Vendor#: 10579	Dept: Division of Transportation	Division: Accounts Payable
Attn: Steve Schuttinga	Email: 1staydsteve@gmail.com	Attn: Kathy Curcio	Email: DOTFinance@dupagecounty.gov
Address: 1325 Gateway Drive	City: Elgin	Address: 421 N. County Farm Road	City: Wheaton
State: IL	Zip: 60124	State: IL	Zip: 60187
Phone: 630-417-9464	Fax:	Phone: 630-407-6900	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: First Aid Corp. d/b/a 1st Ayd Corp	Vendor#: 10579	Dept: Division of Transportation	Division: Fleet Department
Attn: Accounts Rec	Email: orders@1stayd.com	Attn: William Bell	Email: william.bell@dupagecounty.gov
Address: PO Box 5298	City: Elgin	Address: 180 N. County Farm Road	City: Wheaton
State: IL	Zip: 60121-5298	State: IL	Zip: 60187
Phone: 847-622-0001	Fax:	Phone: 630-407-6931	Fax:
Shipping		Contract Dates	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): May 1, 2026	Contract End Date (PO25): Apr 30, 2027

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		Automotive Chemicals	FY26	1500	3520	52330		10,000.00	10,000.00
2	1	EA		Automotive Aerosols & Shop Supplies	FY26	1500	3520	52200		10,000.00	10,000.00
3	1	EA		Automotive Chemicals	FY27	1500	3520	52330		5,000.00	5,000.00
4	1	EA		Automotive Aerosols & Shop Supplies	FY27	1500	3520	52200		5,000.00	5,000.00
<i>FY is required, ensure the correct FY is selected.</i>										Requisition Total	\$ 30,000.00

<i>Comments</i>	
HEADER COMMENTS	Provide comments for P020 and P025. To furnish and deliver automotive aerosols and shop supplies for the DOT Fleet.
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. Email Approved PO to: Steve Schuttinga, William Bell, Roula Eikosidekas and Mike Figuray.
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO. see above.
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB.