



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#: 25-2363	RFP, BID, QUOTE OR RENEWAL #: 092925	INITIAL TERM WITH RENEWALS: 1 YR + 1 X 1 YR TERM PERIOD	INITIAL TERM TOTAL COST: \$26,671.20
COMMITTEE: JUDICIAL AND PUBLIC SAFETY	TARGET COMMITTEE DATE: 10/07/2025	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS: \$26,671.20
	CURRENT TERM TOTAL COST: \$26,671.20	MAX LENGTH WITH ALL RENEWALS:	CURRENT TERM PERIOD: INITIAL TERM
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: SCANNA MSC INC	VENDOR #:	DEPT: HDU	DEPT CONTACT NAME: Andy Barnish
VENDOR CONTACT: Henry Turtle	VENDOR CONTACT PHONE: 9419259730	DEPT CONTACT PHONE #: 630-514-5257	DEPT CONTACT EMAIL: andrew.barnish@dupagesheriff.org
VENDOR CONTACT EMAIL: scanna@comcast.net	VENDOR WEBSITE: www.scanna-msc.com	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.). The Hazardous Devices Unit (HDU) is currently using an outdated X-ray system for the inspection of suspicious packages and devices. This can result in blurred or distorted images and potentially endanger the HDU member or the community. This is the most current X-ray system with the most recent technology to rectify this safety issue.

JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished
Updating the X-ray system allows for better image quality and efficiency in response. This will also greatly increase safety for both the HDU member(s) and the community when the HDU responds to a suspicious or hazardous device.

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. SOLE PROVIDER OF A LICENSED OR PATENTED GOOD OR SERVICE
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. This is the only provider of the x-ray machine that is the industry standard for the hazardous device unit.
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. The HDU Commander searched the market and this is the only available product. The only other competitor went out of business
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. There is no other manufacturer of this product according to the specifications indicated by the HDU Commander.

SECTION 5: Purchase Requisition Information			
<i>Send Purchase Order To:</i>		<i>Send Invoices To:</i>	
Vendor: SCANNA MSC Inc	Vendor#:	Dept: Sheriff	Division: Budget
Attn: Henry Turtle	Email: scanna@comcast.net	Attn: Colleen Zbilski	Email: colleen.zbilski@dupagesheriff.org
Address: 2910 Hyde Park St	City: Sarasota	Address: 501 N County Farm Rd	City: Wheaton
State: FL	Zip: 34239	State: IL	Zip: 60187
Phone: 941-925-9730	Fax: 941-925-1548	Phone: 630-407-2212	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: Same As Above	Vendor#:	Dept: Sheriff	Division: HDU
Attn:	Email:	Attn: Andy Barnish	Email: andrew.barnish@dupagesheriff.org
Address:	City:	Address: 501 N County Farm Rd	City: Wheaton
State:	Zip:	State: IL	Zip: 60187
Phone:	Fax:	Phone: 630-514-5257	Fax:
Shipping		Contract Dates	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): Oct 15, 2025	Contract End Date (PO25): Oct 14, 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	D5000-SBSVS	ScanX Scout CR X-ray System	FY25	1000	4400	52000		21,065.00	21,065.00
2	4	EA	73578-14	PSP Plate 14" x 17"	FY25	1000	4400	52000		783.80	3,135.20
3	4	EA	B2160-14	PSP Plate 14" x 17" Plate Protector	FY25	1000	4400	52000		24.00	96.00
4	1	EA	FRK 2X2	Flex Ray Kit 2X2	FY25	1000	4400	52000		2,150.00	2,150.00
5	1	EA		Shipping	FY25	1000	4400	52000		225.00	225.00
<i>FY is required, ensure the correct FY is selected.</i>										Requisition Total	\$ 26,671.20

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.