

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:			
25-2506	22-112-FM	1 YR + 3 X 1 YR TERM PERIODS	\$131,061.70			
COMMITTEE:	TARGET COMMITTEE DATE:	PROMPT FOR RENEWAL:	CONTRACT TOTAL COST WITH ALL RENEWALS:			
PUBLIC WORKS	11/04/2025	3 MONTHS	\$471,941.74			
	CURRENT TERM TOTAL COST:	MAX LENGTH WITH ALL RENEWALS:	CURRENT TERM PERIOD:			
	\$104,794.16	FOUR YEARS	THIRD RENEWAL			
Vendor Information		Department Information				
VENDOR:	VENDOR #:	DEPT:	DEPT CONTACT NAME:			
Valdes Supply	36338	Facilities Management	Mary Ventrella			
VENDOR CONTACT:	VENDOR CONTACT PHONE:	DEPT CONTACT PHONE #:	DEPT CONTACT EMAIL:			
Shahir Ahmed	847-657-6000	630-407-5705	mary.ventrella@dupagecounty.gov			
VENDOR CONTACT EMAIL:	VENDOR WEBSITE:	DEPT REQ #:				
shahir.ahmed@valdessupply.com						

Overview

DESCRIPTION Identify scope of work, item(s) being purchased, total cost and type of procurement (i.e., lowest bid, RFP, renewal, sole source, etc.). Recommendation for the approval of a contract to Valdes Supply, to furnish and deliver restroom tissue and paper towels to the Judicial Office Facility, JTK Administration Building and the Jail on a monthly basis, and as needed for the Power Plant, Children's Center, Office of Emergency Management, and the Coroner's Office, for Facilities Management, for the period December 01, 2025 through November 30, 2026, for a total contract amount not to exceed \$104,794.16, per renewal option under bid award #22-112-FM; third and final option to renew.

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

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

SECTION 2: DECISION MEMO REQUIREMENTS				
DECISION MEMO NOT REQUIRED RENEWAL	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required.			
DECISION MEMO REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required.			

	SECTION 3: DECISION MEMO				
SOURCE SELECTION	SOURCE SELECTION Describe method used to select source.				
RECOMMENDATION	Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request, including				
AND TWO	status quo, (i.e., take no action).				
ALTERNATIVES					

	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.

Cana	Purchase Order To:	Send Invoices To:					
Vendor:	Vendor#:	Dept:	Division:				
Valdes Supply	36338	Facilities Management					
Attn:	Email:	Attn:	Email:				
Shahir Ahmed	shahir.ahmed@valdessupply.com	FMAccountsPayable @dupagecounty.gov					
Address:	City:	Address:	City:				
667 Chaddick Drive	Wheeling	421 N. County Farm Road Wheaton State: Zip:					
State:	Zip:	State:	Zip:				
IL	60090	IL	60187				
Phone:	Fax:	Phone:	Fax:				
847-657-6000 847-235-6869		630-407-5700	630-407-5701				
Send Payments To:		Ship to:					
Vendor:	Vendor#:	Dept: Division:					
Valdes Supply		Facilities Management					
Attn:	Email:	Attn: Email:					
Address:	City:	Address:	City:				
67 Chaddick Drive Wheeling			Wheaton				
State: Zip:		State:	Zip:				
IL	60090	IL	60187				
Phone:	Fax:	Phone:	Fax:				
 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	l Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/ Activity Code	Unit Price	Extension
1	1	LO		Restroom Tissue / Paper Towels	FY26	1000	1100	52280		104,794.16	104,794.16
FY is required, ensure the correct FY is selected. Requisition Total \$					\$ 104,794.16						

Comments			
HEADER COMMENTS	Provide comments for P020 and P025. Furnish and deliver restroom tissue and paper towels as needed, for County facilities, for Facilities Management.		
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. Send PO to Vendor, Mary Ventrella, Cathie Figlewski, and Clara Gomez.		
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO. Public Works Committee: 11/04/25 County Board: 11/12/25		
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB.		