



**Purchase Requisition**  
**Procurement Services Division**

Date: Nov 1, 2023

MinuteTraq (IQM2) ID #: \_\_\_\_\_

Department Req #: 923024

RFP, Bid or Quote #: \_\_\_\_\_

Send Purchase Order To:				Send Invoices To:					
Vendor: Alliant Insurance Services, Inc. Vendor #: 12104 R02				Dept: DuPage ETSB Division:					
Attn: Wendy Teller Email: wendy.teller@alliant.com				Attn: 9-1-1 Coordinator Email: etsb911@dupageco.org					
Address: 353 N. Clark St.				Address: 421 N. County Farm Road Room:					
City: Chicago State: IL Zip: 60654				City: Wheaton State: IL Zip: 60187					
Phone: Fax:				Phone: 630-550-7743 Fax:					
Send Payments To:				Ship To:					
Vendor: Alliant Insurance Services, Inc. Vendor #: 12104 R02				Dept: DuPage ETSB Division:					
Attn: Email:				Attn: 9-1-1 Coordinator Email: etsb911@dupageco.org					
Address: 29278 Network Place				Address: 421 N. County Farm Road Room:					
City: Chicago State: IL Zip: 60673-1292				City: Wheaton State: IL Zip: 60187					
Phone: Fax:				Phone: 630-550-7743 Fax:					
Payment Terms		F.O.B.		PO 20 Delivery Date		Requisitioner			
PER 50 ILCS 505/1		Destination							
Use for PO25 only		Contract Administrator		Contract Start Date		Contract End Date		Use for PO25 only	
		Eve Kraus		Dec 19, 2023		Dec 19, 2024			

LN	Qty	UOM	Item Detail (Product #)	Description	FY	Dept #	Acctg Unit	Acct #	Sub-Accts and/or Activity #	Unit Price	Extension
1	1	EA		Property Insurance for ETSB	24	4000	5820	53130		89,760.00	89,760.00
2	1	EA		Cyber Liability Insurance	24	4000	5820	53130		20,505.00	20,505.00
3		EA									0.00
4		EA									0.00
5		EA									0.00

**Requisition Total** \$ 110,265.00

**Header Comments** (these comments will appear on the PO20 and PO25 Purchase Order) :

**Special Instructions/Comments to Buyer or Approver** (these comments will NOT appear on the Purchase Order) :

Please return PO to ETSB to send to the vendor.

**User Department Internal Notes** (these comments will NOT appear on the Purchase Order) :