1. CALL TO ORDER

2. ROLL CALL

3. PUBLIC COMMENT

4. CHAIRMAN'S REPORT - CHAIR HART

5. APPROVAL OF MINUTES

   Health & Human Services - Regular Meeting - Tuesday November 6th, 2018

6. COMMUNITY SERVICES - MARY KEATING

   CS Requests That Also Require Finance And/Or County Board Approval

   FI-R-0957-18 RESOLUTION -- Acceptance and Appropriation of Additional Funding for the Low Income Home Energy Assistance Program (LIHEAP) ComEd Rate Relief Program Grant FY17 Company 5000 - Accounting Unit 1500 $2,255.00

7. DUPAGE CARE CENTER - JANELLE CHADWICK

   A. DuPage Care Center Requests That Also Require Finance And/Or County Board Approval

   1. HHS-P-0318-18 Recommendation for the approval of a contract purchase order to Wheaton Family Practice, Ltd., for Professional Services of a Medical Director for the DuPage Care Center, for the period December 1, 2018 through November 30, 2019, for a contract total not to exceed $36,000.00. Other Professional Services not Subject to Competitive Bidding per 55 ILCS 5/5-1022(a). Vendor selected pursuant to DuPage County Code Section 2-300.4-108 (1) (b).

   2. HHS-P-0319-18 Recommendation for the approval of a contract purchase order to Music Speaks, LLC, for music therapy for the residents of DuPage Care Center, for the period January 1, 2019 through December 31, 2019, for a contract total not to exceed $48,124.00, per renewal under per most qualified offeror, RFP #17-206-JM. (Foundation funded)
3. HHS-P-0320-18 Recommendation for the approval of a contract purchase order to Interboro Packaging Corporation, to furnish and deliver trash can and recycling can liners for the DuPage Care Center, for the period December 1, 2018 through May 16, 2020, for a contract total not to exceed $96,583.86, per bid #17-045-JM.

B. DuPage Care Center Requests for Parent Committee Final Approval

1. 2018-278 Recommendation for the approval of a contract purchase order to AT&T, for services and support for analog business circuit/business lines used to support dial-up applications at the DuPage Care Center for the period November 30, 2018 through November 30, 2019, for a contract total not to exceed $6,000.00, per renewal of the most qualified offer per Proposal #17-002-LG. (State of IL contract CMS793372P)

2. 2018-288 Recommendation for the approval of a contract purchase order to Direct Supply, Inc., for the purchase of rehab medical supplies, for the Physical Rehabilitation Department at the DuPage Care Center, for the period December 1, 2018 through November 30, 2019, for a contract total not to exceed $10,500.00, per renewal under lowest quote #Q17-207-GV, first of three one year renewals.

8. BUDGET TRANSFERS

A. Budget Transfers -- DuPage Care Center - To Transfer monies to allow for wireless services for the DPCC (Verizon) and to cover purchases of medical supplies and services for the Physical, Occupational, Speech, and Respiratory Therapy and Consulting Services. The DPCC in turn bills Medicare Part A/B and private insurances for these services and receives increased reimbursement - $101,500.00

B. Budget Transfers -- DuPage Care Center - To transfer budgeted funds, allowing for sufficient budget to be available for Payroll Accounting Unit and Account - $1,385,100.00

9. RESIDENCY WAIVERS - JANELLE CHADWICK

10. COMMUNITY SERVICES UPDATE - MARY KEATING

11. DUPAGE CARE CENTER UPDATE - JANELLE CHADWICK

12. OLD BUSINESS

13. NEW BUSINESS

14. ADJOURNMENT
1. **CALL TO ORDER**

10:15 AM meeting was called to order by Chair Greg Hart at 10:15 AM.

2. **ROLL CALL**

   A. Motion to make Dino Gavanes a member of the committee for quorum purposes.

<table>
<thead>
<tr>
<th>RESULT:</th>
<th>APPROVED [UNANIMOUS]</th>
</tr>
</thead>
<tbody>
<tr>
<td>MOVER:</td>
<td>Sam Tornatore, Vice Chair</td>
</tr>
<tr>
<td>SECONDER:</td>
<td>Amy L Grant, District 4</td>
</tr>
<tr>
<td>AYES:</td>
<td>Grant, Hart, Tornatore</td>
</tr>
<tr>
<td>ABSENT:</td>
<td>Chaplin, Khouri, Larsen</td>
</tr>
</tbody>
</table>

   PRESENT: Grant, Hart, Tornatore, Gavanes
   ABSENT: Chaplin, Khouri, Larsen

3. **PUBLIC COMMENT**

4. **CHAIRMAN'S REPORT - CHAIR HART**

Chair Hart gave an update on the progress of the water testing relating to the Sterigenics Corporation in Willowbrook. The Illinois Environmental Protection Agency (ILEPA) has developed a plan and standard to conduct testing for both ethylene oxide and ethylene glycol in the water supply within a half mile radius of Sterigenics in Willowbrook. The ILEPA will canvass residents with well water for consent to test their water. The ILEPA will test the water within the next couple of weeks and the Illinois Department of Public Health will provide notice of the results.

5. **APPROVAL OF MINUTES**
A. Health & Human Services - Regular Meeting - Oct 16, 2018 10:15 AM

RESULT: ACCEPTED [UNANIMOUS]
MOVER: Sam Tornatore, Vice Chair
SECONDER: Dino C. Gavanes, District 1
AYES: Grant, Hart, Tornatore, Gavanes
ABSENT: Chaplin, Khouri, Larsen

6. COMMUNITY SERVICES - MARY KEATING

A. CS Requests That Also Require Finance And/Or County Board Approval

1. HHS-P-0305-18 Recommendation for the approval of a contract purchase order to Cellco Partnership dba Verizon Wireless for Cellular and Wireless Services for the Senior Services Staff while they are in the field, for the period October 1, 2018 through November 30, 2019, for a contract total amount not to exceed $45,072.00. Contract pursuant to the Governmental Joint Purchasing Act. (State of Illinois Contract #CMS793372P) (Grant Funded PY19 $45,072.00)

RESULT: APPROVED [UNANIMOUS]
MOVER: Sam Tornatore, Vice Chair
SECONDER: Dino C. Gavanes, District 1
AYES: Grant, Hart, Tornatore, Gavanes
ABSENT: Chaplin, Khouri, Larsen

2. HHS-P-0306-18 Intergovernmental Agreement Between DuPage County and PACE Suburban Bus Service for Para-transit Services to Eligible Seniors, for the period of August 1, 2018 through September 30, 2019, for a contract total not to exceed $42,971.00, per Intergovernmental Agreement. (Grant Funded)

Mary Keating, Director of Community Services, answered questions related to the PACE contract, which provides services through the Ride DuPage Program. Ms. Keating explained the service is specific to seniors that contact the Senior Services Department for assistance getting to medical and specialty appointments.

RESULT: APPROVED [UNANIMOUS]
MOVER: Sam Tornatore, Vice Chair
SECONDER: Dino C. Gavanes, District 1
AYES: Grant, Hart, Tornatore, Gavanes
ABSENT: Chaplin, Khouri, Larsen
3. HHS-P-0307-18 Recommendation for the approval of a contract purchase order to Family Shelter Services, Inc., to provide Advocacy Services to Victims of Domestic Violence. This contract covers the period of December 1, 2018 through November 30, 2019 for Community Services, for a contract total amount not to exceed $85,000.00; Other Professional Service not subject to competitive bidding per 55 ILCS 5/5-1022(a). Vendor selected pursuant to DuPage County Code Section 2-300.4-108 (1) (b).

RESULT: APPROVED [UNANIMOUS]
MOVER: Dino C. Gavanes, District 1
SECONDER: Sam Tornatore, Vice Chair
AYES: Grant, Hart, Tornatore, Gavanes
ABSENT: Chaplin, Khouri, Larsen

4. FI-R-0928-18 RESOLUTION -- Acceptance and Appropriation of Additional Funding for the Low Income Home Energy Assistance Program (LIHEAP) ComEd Rate Relief Program Grant FY18 Company 5000 – Accounting Unit 1500 – $15,000

RESULT: APPROVED [UNANIMOUS]
MOVER: Sam Tornatore, Vice Chair
SECONDER: Dino C. Gavanes, District 1
AYES: Grant, Hart, Tornatore, Gavanes
ABSENT: Chaplin, Khouri, Larsen

7. COMMUNITY DEVELOPMENT COMMISSION - MARY KEATING

A. CDC Requests That Also Require Finance And/Or County Board Approval

1. FI-R-0929-18 RESOLUTION -- Acceptance and Appropriation of Additional Funding for The Forty-Fourth (44th) Year Community Development Block Grant FY18, Company 5000 - Accounting Unit 1440, $364,559.00

RESULT: APPROVED [UNANIMOUS]
MOVER: Sam Tornatore, Vice Chair
SECONDER: Dino C. Gavanes, District 1
AYES: Grant, Hart, Tornatore, Gavanes
ABSENT: Chaplin, Khouri, Larsen

2. FI-R-0930-18 RESOLUTION -- Acceptance and Appropriation of Additional Funding for The Thirtieth (30th) Year Emergency Solutions Grant FY18 Company 5000 - Accounting Unit 1470 $4,731.00
Items 7.A.2. and 7.A.3. were combined and approved.

RESULT: APPROVED [UNANIMOUS]
MOVER: Dino C. Gavanes, District 1
SECONDER: Sam Tornatore, Vice Chair
AYES: Grant, Hart, Tornatore, Gavanes
ABSENT: Chaplin, Khouri, Larsen

3. FI-R-0931-18 RESOLUTION -- Acceptance and Appropriation of Additional Funding for The Twenty-Seventh (27th) Year Home Investment Partnership Grant FY18 Company 5000 - Accounting Unit 1450 $543,336.00

RESULT: APPROVED [UNANIMOUS]
MOVER: Dino C. Gavanes, District 1
SECONDER: Sam Tornatore, Vice Chair
AYES: Grant, Hart, Tornatore, Gavanes
ABSENT: Chaplin, Khouri, Larsen

8. DUPAGE CARE CENTER - JANELLE CHADWICK

A. DuPage Care Center Requests That Also Require Finance And/Or County Board Approval

1. Change Order -- FI-P-020B-13 - Amendment to Resolution FI-P-020A-13, issued to Toshiba American Business Solutions, Inc., to increase the contract in the amount of $3,730.00, taking the amended contract amount of $239,139.36, resulting in an amended contract total amount not to exceed $242,869.36, an increase of 1.56% (76-0001 SERV)

RESULT: APPROVED [UNANIMOUS]
MOVER: Sam Tornatore, Vice Chair
SECONDER: Dino C. Gavanes, District 1
AYES: Grant, Hart, Tornatore, Gavanes
ABSENT: Chaplin, Khouri, Larsen

2. FI-R-0932-18 RESOLUTION -- Acceptance and Appropriation of the DuPage Care Center Foundation - Recreation Therapy Grant FY19 Company 5000 – Accounting Unit 2120 $18,000
3. DT-P-0275-18 Recommendation for the approval of a contract purchase order to Red Wing Brands of America, Inc., to furnish safety shoes and work boots, as needed for the Division of Transportation, Public Works, Facilities Management, Stormwater and the Care Center, for the period December 1, 2018 through November 30, 2019, for a contract total not to exceed $53,000.00 (Division of Transportation $21,000.00, Public Works $15,000.00, Facilities Management $10,000.00, Stormwater $4,500.00, Care Center $2,500.00); Per renewal option under RFP 17-177-JM, first of three options to renew.

RESULT: APPROVED [UNANIMOUS]
MOVER: Dino C. Gavanes, District 1
SECONDER: Sam Tornatore, Vice Chair
AYES: Grant, Hart, Tornatore, Gavanes
ABSENT: Chaplin, Khouri, Larsen

4. HHS-P-0308-18 Recommendation for the approval of a contract purchase order to Medline Industries, Inc., for various linens, for the DuPage Care Center, for the period December 1, 2018 through November 30, 2019, for a contract total not to exceed $44,817.20, per low bid #18-193-CARE (This bid was split between 2 vendors - these 7 out of 13 items bid were the lowest for Medline Industries, Inc.)

RESULT: APPROVED [UNANIMOUS]
MOVER: Sam Tornatore, Vice Chair
SECONDER: Dino C. Gavanes, District 1
AYES: Grant, Hart, Tornatore, Gavanes
ABSENT: Chaplin, Khouri, Larsen

5. Change Order -- Change Order -- HHS-P-0394A-17 Amendment to Resolution HHS-P-0394-17 (P.O. 2788-0001 SERV) issued to Symbria Rehab, Inc., for Physical, Occupational, Speech and Respiratory Therapy and Consulting Services, for the period to increase contract in the amount of $63,341.00, resulting in an amended contract total amount not to exceed $1,263,341.00, an increase of 5.28%.

Items 8.A.5. and 8.A.6. were combined and approved.
RESULT: APPROVED [UNANIMOUS]  
MOVER: Dino C. Gavanes, District 1  
SECONDER: Sam Tornatore, Vice Chair  
AYES: Grant, Hart, Tornatore, Gavanes  
ABSENT: Chaplin, Khouri, Larsen

6. Change Order -- Change Order -- HHS-P-0431A-17 Amendment to Resolution HHS-P-0431-17, County Contract 2910-0001 SERV, issued to AirGas USA, LLC, to furnish and deliver liquid portable oxygen for the residents at the DuPage Care Center and increase encumbrance in the amount of $3,500.00, resulting in an amended contract total amount not to exceed $35,500.00, an increase of 10.94%.

RESULT: APPROVED [UNANIMOUS]  
MOVER: Dino C. Gavanes, District 1  
SECONDER: Sam Tornatore, Vice Chair  
AYES: Grant, Hart, Tornatore, Gavanes  
ABSENT: Chaplin, Khouri, Larsen

B. DuPage Care Center Requests for Parent Committee Final Approval  
C. DuPage Care Center Requests for Parent Committee Final Approval

Items 8.B.1. through 8.B.5. were combined and approved.

RESULT: APPROVED [UNANIMOUS]  
MOVER: Dino C. Gavanes, District 1  
SECONDER: Amy L. Grant, District 4  
AYES: Grant, Hart, Tornatore, Gavanes  
ABSENT: Chaplin, Khouri, Larsen

1. 2018-264 Recommendation for the approval of a contract purchase order to Office Depot, Inc., for office supplies, for the DuPage Care Center, for the period November 15, 2018 through November 14, 2019, for a contract total not to exceed $13,460.00, per renewal option under low bid #17-212-DT, first optional one year renewal.

2. 2018-265 Recommendation for the approval of a contract purchase order to Elite Medical Transportation, LLC, for transportation and dispatch services for the DuPage Care Center, for the period October 16, 2018 through October 15, 2019, for a contract total not to exceed $7,500.00, other Professional Services.
3. 2018-266 Recommendation for the approval of a contract purchase order to Midwest X-Ray Inc., for professional on-site diagnostic healthcare (ultrasounds, x-rays, holter monitoring, etc) for the period December 1, 2018 through November 30, 2019, for a total contract total not to exceed $12,000.00, per other professional services, third and final optional one-year renewal.

4. 2018-267 Recommendation for the approval of a contract purchase order to Cellco Partnership dba Verizon Wireless, for cellular and wireless services, for the DuPage Care Center, for the period December 1, 2018 through November 30, 2019, for a contract total not to exceed $13,750.00. Contract let pursuant to the Governmental Joint Purchasing Act (State of Illinois) Contract CMS793372P.

5. 2018-268 Recommendation for the approval of a contract purchase order to Bob Barker Company, for various linens, for the DuPage Care Center, for the period December 1, 2018 through November 30, 2019, for a contract total not to exceed $13,866.74, per low bid #18-193-CARE (This bid was split between 2 vendors - these 6 out of 13 items bid were the lowest for Bob Barker Company)

9. **BUDGET TRANSFERS**

10. **BUDGET TRANSFERS**

Items 9.1. and 9.2. were combined and approved.

| RESULT: | APPROVED [UNANIMOUS] |
| MOVER: | Sam Tornatore, Vice Chair |
| SECONDER: | Dino C. Gavanes, District 1 |
| AYES: | Grant, Hart, Tornatore, Gavanes |
| ABSENT: | Chaplin, Khouri, Larsen |

1. Budget Transfers -- DuPage Care Center - To transfer monies to cover professional engineering services through November 30, 2018 - $16,559.00

2. Budget Transfers -- DuPage Care Center - To transfer monies to cover remaining rental expenses for liquid medical oxygen, oxygen, helium, and carbon dioxide, and to transfer monies to cover water, sewer, and electricity through November 30, 2018 - $113,900.00

11. **TRAVEL REQUESTS - OVERNIGHT - REQUIRE COUNTY BOARD APPROVAL**

A. Authorization for Overnight Travel -- Community Services Case Manager Liaison to attend the Ombudsman Level 1 Training in Bloomington, Illinois from November 8, 2018 through November 9, 2018. Expenses to include transportation, lodging, and per diem for approximate total of $305.00. Seniors grant funded 5000-1720.
12. CONSENT ITEMS

13. INFORMATIONAL ITEMS

A. Grant Proposal Notifications -- Grant Proposal Notification & Report # 156-18 DuPage Care Center Foundation Recreation Therapy Grant FY19 - $18,000.00

Janelle Chadwick, Administrator of the DuPage Care Center, and Anita Rajagopal, Assistant Administrator, answered questions regarding the Recreation Therapy Grant, explaining the funding covers an assessment and actual therapy services for such things as music, reading, shopping, and field trips for residents.

RESULT: ACCEPTED AND PLACED ON FILE [UNANIMOUS]
MOVER: Sam Tornatore, Vice Chair
SECONDER: Dino C. Gavanes, District 1
AYES: Grant, Hart, Tornatore, Gavanes
ABSENT: Chaplin, Khouri, Larsen

14. RESIDENCY WAIVERS - JANELLE CHADWICK

15. COMMUNITY SERVICES UPDATE - MARY KEATING

Mary Keating stated that Elmhurst and Bensenville joined Wheaton, Glen Ellyn, Milton Township, Naperville, and Lisle in the Ride DuPage Program. Naperville and Lisle Townships have sponsors with Ride DuPage. The service is provided through contracts with PACE for municipalities, townships, or social services agencies that want to subsidize transportation for seniors and persons with disabilities, and is available 24/7, 365 days a year. Ms. Keating answered questions, replying that other municipalities and townships that are not part of the County sponsored program pay for the services. These municipalities determine eligibility and establish costs to the rider, providing varying services, such as a Dial-A-Ride model, with possible limited hours and services limited to the individual communities. Ms. Keating stated that a list of the transportation services is available in the Senior Services Resource Book on the DuPage County website with a full chapter on transportation. Ms. Keating offered to send the web link to Member Gavanes.

16. DUPAGE CARE CENTER UPDATE - JANELLE CHADWICK

Janelle Chadwick spoke regarding the staffing challenges at the DuPage Care Center which has escalated in the last few weeks with Certified Nursing Assistant (CNA) staff calling off their
scheduled shifts. With a fair number of staff calling off on short notice, other staff is impacted and supplemental staffing is not always readily available. The Care Center relies on recreational and restorative therapy staff, colleges, and students to assist with staffing. Some staff are relaying the shortages to the residents, causing angst to the residents and their families, which is addressed promptly by the Care Center management when brought to their attention. The Care Center is active with their recruiting and onboarding, and provides a competitive package in attempts to offset the staff shortages.

Discussion arose regarding the collective bargaining issues being a factor in the call-offs, and the determination that staff in question are at will employees subject to the DuPage County Personnel Policy. Ms. Chadwick stated that the Care Center ratios of staff per resident are strong, wages are strong, and there is a recreation therapy person, a social services person, and restorative therapy staff for every unit, which is above standards in the industry.

Tom Cuculich, Chief of Staff, clarified that the Care Center is fully staffed and does not short schedule the shifts. The shortages are due to staff calling off their shifts. Mr. Cuculich added that a representative from the American Federation of State, County, and Municipal Employees Union (AFSCME) was in the County Board office asking about the process of public comment at the County Board meeting. Mr. Cuculich is in contact with Human Resources and the bargaining team regarding talking to the (AFSCME) leadership considering there is an aggressive group of union organizers at the Care Center.

Chairman Hart commended Janelle Chadwick and her team, stating the Care Center is continually rated as a top tier facility, and consistently scores a four out of five in every category, including staffing.

17. OLD BUSINESS

18. NEW BUSINESS

19. ADJOURNMENT

There being no further business, the meeting was adjourned at 10:40 AM.
RESOLUTION
FI-R-0957-18

ACCEPTANCE AND APPROPRIATION OF ADDITIONAL FUNDING
FOR THE LIHEAP COMED RATE RELIEF PROGRAM GRANT FY17
COMPANY 5000 - ACCOUNTING UNIT 1500
$2,255

(Under the administrative direction of
the Community Services Department)

WHEREAS, the County of DuPage heretofore accepted and appropriated the LIHEAP
ComEd Rate Relief Program Grant FY17, Company 5000, Accounting Unit 1500 pursuant to
Resolution FI-R-0374-17 for the period March 1, 2017 through December 31, 2017; and

WHEREAS, the County of DuPage has been notified by the Illinois Association of
Community Action Agencies that additional grant funds in the amount of $2,255 (TWO
THOUSAND, TWO HUNDRED FIFTY-FIVE AND NO/100 DOLLARS) are available to be
used to continue to assist in administering the ComEd Care Program; and

WHEREAS, no additional County funds are required to receive this funding; and

WHEREAS, acceptance of this additional funding does not add any additional subsidy
from the County; and

WHEREAS, the County of DuPage finds that the need to appropriate said additional
funds creates an emergency within the meaning of the Counties Act, Budget Division, (55, ILCS
5/6-1003).

NOW, THEREFORE, BE IT RESOLVED by the DuPage County Board that the
additional funding in the amount of $2,255 (TWO THOUSAND, TWO HUNDRED FIFTY-
FIVE AND NO/100 DOLLARS) be and is hereby accepted; and

BE IT FURTHER RESOLVED by the DuPage County Board that the additional
appropriation on the attached sheet (Attachment) in the amount of $2,255 (TWO THOUSAND,
TWO HUNDRED FIFTY-FIVE AND NO/100 DOLLARS) be made and added to the LIHEAP
ComEd Rate Relief Program Grant FY17, Company 5000 - Accounting Unit 1500 and that the
program continue as originally approved in all other respects; and

BE IT FURTHER RESOLVED that should state and/or federal funding cease for this
grant, the Health and Human Services Committee shall review the need for continuing the
specified program; and

BE IT FURTHER RESOLVED that should the Health and Human Services Committee
determine the need for other funding is appropriate, it may recommend action to the County
Board by Resolution.

Enacted and approved this 27th day of November, 2018 at Wheaton, Illinois.
Resolution
FI-R-0957-18

DANIEL J. CRONIN, CHAIRMAN
DU PAGE COUNTY BOARD

Attest: _________________________________________
      PAUL HINDS, COUNTY CLERK
ADDITIONAL APPROPRIATION FOR
THE LIHEAP COMED RATE RELIEF PROGRAM GRANT FY17
COMPANY 5000 – ACCOUNTING UNIT 1500
$2,255

<table>
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<tr>
<th>REVENUE</th>
<th></th>
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<tr>
<td>46009-0000 – Private Grants</td>
<td>$2,255</td>
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<tr>
<td>TOTAL ANTICIPATED REVENUE</td>
<td>$2,255</td>
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<tr>
<th>EXPENDITURES</th>
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<td>PERSONNEL</td>
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<td>$442</td>
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<tr>
<td>51000 Benefit Payments</td>
<td>461</td>
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<tr>
<td>51010 Employer Share I.M.R.F.</td>
<td>85</td>
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<tr>
<td>51040 Employee Med &amp; Hosp Insurance</td>
<td>1,267</td>
</tr>
<tr>
<td>TOTAL PERSONNEL</td>
<td>$2,255</td>
</tr>
</tbody>
</table>

| TOTAL ADDITIONAL APPROPRIATION    | $2,255     |
AWARDING RESOLUTION
ISSUED TO WHEATON FAMILY PRACTICE LTD
FOR SERVICES AS MEDICAL DIRECTOR FOR THE CARE CENTER
(CONTRACT TOTAL AMOUNT $36,000.00)

WHEREAS, an agreement has been negotiated in accordance with County Board policy; and

WHEREAS, the Health and Human Service Committee recommends County Board approval for the issuance of a contract purchase order to Wheaton Family Practice, Ltd, for services of Medical Director for the DuPage Care Center, for the period December 1, 2018 through November 30, 2019.

NOW, THEREFORE BE IT RESOLVED, that said contract for the services of Medical Director at the DuPage Care Center, for the period December 1, 2018 through November 30, 2019, be, and it is hereby approved for issuance of a contract purchase order by the Procurement Division to Wheaton Family Practice, Ltd 560 Belmont Lane, Carol Stream, Illinois 60188, for a contract total amount of $36,000.00, Other Professional Service not subject to competitive bidding per 55 ILCS 5/5-1022(a). Vendor selected pursuant to DuPage County Code Section 2-300.4-108 (1) (b).

Enacted and approved this 27th day of November, 2018 at Wheaton, Illinois.

________________________________________
DANIEL J. CRONIN, CHAIRMAN
DU PAGE COUNTY BOARD

Attest: _________________________________
PAUL HINDS, COUNTY CLERK
## PROCUREMENT REVIEW CHECKLIST

**REQUISITION**

This form must accompany all County Purchase Requisitions.

### NEW PURCHASE ORDER REQUEST

<table>
<thead>
<tr>
<th>Date Submitted</th>
<th>Contract Total Amount</th>
<th>Contract Term</th>
<th>Requesting Dept.</th>
</tr>
</thead>
<tbody>
<tr>
<td>November 5, 2018</td>
<td>$36,000.00</td>
<td>December 1, 2018 - November 30, 2019</td>
<td>Dupage Care Center</td>
</tr>
</tbody>
</table>

### SOLICITATION METHOD FOR SOURCE SELECTION

**Decision Memo Required**  Other Professional Services - Detailed Vetting Process Required

- **Karen Graczyk**  Completed  11/05/2018 3:53 PM
- **Janelle Chadwick**  Completed  11/06/2018 12:27 PM
- **Kathy Ostrowski**  Completed  11/06/2018 2:45 PM
- **James McGuire**  Completed  11/06/2018 4:57 PM
- **Paul Rafac**  Completed  11/08/2018 6:13 PM
- **Tom Cuculich**  Completed  11/09/2018 7:32 AM
- **Kathy Ostrowski**  Completed  11/14/2018 3:49 PM
- **Health & Human Services**  Pending  11/20/2018 10:15 AM
- **Finance Committee**  Pending  11/27/2018 8:00 AM
- **County Board**  Pending  11/27/2018 10:00 AM
Procurement Review Checklist

Procurement Services Division
This form must accompany all Purchase Order Requisitions
Attach Required Vendor Ethics Disclosure Statement

Vendor: Wheaton Family Practice  Vendor #: 22089  Contract Term: 12/01/18 - 11/30/19  Contract Total: $36,000.00

Dept: DuPage Care Center  Contact: Clementine Nelson  Phone: 630-784-4251  Assigned Committee: Services

Description of Procurement/Scope of Work/Background: Medical director gives medical direction to the staff and other Physicians. Sees and cares for residents and oversees their medical conditions. Sits in on several different standing committee meetings. Regular in servicing of staff as to proper best care practices. Continuous resources to staff and is on call 24 hours a day 7 days a week.

Reason for Procurement: Licensure requirement and assurance of quality care of the residents of the DuPage Care Center.

FUNDING SOURCE

X Procurement budgeted for (FY and budget code(s)): 1200-2050-53070

Budget Transfer (Date) Add'l Information

DECISION MEMO NOT REQUIRED

LOWEST RESPONSIBLE QUOTE # or BID # ______________________ (QUOTE < $25,000, BID ≥ $25,000; attach Tabulation)

RENEWAL, Enter Bid # ______________________ Intergovernmental Agreement

SOLE SOURCE per DuPage County Purchasing Ordinance, Article 4-102(5) (attach Sole Source Justification form)

PER SS ILCS 5/5-1022 'Competitive Bids' (d) IT/Telecom purchases under $35,000.00 Public Utility

PER SS ILCS 5/5-1022 'Competitive Bids' (c) not suitable for competitive bidding. Explain below:

DECISION MEMO REQUIRED

Cooperative Procurement (DPC4-107) or Government Joint Purchasing Act Procurement (30ILCS525)

EXPLANATION OF REQUEST FOR PROPOSAL RFP # ______________________ (include Evaluation Summary if applicable)

RENEWAL OF RFP # ______________________

PROFESSIONAL SERVICES EXCLUDED per DuPage Ordinance (4-108) and 50 ILCS 510/2 (Architects, Engineers and Land Surveyors)

OTHER PROFESSIONAL SERVICES (detail vetting process on Decision Memo)

REQUEST WAIVER OF COUNTY BID RULES (only allowable to Statutory Limits)

OTHER THAN LOWEST RESPONSIBLE, BID # ______________________

PREPARED BY AND APPROVAL(S) (Initials Only)

cdk  Oct 30, 2018  11-6-18
Prepared By  Date  Recommended for Approval  Date  IT Approval, if required  Date

REVIEWED BY (Initials Only)

Buyer  11-6-18  Procurement Officer  11-6-18
Date  Date

Chief Financial Officer  11-9-18
Date

(Decision Memos Over $25,000)  (Decision Memos Over $25,000)

Date  Date
**Purchase Requisition**

**Procurement Services Division**

**Date:** Oct 30, 2018

**MinuteTraq (IQM2) ID #:** 13868

**Department Req #:** 7

**RFP, Bid or Quote #:**

### Send Purchase Order To:

<table>
<thead>
<tr>
<th>Vendor: Wheaton Family Practice</th>
<th>Vendor #: 22089</th>
<th>Dept: DuPage Care Center</th>
<th>Division: Administration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attn: Dr. John B. Pace</td>
<td>Email:</td>
<td>Attn: Janelle Chadwick</td>
<td>Email: janelle.chadwick</td>
</tr>
<tr>
<td>Address: 560 Belmont Lane</td>
<td></td>
<td>Address: 400 N. County Farm Road</td>
<td></td>
</tr>
<tr>
<td>City: Carol Stream</td>
<td>State: IL</td>
<td>Zip: 60188</td>
<td></td>
</tr>
<tr>
<td>Phone: 630-665-6500</td>
<td>Fax:</td>
<td>Phone: 630-784-4202</td>
<td>Fax:</td>
</tr>
</tbody>
</table>

### Send Invoices To:

<table>
<thead>
<tr>
<th>Vendor: Wheaton Family Practice</th>
<th>Vendor #: 22089</th>
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<td>Fax:</td>
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<td>Fax:</td>
</tr>
</tbody>
</table>

### Send Payments To:

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<th>Vendor #: 22089</th>
<th>Dept: DuPage Care Center</th>
<th>Division: Administration</th>
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<tr>
<td>Phone: 630-665-6500</td>
<td>Fax:</td>
<td>Phone: 630-784-4202</td>
<td>Fax:</td>
</tr>
</tbody>
</table>

### Payment Terms

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<thead>
<tr>
<th>Use for</th>
<th>F.O.B.</th>
<th>PO 20 Delivery Date</th>
<th>Requisitioner</th>
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</thead>
<tbody>
<tr>
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<td>Destination</td>
<td>Christine Kliebhan</td>
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</tr>
<tr>
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<td>Contract Administrator</td>
<td>Contract Start Date</td>
<td>Contract End Date</td>
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<td></td>
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<td>November 30, 2019</td>
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### LN | Qty | UOM | Item Detail (Product #) | Description | FY | Dept # | Acctg Unit | Acct # | Sub-Accts and/or Activity # | Unit Price | Extension |
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<tr>
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<td>53070</td>
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</tr>
</tbody>
</table>

Requisition Total $ 36,000

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

Professional Services for a Medical director for the DuPage Care Center for the period December 1, 2018 through November 30, 2019, per other professional services per 55 ILCS 5/5-1022 (c).

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

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

November 20, 2018 HHS

November 27, 2018 County Board

Attachment: Wheaton Family Practice - Requisition (HHS-P-0318-18 - Wheaton Family Practice)
Renew and approve Medical Director Services for the DuPage Care Center for the period December 1, 2018 through November 30, 2019.

This function is a requirement of the Illinois Department of Public Health for licensure. Not only is it a licensure requirement, but it also necessary to meet the DPCC resident's medical needs and to help ensure quality care.

Facility needs to engage the services of a Physician to act as Medical Director per State and Federal regulations. The Medical Director provides training and guidance of best care practices for the well being of the residents the DuPage Care Center serves. He/she is a member of various committees that develop best care practices and monitors the results of those practices. Medical Director, or designee, is on call 24 hours a day 7 days a week.

To start the process of recruitment of an unknown new Medical Director to meet the needs of the DuPage Care Center’s population, with the knowledge of the Illinois Department of Public Health skilled nursing regulations would be time consuming and would not be cost effective due to a vast learning curve.

To continue to use the current Medical Director, in which the DuPage Care Center has an outstanding working relationship with.

FY18  1200-2050-53070  $36,000.00
AGREEMENT BETWEEN
THE COUNTY OF DU PAGE
AND
WHEATON FAMILY PRACTICE, LTD.
FOR THE SERVICES DR. JOHN B. PACE, MD. AS MEDICAL DIRECTOR

This Agreement is entered into this 1st day of December, 2018, between the County of DuPage, a body corporate and politic, by and through its DuPage Care Center, a skilled nursing facility (hereinafter "Center"), and Wheaton Family Practice, Ltd., an Illinois Business Corporation having its principal place of business located at 560 Belmont Ln., Carol Stream, Illinois 60188.

RECITALS

WHEREAS, the Center is a county nursing home, mandated to give priority to admission of infirm and chronically ill persons unable to purchase care and maintenance pursuant to 55 ILCS 5/5-21010;

WHEREAS, Center desires to arrange for the services of a physician to serve as the Center’s Medical Director;

WHEREAS, Wheaton Family Practice is willing to offer the services of its employee, Dr. John B. Pace M.D., who is a physician licensed to practice medicine in the State of Illinois, as Medical Director responsible for implementation of resident care policies, the coordination of medical care rendered at the Center, and to execute such other duties as agreed by the parties in consideration for the monthly payment set forth in this Agreement;

NOW, THEREFORE, in consideration of these premises and of the mutual promises contained herein, the parties do hereby agree as follows:

ARTICLE I: SCOPE OF SERVICES

1.1 Key Person. Wheaton Family Practice agrees to provide the services of its employee, Dr. Pace serve as Medical Director of the Center. Wheaton Family Practice hereby acknowledges that the services of Dr. Pace as Medical Director are key to this Agreement, and that this agreement shall terminate automatically upon the death or incapacity of Dr. Pace, or other such instance in which Dr. Pace is unable to provide services to the Center as Medical Director.

1.2 Services Provided. The work to be performed by the Medical Director shall include those services generally performed by a Medical Director in a skilled nursing facility, including but not limited to:

a. Supervision and Monitoring. The Medical Director shall be responsible for the supervision, monitoring, and management of any and all medical care, treatment, and services rendered by physicians, nurses, and other allied health service workers at the Center. Said responsibility includes, but is not limited to, review and approval of applications for clinical privileges, supervision, monitoring and evaluations of medical staff performance and recommendations for sanctions in accordance with Medical Staff Bylaws, consultations, assessments, audits, and evaluation of the adequacy and quality of care rendered by nurses, supportive staff, and allied health service workers.

b. Medical Records. The Medical Director shall be responsible for assuring that physician’s orders and medical records are written in a manner consistent with the standards of medical practice, and for conducting regular reviews of all resident’s charts and medical records to assure that each resident is getting adequate and appropriate medical care and treatment. The Medical Director shall further provide consultations with the Center’s Administrator and medical staff regarding the evaluation and improvement of the medical records system, and prepare such reports, documents and correspondence as requested by the Administrator.

c. Coverage and Scheduling. The Medical Director shall be responsible for assuring that there is physician coverage of resident medical care at the Center on a constant basis, twenty-four (24) hours, seven (7) days per week. In the event that an Associate Staff Physician is not available for coverage, the Medical Director shall make such arrangements necessary for Center residents to receive access
to appropriate medical care and treatment.

d. Coordination of Medical Care. The Medical Director shall be responsible for the coordination of care at the Center. This shall require the Medical Director to assist the Center in obtaining and maintaining timely and appropriate medical care that supports the healthcare needs of the residents, is consistent with current standards of practice, and helps the Center meet its regulatory requirements. Medical Director shall conduct staff meetings which include but are not limited to Infection Control, Pharmaceutical Service, Patient Care Policy, and Continual Quality Improvement (CQI). The Medical Director shall also meet with other health service consultants and independent contractors rendering service at the Center regarding the adequacy and effectiveness of their services at the Center.

e. Health and Safety of Employees and Residents. The Medical Director shall be responsible for surveillance of the health status of the employees and other health service workers at the Center. The Medical Director shall investigate all accidents and incidents involving potential hazards to the health and safety of employees, service workers, and residents, and make recommendations for improvements to the Administrator of the Center.

f. Policy and Program Development. The Medical Director shall be responsible for the development of Medical Staff Bylaws. The Medical Director will provide ongoing guidance in the development and implementation of resident care policies, including review and revision of existing policies. The Medical Director will collaborate with the Center regarding the policies and protocols that guide clinical decision making. The Medical Director and Administrator shall advise and consult each other on a regular basis regarding the adequacy and appropriateness of the Center’s resident medical services, medical equipment, and care rendered by professional and supportive service workers. The Medical Director shall actively participate in the development and implementation of the Center’s Continual Quality Improvement (CQI) Program and such other programs as requested by Administrator.

g. Consultation and Training. The Medical Director shall provide consultations as needed with Associate Staff Physicians and other physicians with clinical staff privileges. The Medical Director shall participate in Center’s In-Service Training Program, and shall offer consultations and training as needed in nursing, supportive staff and allied health services workers. The Medical Director shall advise the Administrator, Director of Nursing, and Social Worker in evaluating the Center’s ability to meet psychosocial, medical, and physical needs of Center’s residents.

h. Public Affairs. The Medical Director shall act as the Center’s medical representative in the Community and shall participate in community relations and public service projects as may benefit the Center.

1.3 Wheaton Family Practice shall ensure that Dr. Pace shall at all times be duly licensed to practice medicine in the State of Illinois, have a current narcotics number, and maintain in good standing medical staff and clinical privileges at the Center. Wheaton Family Practice shall ensure that Dr. Pace complies with all standards of the canons of professional ethics, Joint Commission on Accreditation of Health Care Organizations, and all applicable statutes, rules, regulations and standards of any and all governmental authorities and accreditation bodies.

ARTICLE II: TERM AND TERMINATION OF AGREEMENT

2.1 Term and Termination Without Cause: This Agreement shall commence on the date stated above, until November 30, 2019. Thereafter, the agreement shall renew for one (1) year successive terms unless terminated in accordance with Section 2.2 of this Agreement.

2.2 Termination. Either party to this Agreement may terminate this Agreement, with or without cause, upon thirty (30) days prior written notice to the other party.

ARTICLE III: COMPENSATION
3.1 **Compensation.** The Center shall pay Wheaton Family Practice for Dr. Pace’s services as Medical Director at the rate of one hundred fifty dollars ($150.00) per hour, not to exceed three thousand dollars ($3,000.00) per month. Wheaton Family Practice shall submit monthly invoices documenting Dr. Pace’s services and time spent.

**ARTICLE IV: WORKING HOURS**

4.1 Wheaton Family Practice shall provide Dr. Pace’s services as Medical Director an average of twenty (20) hours per month or two hundred forty (240) hours per year on a timely basis to meet the needs of the Center, as determined and requested by the Administrator of the Center.

**ARTICLE V: MISCELLANEOUS**

5.1 **Independent Contractor Status.** In the performance of the work, duties, and obligations devolving upon it under this Agreement, it is mutually understood and agreed that Wheaton Family Practice and its employee, Dr. Pace are at all times acting and performing as an independent contractor engaged in the practice of medicine. The Center shall neither have nor exercise any control or direction over the methods by which Wheaton Family Practice, its employees or agents shall perform their work and functions. The sole interest and responsibility of the Center is to ensure that the services covered by this agreement shall be performed and rendered in a competent, efficient, and satisfactory manner. The standards of medical practice shall be determined by the Medical Director and medical staff of the Center. None of the provisions of this Agreement is intended to create nor shall any be deemed or construed by the parties to create any relationship between the parties hereto other than that of independent entities contracting with each other solely for the purpose of effecting the provisions of this Agreement.

5.2 **Indemnification.** This Agreement shall not require either party to indemnify or hold the other harmless for any claims, liabilities, damages, or expenses, including attorney’s fees, incurred in defending or compromising actions brought by any party arising out of or related to a party’s acts or omissions, or those of its employees or agents in the performance of this Agreement.

5.3 **Tax Liability.** At all times, Dr. Pace shall be an employee of Wheaton Family Practice and shall not be deemed an employee of the Center for any purpose whatsoever, and neither shall be eligible to participate in any benefit program provided by the Center or the County of DuPage for its employees. Wheaton Family Practice shall be exclusively responsible for the payment of all wages and salaries, taxes, withholding payments, penalties, fees, fringe benefits, professional liability insurance premiums, contributions to insurance and pension or other deferred compensation plans including but not limited to- Workers’ Compensation and Social Security obligations, licensing fees, etc., and the filing of all necessary documents, forms, and returns pertinent to all of the foregoing. Wheaton Family Practice shall not bring, and shall hold harmless and provide the Center with a defense against any and all, claims that the Center is responsible for the payment or filing of any of the foregoing payments, withholdings, contributions, taxes, and documents and returns, including but not limited to Social Security taxes and employer income tax withholding obligations.

5.5 **Insurance.** The County of DuPage shall obtain such medical professional liability coverage or medical malpractice coverage as it deems necessary, and at its own expense to cover itself and its employees, as defined by the Local Governmental and Governmental Employees Tort Immunity Act, for any claims against the County arising from or related to the services performed by Wheaton Family Practice in the performance of this Agreement. Wheaton Family Practice shall be responsible for obtaining such medical professional liability coverage or medical malpractice coverage as it deems necessary, and at its own expense to cover itself and its employees for any claims against Wheaton Family Practice arising from or related to the services performed by Wheaton Family Practice in the performance of this Agreement. Neither party shall be required to insure the other.

5.6 **Assignment.** Wheaton Family Practice shall not assign this Agreement to any other corporation,
medical practice group, agency, or contractor.

5.7 **Records.** It is hereby acknowledged and understood by the parties that Center owns and controls all the resident’s medical charts, records and files, and that these records and related documents are to be kept confidential and shall not be disclosed without the resident’s consent or order of court. Medical Director shall be allowed access to those records for purposes of carrying out his duties and obligations under this Agreement.

5.9 **Notice.** All notices or other written communication required under this Agreement shall be deemed to have been duly given if delivered personally in hand or by certified mail, return receipt requested, postage prepaid, and addressed to the appropriate party at the following:

a. **If to Center:**
   DuPage Care Center
   400 North County Farm Road
   Wheaton, Illinois 60187
   Attn: Janelle Chadwick, Administrator

b. **If to Wheaton Family Practice:**
   John B. Pace, M.D.
   712 Forest Glen Lane
   Oak Brook, Illinois 60523

5.10 **Governing Law.** This Agreement and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of Illinois.

5.11 **Entire Agreement to Services as Medical Director.** This Agreement constitutes the entire agreement of the parties and is intended as a complete and exclusive statement of the promises, representations, negotiations, discussions and agreements that have been made in connection with the services described herein. No modification or amendment shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto. Nothing in this Agreement shall preclude or be contingent upon any Agreement between the Center, Wheaton Family Practice or Dr. Pace permitting Wheaton Family Services and or Dr. Pace to render the medical care and treatment to those Center residents who have not retained their own physician in consideration of receiving such fees directly from the resident, or from third party payors such as private insurance, Medicaid, Medicare or the Veteran’s Administration in accordance with the policies of the Center.

**ARTICLE VI: ENFORCEABILITY**

6.1 **Waiver of Breach.** The waiver by either party of a breach or violation of any provision of this Agreement shall not operate as, or be construed as, a waiver of that or other provisions hereof.

6.2 **Severability.** In the event any provision of this Agreement is held to be unenforceable for any reason, the enforceability thereof shall not affect the remainder of the Agreement which will remain in full force, effect, and enforceability in accordance with its terms.
IN WITNESS WHEREOF, the parties have set their hands and seals hereto as of the day and year first above written.

Center
DUPAGE CARE CENTER

Wheaton Family Practice
WHEATON FAMILY PRACTICE, LTD.

BY: Signature on File
Janell Chadwick
Administrator

DATE: 11-1-18

BY: Signature on File
Dr. John B. Pace

DATE: 11/2/18
The DuPage County Procurement Ordinance requires the following written disclosures prior to award:

1. Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the county resulting in an aggregate amount at or in excess of $25,000, shall provide to Procurement Services Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor within the current and previous calendar year to any incumbent county board member, county board chairman, or countywide elected official whose office the contract to be awarded will benefit. The contractor, union or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

<table>
<thead>
<tr>
<th>Recipient</th>
<th>Donor</th>
<th>Description (e.g. cash, type of item, in-kind services, etc.)</th>
<th>Amount/Value</th>
<th>Date Made</th>
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<tr>
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</tr>
</tbody>
</table>

2. All contractors and vendors who have obtained or are seeking contracts with the county shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

<table>
<thead>
<tr>
<th>Lobbyists, Agents and Representatives and all Individuals who are or will be having contact with county officers or employees in relation to the contract or bid</th>
<th>Telephone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
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A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future county contracts.

Continuing disclosure is required, and I agree to update this disclosure form as follows:
- If information changes, within five (5) days of change, or prior to county action, whichever is sooner
- 30 days prior to the optional renewal of any contract
- Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative adjustments

The full text for the county's ethics and procurement policies and ordinances are available at:
http://www.dupageco.org/CountyPurch/Policies

I hereby acknowledge that I have received, have read, and understand these requirements.

Authorized Signature

Signature on File

Printed Name
JOHN B. PACE

Title
MEDICAL DIRECTOR

Date
9/19/16

Packet Pg. 25
AWARDING RESOLUTION
ISSUED TO MUSIC SPEAKS, LLC,
FOR MUSIC THERAPY SERVICES FOR THE
RESIDENTS AT THE DUPAGE CARE CENTER
(CONTRACT TOTAL AMOUNT: $48,124.00)

WHEREAS, bids have been taken and processed in accordance with County Board policy; and

WHEREAS, the Health and Human Service Committee recommends County Board approval for the issuance of a contract purchase order for music therapy services, for the period January 1, 2019 through December 31, 2019, for the DuPage Care Center.

NOW, THEREFORE BE IT RESOLVED, that said contract, for music therapy services, for the period January 1, 2019 through December 31, 2019, for the DuPage Care Center, be, and it is hereby approved for issuance of a contract purchase order by the Procurement Division to Music Speaks, LLC, 16620 40th Avenue North, Minneapolis, Minnesota 55446, for a total contract amount of $48,124.00.

Enacted and approved this 27th day of November, 2018 at Wheaton, Illinois.

________________________________
DANIEL J. CRONIN, CHAIRMAN
DUPAGE COUNTY BOARD

Attest: _________________________________
PAUL HINDS, COUNTY CLERK
PROCUREMENT REVIEW CHECKLIST
REQUISITION

This form must accompany all County Purchase Requisitions.

<table>
<thead>
<tr>
<th>NEW PURCHASE ORDER REQUEST</th>
</tr>
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<tbody>
<tr>
<td><strong>DATE SUBMITTED</strong></td>
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<td>November 5, 2018</td>
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SOLICITATION METHOD FOR SOURCE SELECTION

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<th>Status</th>
<th>Date</th>
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</thead>
<tbody>
<tr>
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<tr>
<td>Janelle Chadwick</td>
<td>Completed</td>
<td>11/06/2018 12:27 PM</td>
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<td>Kathy Ostrowski</td>
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<tr>
<td>James McGuire</td>
<td>Completed</td>
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<tr>
<td>Paul Rafac</td>
<td>Completed</td>
<td>11/08/2018 6:15 PM</td>
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<tr>
<td>Tom Cuculich</td>
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<td>Pending</td>
<td>11/27/2018 8:00 AM</td>
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<tr>
<td>County Board</td>
<td>Pending</td>
<td>11/27/2018 10:00 AM</td>
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</tbody>
</table>
Procurement Review Checklist
Procurement Services Division
This form must accompany all Purchase Order Requisitions
Attach Required Vendor Ethics Disclosure Statement

Vendor: Music Speaks, LLC
Vendor #: 20683
Dept: DuPage Care Center
Contact: Susan Coblentz
Phone: 630-784-4302

Contract Term: Jan 1, 2019 - Dec 31, 2019
Contract Total: $48,124.00

Description of Procurement/Scope of Work/Background
Music Therapy services for the residents at the DuPage Care Center.

Reason for Procurement
Provide music therapy at the DuPage care center to enhance the lives of residents and families using music therapy techniques to promote healing, bring comfort and improve quality of life. (DuPage Care Center Foundation Funded)

FUNDING SOURCE
Procurement budgeted for (FY and budget code(s)): 1200-2120-53090
Box 1

DECISION MEMO NOT REQUIRED
☐ LOWEST RESPONSIBLE QUOTE # or BID #__________________________ (QUOTE < $25,000, BID ≥ $25,000; attach Tabulation)
☐ RENEWAL, Enter Bid # ________________________ ☐ Intergovernmental Agreement
☐ SOLE SOURCE per DuPage County Purchasing Ordinance, Article 4-102(S) (attach Sole Source Justification form)
☐ PER 55 ILCS 5/5-1022 'Competitive Bids' (d) IT/Telecom purchases under $35,000.00 ☐ Public Utility
☐ PER 55 ILCS 5/5-1022 'Competitive Bids' (c) not suitable for competitive bidding. Explain below:

☐ Cooperative Procurement (DPC4-107) or Government Joint Purchasing Act Procurement (30ILCS325)
☐ EXPLANATION OF REQUEST FOR PROPOSAL RFP #__________________________ (include Evaluation Summary if applicable)
☐ RENEWAL OF RFP # 17-206-JM
☐ PROFESSIONAL SERVICES EXCLUDED per DuPage Ordinance (4-108) and 50 ILCS 510/2 (Architects, Engineers and Land Surveyors)
☐ OTHER PROFESSIONAL SERVICES (detail vetting process on Decision Memo)
☐ REQUEST WAIVER OF COUNTY BID RULES (only allowable to Statutory Limits)
☐ OTHER THAN LOWEST RESPONSIBLE, BID # ________________________

PREPARED BY AND APPROVAL(S) (Initials Only)
cdk
Prepared By Date Recommended for Approval Date IT Approval, if required Date

REVIEWS BY (Initials Only)
Buyer Date Procurement Officer Date
Chief Financial Officer Date Chairman's Office Date

Attachment: Music Speaks, LLC Checklist (HHS-P-0319-18 : Music Speaks, LLC)
FORM OPTIMIZED FOR ACROBAT AND ADOBE READER VERSION 9 OR LATER

Packet Pg. 28
**Purchase Requisition**  
**Procurement Services Division**

**Send Purchase Order To:**  
Vendor: Music Speaks, LLC  
Vendor #: 20683  
Dept: DuPage Care Center  
Division: Recreation

Attn: Stephanie Johnson  
Email: stephanie@musicspeakstherapy.com

Address: 16620 40th Avenue North  
City: Minneapolis  
State: MN  
Zip: 55446

Phone: 563-249-5781  
Fax: 866-283-3639

**Send Invoices To:**  
Vendor: Music Speaks, LLC  
Vendor #: 20683  
Dept: DuPage Care Center  
Division: Recreation

Attn: Stephanie Johnson  
Email: stephanie@musicspeakstherapy.com

Address: 16620 40th Avenue North  
City: Minneapolis  
State: MN  
Zip: 55446

Phone: 563-249-5781  
Fax: 866-283-3639

**Send Payments To:**  
Vendor: Music Speaks, LLC  
Vendor #: 20683  
Dept: DuPage Care Center  
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Attn: Stephanie Johnson  
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**Ship To:**  
Vendor: Music Speaks, LLC  
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Email: stephanie@musicspeakstherapy.com

Address: 16620 40th Avenue North  
City: Minneapolis  
State: MN  
Zip: 55446

Phone: 563-249-5781  
Fax: 866-283-3639

---

**Payment Terms:**  
F.O.B.  
PO 20 Delivery Date:  
Requisitioner: Christine Kliebhan

**PO 50 ILCS 505/1**  
Use for Contract Administrator:  
Contract Start Date: January 1, 2019  
Contract End Date: December 31, 2019

---

**LN**  
**Qty**  
**UOM**  
**Item Detail (Product #)**  
**Description**  
**FY**  
**Dept #**  
**Acct #**  
**Sub-Accts and/or Activity #**  
**Unit Price**  
**Extension**

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**Requisition Total:** $48,124.00

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

Music therapy services for the residents at the DuPage Care Center, for the period January 1, 2019 through December 31, 2019, per renewal under Proposal #17-206-JM. (Foundation funded)

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

---

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

November 20, 2018  
Health and Human Services Committee

November 27, 2018  
County Board Meeting
Decision Memo
Procurement Services Division
This form is required for all Professional Service Contracts over $25,000 and as otherwise required by the Procurement Review Checklist.

Requesting Department: DuPage Care Center
Contact Email: susan.coblentz@dupageco.org
Vendor Name: Music Speaks, LLC

Department Contact: Susan Coblentz
Contact Phone: 630-784-4302
Vendor #:

Action Requested - Identify the action to be taken and the total cost; for instance, approval of new contract, renew contract, increase contract, etc.

Approval of renewal to contract for Music Speaks, LLC, for music therapy services for the residents at the DuPage Care Center, for the period January 1, 2019 through December 31, 2019, in the amount of $48,124.00, per most qualified offeror, per first optional renewal under proposal #17-206-JM.

Summary Explanation/Background - Provide an executive summary of the action. Explain why it is necessary and what is to be accomplished.

Music Therapy is an established healthcare profession that uses music to address physical, emotional, cognitive and social needs of individuals of all ages. Music is used with elderly persons to increase or maintain their level of physical, mental, and social/emotional functioning. The sensory and intellectual stimulation of music can help maintain a person’s quality of life. With the advancements in medicine and the increased number of independent and assisted living facilities available to residents that fall into that category, the long term care industry is caring for a population that is more medically compromised. Residents are less able to meet their own needs independently and are requiring more assistance to do so. IDPH Regulations require stimulation with lower functioning residents.

Strategic Impact

Quality of Life

Select one of the five strategic imperatives in the County’s Strategic Plan this action will most impact and provide a brief explanation.

Having the ability to employ a part time Music Therapist would enable Recreation staff to better meet the needs of this growing population of residents with complex medical needs. This service would provide support that is more in line with resident needs by providing daily stimulation to residents for longer durations.

Source Selection/Vetting Information - Describe method used to select source.

RFP #17-206-JM

Recommendations/Alternatives - Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request.

1) Renew contract with Music Speaks to enhance the lives of over 320 Residents, including some of the most vulnerable residents that reside at the DuPage Care Center.
2) Do not renew contract. Find a new service provider using the grant funds that were offered by the DuPage Care Center Foundation.

Fiscal Impact/Cost Summary - Include projected cost for each fiscal year, approved budget amount and account number, source of funds, and any future funding requirements along with any narrative.

Services funded by the DuPage Care Center Foundation

5000-2120-53090 $48,124.00
Required Vendor Ethics Disclosure Statement

Failure to complete and return this form may result in delay or cancellation of the County's Contractual Obligation.

Company Name: Whalen Family Practice Ltd
Contact Phone: 630-665-6500

Company Contact: Mary Triggiano
Contact Email: Mary.Triggiano@dupageandc.

The DuPage County Procurement Ordinance requires the following written disclosures prior to award:

1. Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the county resulting in an aggregate amount at or in excess of $25,000, shall provide to Procurement Services Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor within the current and previous calendar year to any incumbent county board member, county board chairman, or countywide elected official whose office the contract to be awarded will benefit. The contractor, union or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

- [ ] NONE (check here) - if no contributions have been made

<table>
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<tr>
<th>Recipient</th>
<th>Donor</th>
<th>Description (e.g. cash, type of item, in-kind services, etc.)</th>
<th>Amount/Value.</th>
<th>Date Made</th>
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2. All contractors and vendors who have obtained or are seeking contracts with the county shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

- [ ] NONE (check here) - if no contacts have been made

<table>
<thead>
<tr>
<th>Lobbyists, Agents and Representatives and all Individuals who are or will be having contact with county officers or employees in relation to the contract or bid</th>
<th>Teleph:</th>
<th>Email</th>
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<tbody>
<tr>
<td>NONE</td>
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</table>

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future county contracts.

Continuing disclosure is required, and I agree to update this disclosure form as follows:
- If information changes, within five (5) days of change, or prior to county action, whichever is sooner
- 30 days prior to the optional renewal of any contract
- Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative adjustments

The full text for the county's ethics and procurement policies and ordinances are available at:
http://www.dupageco.gov/CountyBoard/Policies/

I hereby acknowledge that I have received, have read, and understand these requirements.

Authorized Signature
Signed: John B. Pace
Title: Medical Director
Date: 9/19/18

Attach additional sheets if necessary. Sign each sheet and number each page. Page:  of (total number of pages)
AWARDING RESOLUTION

ISSUED TO INTERBORO PACKAGING CORPORATION

TO FURNISH AND DELIVER PLASTIC TRASH CAN AND RECYCLING CAN LINERS
FOR THE DUPAGE CARE CENTER
(CONTRACT TOTAL AMOUNT: $96,583.86)

WHEREAS, bids have been taken and processed in accordance with County Board policy; and

WHEREAS, the Health and Human Services Committee recommends County Board approval for the issuance of a contract purchase order to Interboro Packaging Corporation, to furnish and deliver plastic trash can and recycling can liners, as needed for DuPage Care Center, for the period December 1, 2018 through May 16, 2020.

NOW, THEREFORE BE IT RESOLVED, that County Contract covering said, to furnish and deliver plastic trash can and recycling can liners, as needed for DuPage Care Center, for the period December 1, 2018 through May 16, 2020, be, and it is hereby approved for issuance of a contract purchase order by the Procurement Division to, Interboro Packaging Corporation, 114 Bracken Road, Montgomery, NY 12549, for a contract total amount not to exceed $96,583.86, per lowest responsible bid #17-045-JM.

Enacted and approved this 27th day of November, 2018 at Wheaton, Illinois.

____________________________________
DANIEL J. CRONIN, CHAIRMAN
DU PAGE COUNTY BOARD

Attest: _____________________________
PAUL HINDS, COUNTY CLERK
# PROCUREMENT REVIEW CHECKLIST

**REQUISITION**

This form must accompany all County Purchase Requisitions.

## NEW PURCHASE ORDER REQUEST

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<tr>
<th>DATE SUBMITTED</th>
<th>CONTRACT TOTAL AMOUNT</th>
<th>CONTRACT TERM</th>
<th>REQUESTING DEPT</th>
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<td>November 5, 2018</td>
<td>$96,583.86</td>
<td>DECEMBER 1, 2018 - MAY 16, 2020</td>
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## SOLICITATION METHOD FOR SOURCE SELECTION

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<td>Janelle Chadwick</td>
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<td>11/06/2018 12:25 PM</td>
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<td>James McGuire</td>
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<td>Paul Rafac</td>
<td>Completed</td>
<td>11/08/2018 6:12 PM</td>
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<td>Kathy Ostrowski</td>
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<td>Pending</td>
<td>11/27/2018 8:00 AM</td>
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<tr>
<td>County Board</td>
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<td>11/27/2018 10:00 AM</td>
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</table>
### Procurement Review Checklist

**Procurement Services Division**

This form must accompany all Purchase Order Requisitions

Attach Required Vendor Ethics Disclosure Statement

---

**Vendor:** Interboro Packaging Company  
**Vendor #:** 11379

**Dept:** DuPage Care Center  
**Contact:** Vinit Patel

**Contract**  
**Date:** December 1, 2018  
**Term:** 16, 2020  
**Total:** $96,583.86

**Assigned**  
**Committee:** Health and Human Services

---

**Vendor:** Interboro Packaging Company  
**Vendor #:** 11379

**Dept:** DuPage Care Center  
**Contact:** Vinit Patel

**Date:** Oct 30, 2018

**I QM2 ID #:** 13870

---

**Description of Procurement/Scope of Work/Background**

Furnish and deliver trash can and recycling can liners for the DuPage Care Center, for the period December 1, 2018 through May 16, 2020, per bid #17-045-JM.

**Reason for Procurement**

The DuPage Care Center uses trash can liners for trash cans throughout the Center. With liners, the trash is contained and odor associated with trash would be eliminated.

Note - Facilities Management had bid this in 2017 - DPCC had bid this also but is out of renewals - instead of bidding the same specifications as the above bid, Procurement advised that we jointly purchase from the Bid that Facilities put forth (17-045-JM). Therefore, we are preparing a contract for 18 months to align with the same contract period as other County Departments.

---

**FUNDING SOURCE**

- [ ] Procurement budgeted for (FY and budget code(s)): 1200-2035-52280
- [ ] Budget Transfer (Date) ____________ Add’l Information ____________

**DECISION MEMO NOT REQUIRED**

- [ ] LOWEST RESPONSIBLE QUOTE # or BID # 17-045-JM (QUOTE < $25,000, BID ≥ $25,000; attach Tabulation)
- [ ] RENEWAL, Enter Bid # ____________ Intergovernmental Agreement
- [ ] SOLE SOURCE per DuPage County Purchasing Ordinance, Article 4-102(5) (attach Sole Source Justification form)
- [ ] PER 55 ILCS 5/5-1022 ‘Competitive Bids’ (d) IT/Telecom purchases under $35,000.00 Public Utility
- [ ] PER 55 ILCS 5/5-1022 ‘Competitive Bids’ (c) not suitable for competitive bidding. Explain below:

---

**DECISION MEMO REQUIRED**

- [ ] Cooperative Procurement (DPC4-107) or Government Joint Purchasing Act Procurement (30ILCS525)
- [ ] EXPLANATION OF REQUEST FOR PROPOSAL RFP # ____________ (include Evaluation Summary if applicable)
- [ ] RENEWAL OF RFP # ____________
- [ ] PROFESSIONAL SERVICES EXCLUDED per DuPage Ordinance (4-108) and 50 ILCS 510/2 (Architects, Engineers and Land Surveyors)
- [ ] OTHER PROFESSIONAL SERVICES (detail vetting process on Decision Memo)
- [ ] REQUEST WAIVER OF COUNTY BID RULES (only allowable to Statutory Limits)
- [ ] OTHER THAN LOWEST RESPONSIBLE, BID # ____________

---

**PREPARED BY AND APPROVAL(S) (Initials Only)**

- Prepared By: cdk  
  - Date: Oct 30, 2018
  - Recommended for Approval:  
    - Date: 11/1/18  
    - IT Approval, if required: Date

**REVIEWED BY (Initials Only)**

- Buyer:  
  - Date: 11/6/18
  - Procurement Officer:  
    - Date: 11/7/18

- Chief Financial Officer  
  - Date: 11/8/18  
  - Chairman’s Office  
    - Date: (Decision Memos Over $25,000)

---

Attachment: Interboro Packaging Company - Checklist (HHS-P-0320-18: Interboro Packaging Company)
**Purchase Requisition**

**Procurement Services Division**

---

### Send Purchase Order To:

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<tr>
<th>Vendor: Interboro Packaging Corporation</th>
<th>Vendor #: 11379</th>
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<tbody>
<tr>
<td>Attn: Chonie Sihnitzer</td>
<td>Email: <a href="mailto:interboro@frontiernet.net">interboro@frontiernet.net</a></td>
</tr>
<tr>
<td>Address: 114 Bracken Road</td>
<td></td>
</tr>
<tr>
<td>City: Montgomery</td>
<td>State: NY</td>
</tr>
<tr>
<td>Phone: 845-782-6800</td>
<td>Fax: 845-781-2450</td>
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### Send Invoices To:

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<th>Dept: DuPage Care Center</th>
<th>Division: Environmental Services</th>
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<tbody>
<tr>
<td>Attn: Vinit Patel</td>
<td>Email: <a href="mailto:vinit.patel@dupageco.org">vinit.patel@dupageco.org</a></td>
</tr>
<tr>
<td>Address: 400 N. County Farm Road</td>
<td>Room:</td>
</tr>
<tr>
<td>City: Wheaton</td>
<td>State: IL</td>
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<tr>
<td>Phone: 630-784-4273</td>
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<td>Attn: Email:</td>
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<tr>
<td>Address: 114 Bracken Road</td>
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<td>City: Montgomery</td>
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<tr>
<td>Address: 400 N. County Farm Road</td>
<td>Room:</td>
</tr>
<tr>
<td>City: Wheaton</td>
<td>State: IL</td>
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<td>Phone: 630-784-4273</td>
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### Payment Terms:

**PER 50 ILCS 505/1**

### PO 20 Delivery Date

Requisitioner: Christine Kliebhan

### Contract Administrator

Use for PO25 only

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**Requisition Total**: $96,583.86

---

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

Furnish and deliver trash can and recycling can liners for the DuPage Care Center, for the period December 1, 2018 through May 16, 2020, per bid #17-045-JM

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

DPCC is picking up FM’s bid with Interboro for trash can and recycling liners, as they have already bid out the same products that we purchase. We will do an 18 month contract to get on the same bidding schedule with FM.

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

November 20, 2018   HHS  
November 27, 2018   County Board

---

Packet Pg. 36
<table>
<thead>
<tr>
<th>ITEM #1</th>
<th>TRASH CAN LINER SIZE</th>
<th>MANUFACTURER &amp; SIZE</th>
<th>COST PER CASE</th>
<th>CASE QTY</th>
<th>EXTENSION</th>
<th>CASE WEIGHT</th>
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<tr>
<td></td>
<td>24&quot; X 23&quot;-Black - 0.35 MIL, 100,000 Qty</td>
<td>INTERBORO PACKAGING Pitt Plastics 24&quot; x 23&quot;, 0.35 MIL, 1000 per case</td>
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<td>$1,398.00</td>
<td>12.30 lbs</td>
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<td>12.30 lbs</td>
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<td>THE STANDARD COMPANIES Colonial Bag 24&quot; x 23&quot;, 0.35 MIL, 1000 per case</td>
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<td>100</td>
<td>$1,593.00</td>
<td>12.90 lbs</td>
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<tr>
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<td>24&quot; X 23&quot;-Black - 0.35 MIL, 100,000 Qty</td>
<td>CENTRAL POLY-BAG CORP. Pitt Plastics 24&quot; x 23&quot;, 0.35 MIL, 500 per case</td>
<td>$10.40</td>
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<td>30&quot; x 36&quot;-Black - 0.45 MIL, 100,000 Qty</td>
<td>METRO/WAREHOUSE DIRECT Colonial Bag 30&quot; X 36&quot;, 0.45 MIL, 250 per case</td>
<td>$9.05</td>
<td>400</td>
<td>$3,620.00</td>
<td>8.70 lbs</td>
</tr>
<tr>
<td></td>
<td>30&quot; x 36&quot;-Black - 0.45 MIL, 100,000 Qty</td>
<td>LAPORT INC. Berry Plastics 30&quot; X 37&quot;, 0.45 MIL, 250 per case</td>
<td>$11.19</td>
<td>400</td>
<td>$4,476.00</td>
<td>9.10 lbs</td>
</tr>
<tr>
<td></td>
<td>30&quot; x 36&quot;-Black - 0.45 MIL, 100,000 Qty</td>
<td>THE STANDARD COMPANIES Colonial Bag 30&quot; X 36&quot;, 0.45 MIL, 250 per case</td>
<td>$10.10</td>
<td>400</td>
<td>$4,040.00</td>
<td>8.70 lbs</td>
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<tr>
<td></td>
<td>30&quot; x 36&quot;-Black - 0.45 MIL, 100,000 Qty</td>
<td>CENTRAL POLY-BAG CORP. Pitt Plastics 30&quot; X 36&quot;, 0.45 MIL, 250 per case</td>
<td>$12.40</td>
<td>400</td>
<td>$4,960.00</td>
<td>9.10 lbs</td>
</tr>
<tr>
<td>ITEM #3</td>
<td>40&quot; x46&quot;-Clear - 1.25 MIL, 30,000 Qty</td>
<td>INTERBORO PACKAGING Pitt Plastics 40&quot; x 46&quot;, 1.1 MIL, 250 per case</td>
<td>$30.34</td>
<td>150</td>
<td>$4,551.00</td>
<td>14.72 lbs</td>
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<td>40&quot; x46&quot;-Clear - 1.25 MIL, 30,000 Qty</td>
<td>ALL AMERICAN POLY Colonial Bag 40&quot; X 46&quot;, 1.25 MIL, 200 per case</td>
<td>$26.72</td>
<td>150</td>
<td>$4,008.00</td>
<td>24.53 lbs</td>
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<td>40&quot; x46&quot;-Clear - 1.25 MIL, 30,000 Qty</td>
<td>METRO/WAREHOUSE DIRECT Colonial Bag 40&quot; X 46&quot;, 1.2 MIL, 200 per case</td>
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<td>40&quot; x46&quot;-Clear - 1.25 MIL, 30,000 Qty</td>
<td>LAPORT INC. Berry Plastics 40&quot; X 48&quot;, 1.3 MIL, 100 per case</td>
<td>$16.39</td>
<td>300</td>
<td>$4,917.00</td>
<td>14.30 lbs</td>
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<td>40&quot; x46&quot;-Clear - 1.25 MIL, 30,000 Qty</td>
<td>THE STANDARD COMPANIES Colonial Bag 40&quot; X 46&quot;, 1.2 MIL, 200 per case</td>
<td>$31.51</td>
<td>150</td>
<td>$4,726.50</td>
<td>29.00 lbs</td>
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<td>40&quot; x46&quot;-Clear - 1.25 MIL, 30,000 Qty</td>
<td>CENTRAL POLY-BAG CORP. Pitt Plastics 40&quot; X 46&quot;, 1.1 MIL, 250 per case</td>
<td>$17.20</td>
<td>1250</td>
<td>$20,375.00</td>
<td>13.50 lbs</td>
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<tr>
<td>ITEM #4</td>
<td>40&quot;x46&quot;-Black - 1.1 MIL, 125,000 Qty</td>
<td>INTERBORO PACKAGING Pitt Plastics 40 x 46&quot;, 1.1 MIL, 250 per case</td>
<td>$29.82</td>
<td>500</td>
<td>$14,910.00</td>
<td>14.72 lbs</td>
</tr>
<tr>
<td></td>
<td>40&quot;x46&quot;-Black - 1.1 MIL, 125,000 Qty</td>
<td>ALL AMERICAN POLY Colonial Bag 40 x 46&quot;, 1.1 MIL, 250 per case</td>
<td>$30.06</td>
<td>500</td>
<td>$15,030.00</td>
<td>27.60 lbs</td>
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<td>40&quot;x46&quot;-Black - 1.1 MIL, 125,000 Qty</td>
<td>METRO/WAREHOUSE DIRECT Colonial Bag 40 x 46&quot;, 1.1 MIL, 250 per case</td>
<td>$29.37</td>
<td>500</td>
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<td>33.70 lbs</td>
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<td>LAPORT INC. Berry Plastics 40 x 48&quot;, 1.2 MIL, 100 per case</td>
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<td>COST PER CASE</td>
<td>CASE QTY</td>
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<td>24&quot; X 23&quot;-Clear - 0.35 MIL, 25,000 Qty</td>
<td>INTERBORO PACKAGING Pitt Plastics 24&quot; x 23&quot;, 0.35 MIL, 1000 per case</td>
<td>$15.98</td>
<td>25</td>
<td>$399.50</td>
<td>12.30 lbs</td>
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<td>ALL AMERICAN POLY Colonial Bag 24&quot; x 23&quot;, 0.90 MIL, 1000 per case</td>
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<td>25</td>
<td>$910.25</td>
<td>33.12 lbs</td>
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<td>METRO/WAREHOUSE DIRECT Colonial Bag 24&quot; x 23&quot;, 0.35 MIL, 1000 per case</td>
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<td>$356.50</td>
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<td>LAPORT INC. Berry Plastics 24&quot; x 23&quot;, 0.30 MIL, 1000 per case</td>
<td>$15.99</td>
<td>25</td>
<td>$398.75</td>
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<td>THE STANDARD COMPANIES Colonial Bag 24&quot; x 23&quot;, 0.35 MIL, 1000 per case</td>
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<td>$398.25</td>
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<td>$19.40</td>
<td>50</td>
<td>$970.00</td>
<td>6.40 lbs</td>
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<td>30&quot; x36&quot;-Clear - 0.45 MIL, 8750 Qty</td>
<td>INTERBORO PACKAGING Pitt Plastics 30&quot; x 36&quot;, 0.50 MIL, 250 per case</td>
<td>$10.82</td>
<td>35</td>
<td>$378.70</td>
<td>9.10 lbs</td>
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<td>ALL AMERICAN POLY Colonial Bag 30&quot; X 36&quot;, 0.90 MIL, 250 per case</td>
<td>$17.64</td>
<td>35</td>
<td>$617.40</td>
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<td>METRO/WAREHOUSE DIRECT Colonial Bag 30&quot; X 36&quot;, 0.45 MIL, 250 per case</td>
<td>$9.05</td>
<td>35</td>
<td>$316.75</td>
<td>8.70 lbs</td>
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<td>LAPORT INC. Berry Plastics 30&quot; X 36&quot;, 0.50 MIL, 250 per case</td>
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<td>35</td>
<td>$388.85</td>
<td>9.10 lbs</td>
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<td>THE STANDARD COMPANIES Colonial Bag 30&quot; X 36&quot;, 0.45 MIL, 250 per case</td>
<td>$10.10</td>
<td>35</td>
<td>$353.50</td>
<td>8.70 lbs</td>
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<td>CENTRAL POLY-BAG CORP. Pitt Plastics 30&quot; X 36&quot;, 0.45 MIL, 250 per case</td>
<td>$13.80</td>
<td>35</td>
<td>$483.00</td>
<td>8.80 lbs</td>
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<td>40&quot; x 46&quot;-Black - 3.0 MIL, 112,500 Qty</td>
<td>INTERBORO PACKAGING Pitt Plastics 40&quot; x 46&quot;, 3.0 MIL, 250 per case</td>
<td>$37.32</td>
<td>450</td>
<td>$16,794.00</td>
<td>19.20 lbs</td>
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<td></td>
<td>ALL AMERICAN POLY Colonial Bag 40&quot; x 46&quot;, 3.0 MIL, 50 per case</td>
<td>$10.41</td>
<td>2250</td>
<td>$23,422.50</td>
<td>12.267 lbs</td>
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<tr>
<td></td>
<td>METRO/WAREHOUSE DIRECT Colonial Bag 40&quot; x 46&quot;, 3.0 MIL, 50 per case</td>
<td>$16.63</td>
<td>2250</td>
<td>$37,417.50</td>
<td>18.00 lbs</td>
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<tr>
<td></td>
<td>LAPORT INC. Berry Plastics 40&quot; x 46&quot;, 3.0 MIL, 50 per case</td>
<td>$17.39</td>
<td>2250</td>
<td>$39,127.50</td>
<td>19.20 lbs</td>
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<tr>
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<td>THE STANDARD COMPANIES Colonial Bag 40&quot; x 46&quot;, 3.0 MIL, 50 per case</td>
<td>$18.57</td>
<td>2250</td>
<td>$41,782.50</td>
<td>18.00 lbs</td>
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<tr>
<td></td>
<td>CENTRAL POLY-BAG CORP. Pitt Plastics 40&quot; x 46&quot;, 3.0 MIL, 50 per case</td>
<td>$18.40</td>
<td>2250</td>
<td>$41,400.00</td>
<td>18.40 lbs</td>
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</tbody>
</table>
Required Vendor Ethics Disclosure Statement

Failure to complete and return this form may result in delay or cancellation of the County's Contractual Obligation.

Company Name: **Interboro Packaging Corp.**
Contact Phone: **845-782-6800**

Company Contact: **Abraham Jeremias**
Contact Email: **interboro@frontiernet.net**

Bid/Contract/PO #: **17-045-JM**
Date: **04/09/2018**

The DuPage County Procurement Ordinance requires the following written disclosures prior to award:

1. Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the county resulting in an aggregate amount at or in excess of $25,000, shall provide to Procurement Services Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor within the current and previous calendar year to any incumbent county board member, county board chairman, or countywide elected official who the contract to be awarded will benefit. The contractor, union or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

[X] **NONE** (check here) - If no contributions have been made

<table>
<thead>
<tr>
<th>Recipient</th>
<th>Donor</th>
<th>Description (e.g. cash, type of item, in-kind services, etc.)</th>
<th>Amount/Value</th>
<th>Date Made</th>
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</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

2. All contractors and vendors who have obtained or are seeking contracts with the county shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

[X] **NONE** (check here) - If no contacts have been made

<table>
<thead>
<tr>
<th>lobbyists, Agents and Representatives and all individuals who are or will be having contact with county officers or employees in relation to the contract or bid</th>
<th>Telephone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future county contracts.

Continuing disclosure is required, and I agree to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner
- 30 days prior to the optional renewal of any contract
- Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative adjustments

The full text for the county's ethics and procurement policies and ordinances are available at:
http://www.dupageco.org/CountyBoard/Policies/

I hereby acknowledge that I have received, have read, and understand these requirements.

Authorized Signature: **Signature on file**

Printed Name: **Chava Landau**
Title: **Secretary**
Date: **04/19/2018**

Attach additional sheets if necessary. Sign each sheet and number each page. Page _____ of _______(total number of pages)
Requisition under 25k dollars

2018-278
Requisition under 25k dollars

2018-278

PROCUREMENT REVIEW CHECKLIST
REQUISITION

This form must accompany all County Purchase Requisitions.

<table>
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<tr>
<th>DATE SUBMITTED</th>
<th>CONTRACT TOTAL AMOUNT</th>
<th>CONTRACT TERM</th>
<th>REQUESTING DEPT.</th>
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<tbody>
<tr>
<td>November 5, 2018</td>
<td>$6,000.00</td>
<td>NOVEMBER 30, 2018 - NOVEMBER 30, 2019</td>
<td>DUPAGE CARE CENTER</td>
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SOLICITATION METHOD FOR SOURCE SELECTION

No Decision Memo Required  Per Cooperative Agreement

Karen Graczyk            Completed   11/05/2018 12:00 PM
Janelle Chadwick         Completed   11/06/2018 12:25 PM
Kathy Ostrowski          Completed   11/06/2018 2:51 PM
Wendi Wagner             Completed   11/06/2018 3:52 PM
Donald Carlsen           Completed   11/06/2018 4:01 PM
James McGuire            Completed   11/08/2018 1:51 PM
Paul Rafac               Completed   11/08/2018 6:02 PM
Kathy Ostrowski          Completed   11/14/2018 2:54 PM
Health & Human Services  Pending    11/20/2018 10:15 AM
Technology Committee     Pending    11/27/2018 9:00 AM
**Procurement Review Checklist**

**Procurement Services Division**

This form must accompany all Purchase Order Requisitions
Attach Required Vendor Ethics Disclosure Statement

**Vendor:** AT&T  
**Vendor #:** 10008-P13  
**Contract Term:** 11/30/18 - 11/30/19  
**Contract Total:** $6,000.00

**Dept:** DuPage Care Center  
**Contact:** Christine Kliewhan  
**Phone:** 630-784-4208

**Assignment:** Health and Human Services

**Date:** Oct 29, 2018

**Vendor:** AT&T  
**Vendor #:** 10008-P13  
**Contract Term:** 11/30/18 - 11/30/19  
**Contract Total:** $6,000.00

**Dept:** DuPage Care Center  
**Contact:** Christine Kliewhan  
**Phone:** 630-784-4208

**Description of Procurement/Scope of Work/Background:**
AT&T will provide the necessary services to support DuPage County requirements for analog circuits along with continued requirement for analog business lines for the DuPage Care Center for the period November

**Reason for Procurement:**
IT Telecommunications must support the continued requirement for analog circuits. Additionally, there are numerous analog business lines used to support dial-up applications in service at the DuPage Care Center.

**FUNDING SOURCE**

- Procurement budgeted for (FY and budget code(s)): 1200-2000-53250
- Budget Transfer (Date) Add'l Information

**DECISION MEMO NOT REQUIRED**

- LOWEST RESPONSIBLE QUOTE # or BID # ____________________________ (QUOTE < $25,000, BID ≥ $25,000; attach Tabulation)
- RENEWAL, Enter Bid # ____________________________ Intergovernmental Agreement
- SOLE SOURCE per DuPage County Purchasing Ordinance, Article 4-102(S) (attach Sole Source Justification form)
- PER 55 ILCS 5/5-1022 'Competitive Bids' (d) IT/Telecom purchases under $35,000.00
- PER 55 ILCS 5/5-1022 'Competitive Bids' (c) not suitable for competitive bidding. Explain below:

**DECISION MEMO REQUIRED**

- Cooperative Procurement (DPC4-107) or Government Joint Purchasing Act Procurement (30ILCS552(S)
- PER Coop (DPC4-107) select one below
  - U.S. Communities # _________
  - State of IL contract CMS793372P
- EXPLANATION OF REQUEST FOR PROPOSAL RFP # 17-002-LG (technology) (include Evaluation Summary if applicable)
- RENEWAL OF RFP # 17 - 002 - LG
- PROFESSIONAL SERVICES EXCLUDED per DuPage Ordinance (4-108) and 50 ILCS 510/2 (Architects, Engineers and Land Surveyors)
- OTHER PROFESSIONAL SERVICES (detail vetting process on Decision Memo)
- REQUEST WAIVER OF COUNTY BID RULES (only allowable to Statutory Limits)
- OTHER THAN LOWEST RESPONSIBLE, BID # ____________________________

**PREPARED BY AND APPROVAL(S) (Initials Only)**

<table>
<thead>
<tr>
<th>Prepared By</th>
<th>Date</th>
<th>Recommended for Approval</th>
<th>Date</th>
<th>IT Approval, if required</th>
<th>Date</th>
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<td>10/30/18</td>
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**REVIEWED BY (Initials Only)**

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<th>Buyer</th>
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<th>Chief Financial Officer</th>
<th>Date</th>
<th>Chairman's Office</th>
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<td>11-8-18</td>
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**Purchase Requisition**

**Procurement Services Division**

---

**Send Purchase Order To:**
- **Vendor:** AT&T  
  **Vendor #:** 10008-P13
- **Attn:** Robert Burt  
  **Email:** rb1735@att.com
- **Address:** 2000 W. AT&T Center Drive  
  **City:** Hoffman Estates  
  **State:** IL  
  **Zip:** 60192
- **Phone:** 312-208-3337  
  **Fax:** 847-248-4490

**Send Invoices To:**
- **Vendor:** AT&T  
  **Vendor #:** 10008-P13
- **Attn:** Christine Kliebhan  
  **Email:** christine.kliebhan@dupageco.org
- **Address:** PO Box 5080  
  **City:** Carol Stream  
  **State:** IL  
  **Zip:** 60197-5080
- **Phone:** 630-784-4215  
  **Fax:**

**Send Payments To:**
- **Vendor:** AT&T  
  **Vendor #:** 10008-P13
- **Attn:** Scott Ballard  
  **Email:** scott.ballard@dupageco.org
- **Address:** PO Box 5080  
  **City:** Carol Stream  
  **State:** IL  
  **Zip:** 60197-5080
- **Phone:** 630-784-4215  
  **Fax:**

**Send Purchase Order To:**
- **Dept:** DuPage Care Center  
  **Division:** Administration
- **Attn:** Christine Kliebhan  
  **Email:** christine.kliebhan@dupageco.org
- **Address:** 400 N. County Farm Road  
  **City:** Wheaton  
  **State:** IL  
  **Zip:** 60187
- **Phone:** 630-784-2028  
  **Fax:** 630-784-4212

**Send Invoices To:**
- **Dept:** DuPage Care Center  
  **Division:** Administration
- **Attn:** Christine Kliebhan  
  **Email:** christine.kliebhan@dupageco.org
- **Address:** 400 N. County Farm Road  
  **City:** Wheaton  
  **State:** IL  
  **Zip:** 60187
- **Phone:** 630-784-2028  
  **Fax:**

**Send Payments To:**
- **Vendor:** AT&T  
  **Vendor #:** 10008-P13
- **Attn:** Scott Ballard  
  **Email:** scott.ballard@dupageco.org
- **Address:** PO Box 5080  
  **City:** Carol Stream  
  **State:** IL  
  **Zip:** 60197-5080
- **Phone:** 630-784-4215  
  **Fax:**

**Payment Terms**
- F.O.B.
- **PO 20 Delivery Date:** Requisitioner

**Use for**
- Contract Administrator  
  **Contract Start Date:** November 30, 2018  
  **Contract End Date:** November 30, 2019

**LN** | **Qty** | **UOM** | **Item Detail (Product #)** | **Description** | **FY** | **Dept #** | **Acct #** | **Sub-Accts and/or Activity #** | **Unit Price** | **Extension** |
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</tr>
</tbody>
</table>

**Requisition Total** $6,000

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

To provide necessary services to support DuPage County requirements for analog circuits and analog business lines used to support dial-up applications at the DuPage Care Center for the period November 30, 2018 through November 30, 2019, per most qualified offer per Proposal #17-002-LG. (State of IL contract CMS793372P)

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

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

November 20, 2018 HHS
**Decision Memo**

**Procurement Services Division**

This form is required for all Professional Service Contracts over $25,000 and as otherwise required by the Procurement Review Checklist.

<table>
<thead>
<tr>
<th>Requesting Department: DuPage Care Center</th>
<th>Department Contact: Christine Kliebhan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Email: <a href="mailto:christine.kliebhan@dupageco.org">christine.kliebhan@dupageco.org</a></td>
<td>Contact Phone: 630-784-4208</td>
</tr>
<tr>
<td>Vendor Name: AT&amp;T</td>
<td>Vendor #: 10008-P13</td>
</tr>
</tbody>
</table>

**Date:** Oct 29, 2018  
**MinuteTraq (IQM2) ID #:** 13862  
**Department Requisition #:** 7095

---

**Action Requested** - Identify the action to be taken and the total cost; for instance, approval of new contract, renew contract, increase contract, etc.

Approve a contract with AT&T to provide analog circuit/business lines for the DuPage Care Center.

---

**Summary Explanation/Background** - Provide an executive summary of the action. Explain why it is necessary and what is to be accomplished.

Analog Business lines are in service to support various dial-up applications here at the DuPage Care Center. These services are included in the Master discount Agreement (MDA) entered into with AT&T.

---

**Strategic Impact**

Customer Service

Select one of the five strategic imperatives in the County's Strategic Plan this action will most impact and provide a brief explanation.

The services with AT&T will maintain customer service for the DuPage Care Center for the period November 30, 2018 through November 30, 2019.

---

**Source Selection/Vetting Information** - Describe method used to select source.

RFP-P17-002-LG was issued by IT telecom. AT&T was the selected vendor of choice.

---

**Recommendations/Alternatives** - Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request.

DuPage Care Center recommends the approval of this renewal with AT&T to provide analog business lines for the DuPage Care Center

Do not renew contract with AT&T, however, the DuPage Care Center still needs to maintain services for day to day business communications.

---

**Fiscal Impact/Cost Summary** - Include projected cost for each fiscal year, approved budget amount and account number, source of funds, and any future funding requirements along with any narrative.

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>1200-2000-53250</td>
<td>$6,000.00</td>
</tr>
</tbody>
</table>

---

Attachment: AT&T - Decision Memo (2018-278 : AT&T)
Required Vendor Ethics Disclosure Statement

Failure to complete and return this form may result in delay or cancellation of the County's Contractual Obligation.

Company Name: AT&T Mobility
Company Contact: Rob Burt
Contact Phone: 312-208-3337
Contact Email: rb1735@att.com

Bid/Contract/PO #: Airwatch MDM

Date: Apr 11, 2018

The DuPage County Procurement Ordinance requires the following written disclosures prior to award:

1. Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the county resulting in an aggregate amount at or in excess of $25,000, shall provide to Procurement Services Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor within the current and previous calendar year to any incumbent county board member, county board chairman, or countywide elected official whose office the contract to be awarded will benefit. The contractor, union or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, “contractor or vendor” includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

☐ NONE (check here) - If no contributions have been made

<table>
<thead>
<tr>
<th>Recipient</th>
<th>Donor</th>
<th>Description (e.g. cash, type of item, in-kind services, etc.)</th>
<th>Amount/Value</th>
<th>Date Made</th>
</tr>
</thead>
<tbody>
<tr>
<td>DuPage County Board Chairman Dan Cronin</td>
<td>AT&amp;T Employee PAC</td>
<td>Check (#3712)</td>
<td>$500.00</td>
<td>Oct 19, 2017</td>
</tr>
<tr>
<td>DuPage County Board Chairman Dan Cronin</td>
<td>AT&amp;T Employee PAC</td>
<td>Check (#3798)</td>
<td>$1,000.00</td>
<td>Mar 16, 2018</td>
</tr>
</tbody>
</table>

2. All contractors and vendors who have obtained or are seeking contracts with the county shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

☐ NONE (check here) - If no contacts have been made

<table>
<thead>
<tr>
<th>Lobbyists, Agents and Representatives and all individuals who are or will be having contact with county officers or employees in relation to the contract or bid</th>
<th>Telephone</th>
<th>Email</th>
</tr>
</thead>
</table>

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future county contracts.

Continuing disclosure is required, and I agree to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner
- 30 days prior to the optional renewal of any contract
- Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative changes

The full text for the county's ethics and procurement policies and ordinances are available at:

http://www.dupageco.org/CountyBoard/Policies/

I hereby acknowledge that I have received and have read, and understand these requirements.

Authorized Signature

Signature on File

Printed Name
Robert S. Burt

Title
Client Solutions Executive II

Date
Apr 12, 2018

Attach additional sheets if necessary. Sign each sheet and number each page. Page ______ of _______ (total number of pages)
Requisition under 25k dollars

2018-288
## PROCUREMENT REVIEW CHECKLIST

**REQUISITION**

This form must accompany all County Purchase Requisitions.

### NEW PURCHASE ORDER REQUEST

<table>
<thead>
<tr>
<th>DATE SUBMITTED</th>
<th>CONTRACT AMOUNT</th>
<th>REQUESTING DEPT.</th>
</tr>
</thead>
<tbody>
<tr>
<td>November 5, 2018</td>
<td>$10,500.00</td>
<td>DUPAGE CARE CENTER</td>
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</tbody>
</table>

### SOLICITATION METHOD FOR SOURCE SELECTION

<table>
<thead>
<tr>
<th>Name</th>
<th>Status</th>
<th>Date and Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Karen Graczyk</td>
<td>Completed</td>
<td>11/05/2018 12:02 PM</td>
</tr>
<tr>
<td>Janelle Chadwick</td>
<td>Completed</td>
<td>11/06/2018 12:26 PM</td>
</tr>
<tr>
<td>Kathy Ostrowski</td>
<td>Completed</td>
<td>11/06/2018 2:53 PM</td>
</tr>
<tr>
<td>James McGuire</td>
<td>Completed</td>
<td>11/16/2018 9:08 AM</td>
</tr>
<tr>
<td>Paul Rafac</td>
<td>Completed</td>
<td>11/16/2018 9:12 AM</td>
</tr>
<tr>
<td>Kathy Ostrowski</td>
<td>Completed</td>
<td>11/16/2018 9:22 AM</td>
</tr>
<tr>
<td>Health &amp; Human Services</td>
<td>Pending</td>
<td>11/20/2018 10:15 AM</td>
</tr>
</tbody>
</table>
## Procurement Review Checklist

**Procurement Services Division**

This form must accompany all Purchase Order Requisitions

**Attach Required Vendor Ethics Disclosure Statement**

<table>
<thead>
<tr>
<th>Vendor: Direct Supply, Inc.</th>
<th>Vendor #: 10586</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dept: DuPage Care Center</td>
<td>Contact: Karen Cerny</td>
</tr>
<tr>
<td><strong>Contract</strong></td>
<td><strong>November 30, 2019</strong></td>
</tr>
<tr>
<td><strong>December 1, 2018 - Term:</strong></td>
<td><strong>November 30, 2019</strong></td>
</tr>
<tr>
<td><strong>Contract Total:</strong></td>
<td><strong>$10,500.00</strong></td>
</tr>
<tr>
<td><strong>Assigned Committee:</strong></td>
<td><strong>Health and Human Services</strong></td>
</tr>
</tbody>
</table>

### Description of Procurement/ Scope of Work/ Background

Renewal to purchase of rehab medical supplies, which vary from ADL supplies, mobility supplies and splints for the DuPage Care Center for the period 12/01/18 through 11/30/19, per quote Q17-207-GV.

### Reason for Procurement

To provide ADL, mobility, splints, braces and rehab supplies to the resident(s) of the DPCC. These devices not only aide the resident(s) in maintaining their highest practicable level of function.

### FUNDING SOURCE

- Budget Transfer (FY and budget code(s)): 1200-2060-52320

### DECISION MEMO NOT REQUIRED

- LOWEST RESPONSIBLE QUOTE # or BID #
- RENEWAL, Enter Bid # Q17-207-GV
- Intergovernmental Agreement
- SOLE SOURCE per DuPage County Purchasing Ordinance, Article 4-102(S) (attach Sole Source Justification form)
- PER 55 ILCS 5/5-1022 ‘Competitive Bids’ (c) IT/Telecom purchases under $35,000.00
- Public Utility
- PER 55 ILCS 5/5-1022 ‘Competitive Bids’ (c) not suitable for competitive bidding. Explain below:

### DECISION MEMO REQUIRED

- Cooperative Procurement (DPC4-107) or Government Joint Purchasing Act Procurement (30ILCS525)
- EXPLANATION OF REQUEST FOR PROPOSAL RFP #
- RENEWAL OF RFP #
- PROFESSIONAL SERVICES EXCLUDED per DuPage Ordinance (4-108) and 50 ILCS 510/2 (Architects, Engineers and Land Surveyors)
- OTHER PROFESSIONAL SERVICES (detail vetting process on Decision Memo)
- REQUEST WAIVER OF COUNTY BID RULES (only allowable to Statutory Limits)
- OTHER THAN LOWEST RESPONSIBLE, BID #

### PREPARED BY AND APPROVAL(S) (Initials Only)

<table>
<thead>
<tr>
<th>Prepared By</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>cdk</td>
<td>Oct 30, 2018</td>
</tr>
</tbody>
</table>

**Recommended for Approval**

<table>
<thead>
<tr>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>11-2-18</td>
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</table>

**IT Approval, if required**

<table>
<thead>
<tr>
<th>Date</th>
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<tbody>
<tr>
<td>11-5-18</td>
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</table>

### REVIEWED BY (Initials Only)

**Buyer**

<table>
<thead>
<tr>
<th>Date</th>
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<tbody>
<tr>
<td>11-16-18</td>
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</table>

**Procurement Officer**

<table>
<thead>
<tr>
<th>Date</th>
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<tbody>
<tr>
<td>11-16-18</td>
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</tbody>
</table>

**Chief Financial Officer**

<table>
<thead>
<tr>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>11-16-18</td>
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</tbody>
</table>

**Chairman’s Office**

<table>
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<tr>
<th>Date</th>
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<tbody>
<tr>
<td>11-16-18</td>
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</tbody>
</table>

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FORM OPTIMIZED FOR ACROBAT AND ADOBE READER VERSION 9 OR LATER
Purchase Requisition
Procurement Services Division

Date: Oct 30, 2018
MinuteTraq (IQM2) ID #: 13863
Department Req #: 7
RFP, Bid or Quote #: Q17-207

Send Purchase Order To: Vendor: Direct Supply  Vendor #: 10586
Attn: Andy Bach  Email: andy.bach@directsupply.com
Address: 6767 North Industrial Road
City: Milwaukee  State: WI  Zip: 53223
Phone: 800-634-7328

Send Invoices To: Dept: DuPage Care Center  Division: Physical Rehab
Attn: Karen Cerny  Email: karen.cerny@dupageco.org
Address: 400 N. County Farm Road
City: Wheaton  State: IL  Zip: 60187
Phone: 630-784-4402

Send Payments To: Vendor: Direct Supply  Vendor #: 10586
Attn: Andy Bach  Email: andy.bach@directsupply.com
Address: 6767 North Industrial Road
City: Milwaukee  State: WI  Zip: 53223
Phone: 800-634-7328

Payment Terms: PER 50 ILCS 505/1
F.O.B.: Destination
PO 20 Delivery Date: Requisitioner
Use for PO25 only
Contract Administrator
Contract Start Date: December 1, 2018
Contract End Date: November 30, 2019

<table>
<thead>
<tr>
<th>LN</th>
<th>Qty</th>
<th>UOM</th>
<th>Item Detail (Product #)</th>
<th>Description</th>
<th>FY</th>
<th>Dept #</th>
<th>Acctg Unit</th>
<th>Acct #</th>
<th>Sub-Accts and/or Activity #</th>
<th>Unit Price</th>
<th>Extension</th>
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<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>EA</td>
<td>Rehab Medical Supplies</td>
<td></td>
<td>1200</td>
<td>2060</td>
<td>52320</td>
<td></td>
<td></td>
<td>10,500.00</td>
<td>10,500</td>
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<td>EA</td>
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</table>

Requisition Total $ 10,500

Header Comments (these comments will appear on the PO20 and PO25 Purchase Order):
Renewal of Rehab Medical Supplies for the DuPage Care Center, for the period December 1, 2018 through November 30, 2019, per renewal under lowest quote #Q17-207-GV, first of three one year renewals.

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

User Department Internal Notes (these comments will NOT appear on the Purchase Order):
November 20, 2018  HHS
Required Vendor Ethics Disclosure Statement

Failure to complete and return this form may result in delay or cancellation of the County’s Contractual Obligation.

Date: 11/14/2018
Bid/Contract/PO #: Q17 - 207-6V

<table>
<thead>
<tr>
<th>Company Name: Direct Supply, Inc.</th>
<th>Company Contact: Andy Bach</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Phone: (414) 760-8319</td>
<td>Contact Email: <a href="mailto:Andy.Bach@directsupply.com">Andy.Bach@directsupply.com</a></td>
</tr>
</tbody>
</table>

The DuPage County Procurement Ordinance requires the following written disclosures prior to award:

1. Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the county resulting in an aggregate amount of or in excess of $25,000, shall provide to Procurement Services Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor within the current and previous calendar year to any incumbent county board member, county board chairman, or countywide elected official whose office the contract to be awarded will benefit. The contractor, union or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

2. All contractors and vendors who have obtained or are seeking contracts with the county shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor’s bid and shall update such disclosure with any changes that may occur.

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future county contracts.

Continuing disclosure is required, and I agree to update this disclosure form as follows:

The full text for the county’s ethics and procurement policies and ordinances are available at:
http://www.dupageco.org/CountyBoard/Policies/

I hereby acknowledge that I have received, have read, and understand these requirements.

Signature on file

Authorized Signature

Printed Name

Title

Date

NONE (check here) - If no contributions have been made

To the best of my knowledge:

<table>
<thead>
<tr>
<th>Recipient</th>
<th>Donor</th>
<th>Description (e.g. cash, type of item, in-kind services, etc.)</th>
<th>Amount/Value</th>
<th>Date Made</th>
</tr>
</thead>
</table>

NONE (check here) - If no contacts have been made

To the best of my knowledge:

Lobbyists, Agents and Representatives and all individuals who are or will be having contact with county officers or employees in relation to the contract or bid

Telephone

Email

Attach additional sheets if necessary. Sign each sheet and number each page. Page 1 of 1 (total number of pages)
### BUDGET ADJUSTMENT

**Effective September 21, 2016**

**DUPage CARE CENTER**

**Company/Accounting Unit Name**

<table>
<thead>
<tr>
<th>Accounting Unit</th>
<th>Account</th>
<th>Sub-Account</th>
<th>Title</th>
<th>Amount</th>
<th>Date of Transfer</th>
<th>Available Balance</th>
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<tbody>
<tr>
<td>2000</td>
<td>53250</td>
<td></td>
<td>WIRED COMMUNICATION SERVICES</td>
<td>$3,200.00</td>
<td>11/5/18</td>
<td>Prior: 10,692.61</td>
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<tr>
<td>2050</td>
<td>52000</td>
<td></td>
<td>FURN/MACH/EQUIP SMALL VALUE</td>
<td>$8,000.00</td>
<td>11/5/18</td>
<td>Prior: 8,648.08</td>
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<tr>
<td>2050</td>
<td>52200</td>
<td></td>
<td>OPERATING SUPPLIES &amp; MATERIALS</td>
<td>$2,000.00</td>
<td>11/5/18</td>
<td>Prior: 88,300.00</td>
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<tr>
<td>2040</td>
<td>54010</td>
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<td>BUILDING IMPROVEMENTS</td>
<td>$88,300.00</td>
<td>11/5/18</td>
<td>Prior: 88,300.00</td>
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**Total** $101,500.00

<table>
<thead>
<tr>
<th>Accounting Unit</th>
<th>Account</th>
<th>Sub-Account</th>
<th>Title</th>
<th>Amount</th>
<th>Date of Transfer</th>
<th>Available Balance</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>53260</td>
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<td>WIRELESS COMMUNICATION SVC</td>
<td>$3,200.00</td>
<td>11/2/18</td>
<td>Prior: 180,584.54</td>
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<td>2050</td>
<td>53070</td>
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<td>MEDICAL SERVICES</td>
<td>$10,000.00</td>
<td>11/5/18</td>
<td>Prior: 25,049.87</td>
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<td>MEDICAL/DENTAL/LAB SUPPLIES</td>
<td>$24,600.00</td>
<td>11/5/18</td>
<td>Prior: 44,847.64</td>
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<tr>
<td>2060</td>
<td>53090</td>
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<td>OTHER PROFESSIONAL SERVICES</td>
<td>$63,700.00</td>
<td>11/5/18</td>
<td>Prior: 40,276.95</td>
</tr>
</tbody>
</table>

**Total** $101,500.00

**Reason for Request:**

Transfer monies to allow for services for our wireless services for the DPCC (Verizon) and to cover for purchases of medical supplies and medical services. Also transfer monies to allow for services for our Physical, Occupational, Speech & Respiratory Therapy and Consultant Services. (the DPCC in turn bills Medicare Part A/B and private insurances for these services and receives increased reimbursement).

**Signature on file**

**Signature on file**

**Signature on file**

**Signature on file**

**Activity:** ksdk

**Finance Department Use Only**

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Budget Journal #</th>
<th>Acctg Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Entered By/Date:**  
**Released By/Date:**  
**Posted By/Date:**
# Budget Adjustment

Effective March 1, 2016

**Convalescent Center**

## Finance Dept Use Only

<table>
<thead>
<tr>
<th>Available Balance</th>
<th>Date of Entry</th>
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</thead>
<tbody>
<tr>
<td>Prior to Transfer</td>
<td>After Transfer</td>
</tr>
<tr>
<td>$1,385,100.00</td>
<td>$1,385,100.00</td>
</tr>
</tbody>
</table>

**Reason for Request:**
To transfer budgeted funds, allowing for sufficient budget to be available by payroll accounting unit & account.

**Chief Financial Officer**

Signature on file

**Department Head**

Signature on file

---

**Packet Pg. 52**

Attachment: Budget Transfer - DuPage Care Center $1,385,100.00 R (17-18-1098 : Budget Transfer - DuPage Care Center - Payroll Accounting Unit)