

**Village of Orland Park**  
**Sole Source Request Form**  
Required for Purchases \$5,000 - \$24,999

Department Police Date 11/7/2025  
Division (if applicable) \_\_\_\_\_  
Description of Good/Service Axon Taser 10 & Cartridges  
Manufacturer or Supplier Axon Enterprise  
Dollar Amount \$27,894.00 Co-op Purchasing Contract # \_\_\_\_\_  
Have Adequate Funds Been Budgeted For This Purchase? Yes ☒ No ☐  
Account number(s) 2405040-460180

**Option 1 - Sole Source Justification**

A Sole Source Purchase is available from only one supplier and must meet at least one of the following criteria (check the appropriate box):

- |  |  |
|--|--|
| <input type="checkbox"/> One-of-a-Kind                   | The commodity or service has no competitive product alternatives available on the market.                                      |
| <input checked="" type="checkbox"/> Compatibility        | The commodity or service must match existing brand of equipment for compatibility.   |
| <input type="checkbox"/> Replacement Part                | The commodity is a replacement part for a specific brand of existing equipment.  |
| <input checked="" type="checkbox"/> Operation Continuity | The commodity or service is needed to maintain operational continuity.   |
| <input type="checkbox"/> Unique Design                   | The commodity or service must meet physical design or quality requirements.  |
| <input type="checkbox"/> Delivery Date                   | Only one supplier can meet necessary delivery requirements.  |
| <input type="checkbox"/> Emergency                       | <a href="#">PER VILLAGE CODE 1-16-3 (E)</a> : URGENT NEED for the item or service does not permit soliciting competitive bids. |
| <input type="checkbox"/> Other                           |  |

**Explain how your purchase of goods or services meets one or more of the above criteria for a valid sole source**

This is an additional one time purchase to existing Axon contract #20240512 for Tasers 10s and cartridges.

**Price Reasonableness**

I determined that the price is reasonable for one of the following reasons:

☐ Relevant documentation attached



- |  |
|--|
| <input type="checkbox"/> I compared the proposed price to prices I previously paid for the same or similar services.   |
| <input type="checkbox"/> I compared the proposed price to current published catalog, price lists, or market prices as documented in the attachments.         |
| <input type="checkbox"/> I compared the proposed price to rough yardsticks and did not discover significant inconsistencies that warrant additional inquiry. |
| <input type="checkbox"/> Based on my knowledge of the market, my experience of prior similar proposals, or knowledge imparted by technical experts.          |
| <input type="checkbox"/> The price is set by law or regulations.   |
| <input type="checkbox"/> Market research reveals that same or similar goods or services are available for a similar price.                                   |

**Option 2 - Joint or Cooperative Purchasing**

Purchase through Cooperative Purchasing (attach contract documentation)

- |  |   |
|--|---|
| <input type="checkbox"/> <a href="#">State of Illinois Joint Purchase Program</a>                            | <input type="checkbox"/> <a href="#">Omnia Partners - Public Sector</a>                 |
| <input type="checkbox"/> <a href="#">NWMC/Suburban Purchasing Cooperative</a>                                | <input type="checkbox"/> <a href="#">National Intergovernmental Purchasing Alliance</a> |
| <input type="checkbox"/> <a href="#">The GSA Schedules</a>   | <input type="checkbox"/> <a href="#">The National Cooperative Purchasing Alliance</a>   |
| <input type="checkbox"/> <a href="#">Sourcewell</a>  | <input type="checkbox"/> <a href="#">HGACBuy</a>  |
| <input type="checkbox"/> <a href="#">Nat'l Association of State Procurement Officials (NASPO) ValuePoint</a> | <input type="checkbox"/> <a href="#">Municipal Partnering Initiative (MPI)</a>          |
| <input type="checkbox"/> <a href="#">Choice Partners Cooperative</a>   | <input type="checkbox"/> <a href="#">Midwestern Higher Education Compact</a>            |
| <input type="checkbox"/> <a href="#">The Interlocal Purchasing System (TIPS)</a>                             | <input type="checkbox"/> <a href="#">National Purchasing Partners (NPPGov)</a>          |
| <input type="checkbox"/> <a href="#">Purchasing Cooperative of America</a>                                   | <input type="checkbox"/> <a href="#">1Government Procurement Alliance (1GPA)</a>        |
| <input type="checkbox"/> <a href="#">Good Buy Purchasing Cooperative</a>                                     | <input type="checkbox"/> <a href="#">National BuyBoard (BuyBoard)</a>                   |
|  | <input type="checkbox"/> Other: _____   |

**Requested By:**

Name	Signature	Date
Staff Contact Lieutenant Kerry Kelly-Valan		11/7/2025
Department Head Chief Eric Rossi		11/7/2025

Did legal review Terms & Conditions from vendor, if applicable? ☐ Yes ☐ No ☐ N/A

Have you received a CRT summary from the Risk Manager? ☐ Yes ☐ No ☐ N/A