

## State of Maine Procurement Justification Form

This form must accompany ALL contract requests and sole source requisitions (RQS) submitted to the Division of Procurement Services.

INSTRUCTIONS: Please provide the requested information in the white spaces below.

### PART I: OVERVIEW

Department Office/Division/Program:		Maine State Prison		
Department Contract Administrator or Grant Coordinator:		Robert Walden		
(If applicable) Department Reference #:				
Document Amount:	\$ 29,924.40	Advantage CT / RQS #:	RQS 03B 20210121*0697	
AMENDMENT	Original Start Date:	12/1/20	Effective Date:	12/31/20
	Previous End Date:		New End Date:	
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
ALL OTHER	Proposed Start Date:		Proposed End Date:	
Vendor/Provider/Grantee Name, City, State:		WB Mason, PO Box 981101, Boston MA 02298-1101		
Brief Description of Goods/Services/Grant:		Containers and trays for feed ins		

### PART II: JUSTIFICATION FOR VENDOR SELECTION

Mark an "X" before the justification(s) that applies to this request.

	A. Competitive Process		G. Grant
	B. Amendment		H. State Statute/Agency Directed
<b>X</b>	C. Single Source/Unique Vendor		I. Federal Agency Directed
	D. Proprietary/Copyright/Patents		J. Willing and Qualified
	E. Emergency		K. Client Choice
	F. University Cooperative Project		L. Other Authorization

### PART III: SUPPLEMENTAL INFORMATION

Please respond to ALL of the following:

**1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.**

**Food containers and trays were purchased for the Maine State Prison for feed ins due to COVID19**

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### PART III: SUPPLEMENTAL INFORMATION

**2. Provide a brief justification for the selected vendor to supplement the response in Part II.**

The 3 compartment trays have been at times difficult to procure during the pandemic and WB Mason has been a reliable source for this vital item.

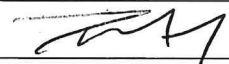

**3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.**

The cost of these trays is in line with industry standards. They are slightly less than what we would pay through Sysco when and if they have them in stock.

**4. Describe the plan for future competition for the goods or services.**

MDOC plans to maintain a robust stock of these trays due to our continued aggressive approach to keeping our facilities safe. We will use our prime vendor Sysco when they have available stock. Due to the critical need for these trays MDOC needs to maintain multiple vendors to support our inventories.

### PART IV: APPROVALS

<b>Signature of requesting Department's Commissioner (or designee):</b>	<i>By signing below, I signify that I approve of this procurement request.</i>		
			
<b>Printed Name:</b>	Randall A Liberty, Commissioner	<b>Date:</b>	01/21/21
<b>Signature of DAFS Procurement Official:</b>	<small>DocuSigned by:</small> 		
<b>Printed Name:</b>	<small>1DFA565D481F42E...</small> Debbie Jacques	<b>Date:</b>	1/26/2021