

## State of Maine Procurement Justification Form

This form must accompany ALL contract requests and sole source requisitions 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:	DHHS/Maine CDC			
Department Contract Administrator or Grant Coordinator:	Chris Moiles/Matt Galletta			
(If applicable) Department Reference #:	CD0-20-5176			
Estimated Contract or Grant Amount:	\$8,000.00	Advantage CT / RQS #:	CT 10A 20200409000000002832	
AMENDMENT	Original Start Date:		New Start Date:	
	Original End Date:		New End Date:	
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
ALL OTHER	Proposed Start Date:	04/04/2020	Proposed End Date:	06/30/2020
Vendor/Provider/Grantee Name, City, State:	Arkatechure 75 Washington Ave, Suite 2D Portland, ME 04101			
Brief Description of Goods/Services/Grant:	Data Visualization Technical Expertise- Professional Services			

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
	C. Single Source/Unique Vendor		I. Federal Agency Directed
	D. Proprietary/Copyright/Patents		J. Willing and Qualified
<b>X</b>	E. Emergency		K. Client Choice
	F. University Cooperative Project	<b>X</b>	L. Other Authorization: COVID-19

PART III: SUPPLEMENTAL QUESTIONS
Please respond to ALL of the following questions.
<b>1. Provide a more detailed description of the goods, services or grant to supplement the response in Part I.</b>
The purchase of data visualization technical professional services to assist with the setup, including maintenance, support, and ad hoc requests to enhance Tableau Dashboards for Maine CDC Programs, including Maine COVID-19 Public Dashboard.

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### PART III: SUPPLEMENTAL QUESTIONS

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

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

The Department looked at available companies to provide these items; this organization was the only one that could support the Department's need. As such, the Department reviewed the pricing, which was deemed acceptable in light of the Governor's Civil State of Emergency.

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

### PART IV: APPROVALS

**Signature of requesting  
Department's Commissioner  
(or designee):**

*By signing below, I signify that I approve of this procurement request.*

DocuSigned by:

*Benjamin Mann*

**Printed Name:**

BENJAMIN MANN

**Date:**

4/10/2020

**Signature of DAFS  
Procurement Official:**

DocuSigned by:

*Kathy Paquette*

**Printed Name:**

Kathy Paquette

**Date:**

4/13/2020