

State of Maine Procurement Justification Form

PART I: OVERVIEW

Department Office/Division/Program:		DHHS Riverview Psychiatric Center		
Department Contract Administrator or Grant Coordinator:		Matt Galletta		
(If applicable) Department Reference #:		RPC-20-611		
Amount: (Contract/Amendment/Grant)	\$35,500.00	Advantage CT / RQS #:	RQS 10A 20200617*1379	
CONTRACT	Proposed Start Date:	06/24/2020	Proposed End Date:	06/30/2020
AMENDMENT	Original Start Date:		Effective Date:	
	Previous End Date:		New End Date:	
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Smart Source Enterprise LLC 26001 Pala Mission Viejo, CA 92691		
Brief Description of Goods/Services/Grant:		Level 2 Gowns – IMMEDIATE NEED		

PART II: JUSTIFICATION FOR VENDOR SELECTION

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

	A. Competitive Process		G. Grant
	B. Amendment		H. State Statute/Agency Directed
X	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	x	L. Other Authorization – COVID-19

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.

Riverview Psychiatric Center (RPC) is in immediate need of purchasing Level 2 gowns as part of its preparation and response to the Covid-19 pandemic.

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PART III: SUPPLEMENTAL INFORMATION

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

This vendor is able to supply RPC with a large supply of Level 2 gowns. This is a high-priority purchase and is an essential part of RPC's preparation and response to the Covid-19 pandemic.

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.

The Department does not intend to competitively procure these items.

PART IV: APPROVALS

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

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

Printed Name:

Ben Mann

Date:

6/25/20

**Signature of DAFS
Procurement Official:**

DocuSigned by:

William J.E. Allen

Printed Name:

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William J.E. Allen

Date:

6/29/2020

COVID-19 Emergency Posting NOI 0620200598 06/30/220 - 07/06/2020