

**PROCUREMENT JUSTIFICATION FORM (PJF)**

This form must accompany all contract requests and sole source requisitions (RQS) over \$5,000 submitted to the Division of Procurement Services.

*INSTRUCTIONS: Please provide the requested information in the white spaces below. All responses (except signatures) must be typed; no hand-written forms will be accepted. See the guidance document posted with this form on the Division of Procurement Services intranet site (Forms page) for additional instructions.*

**PART I: OVERVIEW**

Department Office/Division/Program:		Economic & Community Development/Office of Outdoor Recreation	
Department Contract Administrator or Grant Coordinator:		Carolann Ouellette	
(If applicable) Department Reference #:		N/A	
Amount: (Contract/Amendment/Grant)	\$ \$18,030.50	Advantage CT / RQS #:	
CONTRACT	Proposed Start Date:	1/10/2022	Proposed End Date: 1/30/2022
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:		Freeman Expositions, LLC Dallas, TX	
Brief Description of Goods/Services/Grant:		Rental of complete 20x20 Turnkey exhibit structure, electrical, counters, carpet & personalized graphics plus project coordinator fee for Outdoor Retailer Snow Show in Denver, CO.	

**PART II: JUSTIFICATION FOR VENDOR SELECTION**

Check the box below for the justification(s) that applies to this request. (Check all that apply.)

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

Please respond to ALL of the questions in the following sections.

**PART III: SUPPLEMENTAL INFORMATION**

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

20 x 20 Package A Turnkey Exhibit Solutions - Package A  
 Included in Package: 10'h Modular backwall structure with a 10'w x 3'd storage closet with locking door and mural fabric graphics (2) 5'w x 36"h x 20"d reception counter with storage and graphic panels (1) 20"w x 36"h x 20"d pedestal with interior storage, locking door and graphic panels (6) arm spot lights (includes electrical)Choice of color of classic carpet and 1/2" padding + nightly vacuuming Material handling of structure is included

42" Powered Locking Pedestal;  
 16oz Classic Carpet - Color TBD - included in Package  
 Electrical Service for Arm Lights - included in Package  
 Nightly Vacuuming & Specialized cleaning- included in Package  
 Client Solutions Manager - Oversees the project through completion, including design, production, detailing, show services, transportation, and invoicing

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.

Freeman Exposition Services is the contracted provider for all exhibitor services for this show. There are no other options available to us at this time.

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

Rates are standard across the industry for trade and retail shows.

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

We anticipate issuing an RFP to secure a company that can design and build a trade show booth that we would purchase to have on hand to ship to shows that we attend.

**PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)**

Does this request utilize ARPA/MJRP funds?

- Yes – If Yes, please attach the approved Business Case(s).
- No – If No, proceed to Part V.

**PART V: APPROVALS**

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:	Denise Garland	Date:	1-12-22
Signature of DAFS Procurement Official:	DocuSigned by: 		
Typed Name:	<small>AEED9C7B3A8044E...</small> Justin Franzose	Date:	1/18/2022