



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
DIVISION OF PROCUREMENT SERVICES
 STATE OF MAINE

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:		Department of Professional and Financial Regulation	
Department Contract Administrator or Grant Coordinator:		Rachel Hendsbee	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 19,512	Advantage CT / RQS #:	02A 2022011400000802
CONTRACT	Proposed Start Date:	1/1/2022	Proposed End Date: 12/31/2022
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:		LexisNexis, a division of RELX Inc. PO Box 9584 New York, NY	
Brief Description of Goods/Services/Grant:		Subscriber access to LexisNexis content and features as outlined in the proposed agreement	

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.

The proposed Service Contract will provide professionals within the Department access to Lexis content and features in support of regulatory and enforcement responsibilities of each agency, including researching State and Federal statutes; State and Federal rules and regulations; State and Federal case law, Secondary legal sources relating to banking, trusts, corporations, securities, insurance, administrative law, and other financial services related subjects.; State and Federal advisory opinions and legal guidance; Legal treatises; and Asset and person searches related to subjects of investigations.

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

LexisNexis is one of two providers that offer access to electronic legal and regulatory research sources and material. There are limitations with either service due to ownership of certain materials and licensing practices of publishers. LexisNexis is able to provide a service package with access to the sources and material that best meet the needs of the Department at a competitive price.

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

The pricing provided is below the usual cost for services of either vendor.

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

The Department will continue to review all available providers and the content and material offered.

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

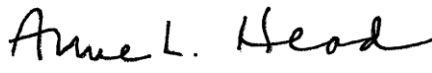
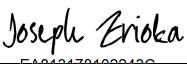
Does this request utilize ARPA/MJRP funds?

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:	Anne L. Head	Date:	1/13/2022
Signature of DAFS Procurement Official:			
Typed Name:	Joseph Zrioka	Date:	1/22/2022