



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 Administrative and Financial Services/Maine Revenue Services		
Department Contract Administrator or Grant Coordinator:		Susan T. Smith		
(If applicable) Department Reference #:				
Amount: (Contract/Amendment/Grant)		\$ 328,194.00	Advantage CT / RQS #:	20200702*0021
CONTRACT	Proposed Start Date:		Proposed End Date:	
AMENDMENT	Original Start Date:	7/1/2020	Effective Date:	11/28/2022
	Previous End Date:	6/30/2024	New End Date:	No Change
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Fairfax Imaging, Incorporated DBA Fairfax Software, Incorporated 2005 Pan Am Circle Drive, Suite 110 Tampa, FL 33607		
Brief Description of Goods/Services/Grant:		Upgrade from the ImageTrac 6 scanner to the FUSiON 7400 scanner.		

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 checked="" 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.

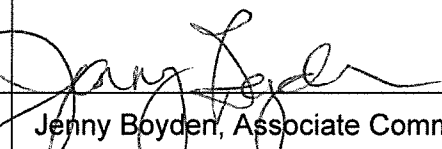
PART III: SUPPLEMENTAL INFORMATION

1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.
Maine Revenue Services (MRS) administers all major tax programs that support Maine state government, including 49 tax types and 132 unique forms. Efficient operations are imperative to promptly process tax returns and deposit electronic payments. The purchase and installation of the FUSiON 7400 scanner will provide powerful new imaging technology, including duplex camera imaging, high resolution, and faster throughput speed.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.
Fairfax Imaging provides MRS with an image and data capturing system including the support and maintenance. MRS' current contract with Fairfax Imaging includes a provision for the Department to purchase hardware and affiliated services as needed. The upgrade to the FUSiON 7400 scanner will ensure MRS can process a wide range of documents without interruption. No other entity can provide the equipment MRS uses for daily processing.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.
The cost for the equipment and installation is fair and reasonable and includes a trade-in allowance for the ImageTrac 6 scanner that is being replaced. Additionally, the cost includes one year of maintenance and support.
4. Describe the plan for future competition for the goods or services.
The MRS scanners have been procured through Fairfax Imaging who also provides maintenance and forms development in the proprietary software programs. No other entity could timely provide the necessary equipment that MRS uses for the processing, image and data capture of taxpayer returns, payments, and correspondence.

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

Does this request utilize ARPA/MJRP funds?
<input type="checkbox"/> Yes – If Yes, please attach the approved Business Case(s).
<input checked="" type="checkbox"/> 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:	Jenny Boyden, Associate Commissioner	Date:	11-30-22

Signature of DAFS Procurement Official:			
Typed Name:		Date:	