



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:	Office of the Attorney General		
Department Contract Administrator or Grant Coordinator:	Mark A. Toulouse		
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$95,000.00	Advantage CT / RQS #:	CT 26A 20240103*1857
CONTRACT	Proposed Start Date:	11/9/2023	Proposed End Date: 5/31/2024
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:	Kevin Kelley PO Box 782 Ogunquit, ME 03907		
Brief Description of Goods/Services/Grant:	Media Services		

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 checked="" 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 purpose of this contract is to procure specialized media services for Governor Mills' independent commission to investigate the facts of the October 2023 Lewiston mass casualty tragedy.

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

Governor Mills, Attorney General Frey, and the Commission established by Executive Order dated November 9, 2023 appointed Mr. Kelley to serve as media liaison for the Commission. This appointment is based upon past experience in the field.

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

Mr. Kelley's rate was agreed upon by the commission members, and is significantly below the rate of private firms.

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

N/A

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

Does this request utilize ARPA/MJRP funds?


Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).

Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.

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:	Mark A. Toulouse	Date:	1/4/2024

Signature of DAFS Procurement Official:	DocuSigned by: <i>Sue H. Garcia</i> E5DB92AC0F8D490...		
Typed Name:	Sue H. Garcia	Date:	1/19/2024