

**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 Public Safety, Maine State Police Computer Crimes Unit	
Department Contract Administrator or Grant Coordinator:		Lt. Jason Richards Starla Dorval	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 14,500	Advantage CT / RQS #:	RQS 16A 20240111*961
CONTRACT	Proposed Start Date:	2/27/2024	Proposed End Date: 3/7/2024
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:		Teel Technologies 22 Knight St Norwalk, CT 06851 US 203 855-5387	
Brief Description of Goods/Services/Grant:		Combined JTAG/Chip-off Forensic Training	

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 checked="" 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.

Combined JTAG/Chip-off Forensic Training provides required skills to successfully perform mobile device repair and memory acquisitions by learning chip removal, soldering boards or chips, repairing damage devices to recover valuable investigative information that would not be able to be recovered by normal forensic means.

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

CCU is currently in the process of securing a complete JTAG/Chipoff workbench kit of equipment to work on these devices which is specific to the training being requested.

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

Negotiated costs have been funded through our current ICAC Grant from the Department of Justice.

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

This is a onetime purchase for this training.

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):


Michael Sauschuck (Jan 11, 2024 11:22 EST)


Typed Name:

Michael Sauschuck

Date:

Jan 11, 2024

Signature of DAFS
Procurement Official:

DocuSigned by:

2D5B6E39F57E44A...

Typed Name:

william J.E. Allen

Date:

1/30/2024

NOI 0120240110 01/31/2024 - 02/06/2024




Teel Technologies JTAG Chippoff training (PJF)

Final Audit Report

2024-01-11

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