



PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$5,000 submitted to the Office of State 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 Procurement Services intranet site (Forms page) for additional instructions.

| PART I: OVERVIEW | | | |
|---------------------------------------------------------|----------------------|--------------------------------------------------------------|------------------------------|
| Department Office/Division/Program: | | Secretary of State, Bureau of Motor Vehicles | |
| Department Contract Administrator or Grant Coordinator: | | Beverly Campbell, Business Service Manager | |
| (If applicable) Department Reference #: | | | |
| Amount: (Contract/Amendment/Grant) | \$ 5,520.00 | Advantage CT / RQS #: | 20250115000000000993 |
| CONTRACT | Proposed Start Date: | 1/1/2025 | Proposed End Date: 2/28/2025 |
| 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: | | Lindendmeyr Munroe 190Riverside St. Portland, ME 04103 | |
| Brief Description of Goods/Services/Grant: | | Printed digital window envelopes | |

| 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 purpose is to print return addresses on envelopes used by different divisions at the BMV. We purchase blank envelopes from Lindenmeyr.

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

This is the vendor that has been being used. They are now larger \$ purchases.

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

We have looked at other vendors and the cost is fair and reasonable.

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

The BMV will work with Procurement to determine if an MA is optional for future purchases of envelopes and specialty paper that we frequently purchase from this vendor.

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).

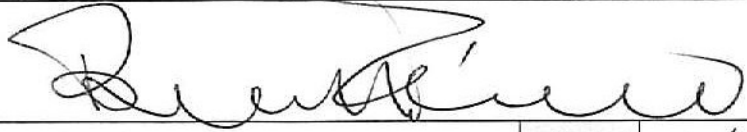
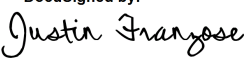
Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.

No – If No, proceed to Part V.

PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE

Maine law contains Conflict of Interest statutes directed to State Departments, State Officers, and Employees Generally under MRS Title 5, §18 and §18-A, in harmony with MRS Title 17, §3104.

The requesting department signatory understands and acknowledges Maine’s Conflict of Interest statutes.

| PART VI: APPROVALS | | | |
|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-----------|
| The signatures below indicate approval of this procurement request. | | | |
| Signature of requesting Department's Commissioner (or designee): |  | | |
| Typed Name: | Bruno Inacio | Date: | 1/28/25 |
| Signature of DAFS Procurement Official: | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <small>DocuSigned by:</small>  <small>AEED9C7B3A8044E...</small> </div> | | |
| Typed Name: | Justin Franzose | Date: | 1/29/2025 |