



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:		DAFS/OIT/AV Team	
Department Contract Administrator or Grant Coordinator:		Kyle Pendleton	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 9,776.17	Advantage CT / RQS #:	RQS 18B 20230117-0861
CONTRACT	Proposed Start Date:	12/1/2022	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:		Pro AV Systems, Inc. 275 Billerica Rd STE 3 Chelmsford MA, 01824	
Brief Description of Goods/Services/Grant:		Audio Visual installation-PRO 7221	

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 Department/CIO had a requirement for a virtual hybrid AV system for meetings.

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

When the requirement was implemented, all prequalified vendors were currently engaged on another mini-bid for conference room 317A&B at 51 Commerce Dr. ProAV was the only vendor attending the conference room 317A&B mini-bid. ProAV offered to perform a floor plan for the CIOs conference room. This expedited the response time for this new requirement, and it was added to the min-bid for conference room 317A&B.

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

This system has very little components for us, (OIT) to manage. ProAV has their own warranty for this system and will repair it if it breaks. The components are easy to use and can be used by many people without a lot of training required. We worked with ProAV on many quotes to ensure we were only getting what was needed. The cost is within industry standards.

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

Future plans for doing these systems, will be competitively bid through the Audio-Visual Equipment and Services Statewide contract. All prequalified vendors with master agreements for AV equipment and services will be engaged and encouraged to make quotes.

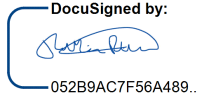
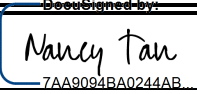
PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)

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):	 <small>DocuSigned by:</small> <small>052B9AC7F56A489...</small>		
Typed Name:	Frederick Brittain, Chief Information Officer	Date:	Jan-31-2023
Signature of DAFS Procurement Official:	 <small>DocuSigned by:</small> <small>7AA9094BA0244AB...</small>		
Typed Name:	Nancy Tan, Deputy Director of IT Procurement	Date:	Jan-31-2023



7221
1283876 ✓

Invoice #	40517
Date	12/1/2022
Due Date	12/31/2022
Project	PRJ-221169 C...
(207) 491-7564	

275 Billerica Rd. Suite 3
Chelmsford, MA 01824
Email Contact: esteffany@proavsi.com
Phone Number: (978) 692-5111

Bill To	DocuSigned by:
Maine Office of Information Technology Attn: Accounts Payable 51 Commerce Drive, Rm 317A & B Augusta, ME 04330	<i>Joy Lazore</i> BF7C82631E184FB...

Ship To
Maine Office of Information Technology Attn: PRJ-221169 51 Commerce Drive Augusta, ME 04330

P.O. Number	Terms	Rep	Ship	Via	Contract Type
Verbal	Net 30	BID	12/1/2022	Ground	None
Item Code	Description	Quantity	U/M	Price Each	Amount
AV Equipment	Equipment Ordered Portion CIO Conference Room 4th Floor AV Equipment per Quote CIO-0003	1	ea	7,528.89	7,528.89T
Installation	Installation Services Of Complete System.	1		2,247.28	2,247.28

PLEASE REMIT PAYMENT TO:
PRO AV SYSTEMS, INC.
275 BILLERICA ROAD, STE 3
CHELMSFORD, MA 01824

Sales Tax (0.0%)	\$0.00
Total	\$9,776.17
Payments/Credits	\$0.00
Balance Due	\$9,776.17

All returns subject to a 25% restocking fee with approved RMA. Credit will be issued upon receipt of product. 1.5% per month charge for late payment.