



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/MaineIT/Maine State Library	
Department Contract Administrator or Grant Coordinator:		Lori Fisher, Maine State Librarian	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 77,279.00	Advantage CT / RQS #:	RQS 18B 20240213*1170
CONTRACT	Proposed Start Date:	3/1/2024	Proposed End Date: 2/28/2027
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:		Servicestar Document Management, LLC 96 Stillwater Dr Guilford CT 06437-2018	
Brief Description of Goods/Services/Grant:		ST Imaging ViewScan 4-9 Digital Microfilm 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 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 Maine State Library received funding to replace three microfilm machines and purchase a scanner to allow reels to be digitized. Due to the age of the devices and not being able to get authorized parts, OIT could no longer support the communication interface between each microfilm machine and their connected PC. The film scanner will allow the library to eventually digitize all reels of film at the library and serve as a resource for other cultural institutions who want to make their collections of film available in digital format. That should allow us to eventually phase out the public microfilm machines as they wear out or become obsolete in the future.

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

The existing fleet of film viewers that is being replaced was the same brand and used the same user interface that was very easy for the public to learn and use. Moving away from that brand (and the software interface, in particular) would be disruptive to our patrons who are familiar with the equipment and the staff who assist users with set-up. Our current film viewers have been here for over 10 years, and we have not had any significant issues with the hardware despite heavy use.

The film scanner is from the same manufacturer and has a very similar construct and interface. spare parts can be utilized during the phase out period

Certain parts off our old units will be interchangeable with the new units in the event that there is any damage that occurs as a result of public use.

The manufacturer sells these units through assigned field representatives. This vendor has Maine State Government as their exclusive territory. Another agency (DHHS) was approved to purchase the same viewers through a sole-source from this vendor back in August using a PJF.

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

This is a proprietary/sole source vendor. We receive a discount as flagship customers.

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

These items will not need to be purchased again until they wear out or become obsolete.

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

Does this request utilize ARPA/MJRP funds?

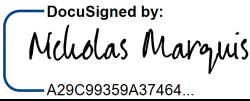
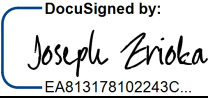
Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).

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):	 <small>DocuSigned by: A29C99359A37464...</small>		
Typed Name:	Nicholas Marquis, Chief Information Officer	Date:	2/15/2024
Signature of DAFS Procurement Official:	 <small>DocuSigned by: EA813178102243C...</small>		
Typed Name:	Joseph Zrioka, Director of IT Procurement	Date:	2/15/2024