



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:		Secretary of State, Office of Information Services	
Department Contract Administrator or Grant Coordinator:		Chris Johnson, Deputy Secretary of State	
(If applicable) Department Reference #:		Proposal ID: 838	
Amount: (Contract/Amendment/Grant)	\$34,532.50	Advantage CT / RQS #:	2022031100000000999
CONTRACT	Proposed Start Date:	3/27/2022	Proposed End Date: 6/30/2022
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:		Webucator, Inc. 201 West Genesee Street, Suite 113 Fayetteville, NY 13066	
Brief Description of Goods/Services/Grant:		Java and Spring 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 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.

Webucator, Inc. is providing customized training for the Office of Information Services [IS]. The training will be an introduction to Java, Spring 5, Spring Boot, Spring Rest, Apache CXF and Java overview for managers and analysts. These trainings will allow the Information Services team to have the necessary Java and Service Oriented Architecture knowledge as we move forward with the bureau's modernization project.

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

We have used Webucator online training effectively for individual programmer development in the past. This training was specifically customized to meet the needs of the Office of Information Services.

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

The Office of Information Services has used Webucator's proprietary and customized trainings on several occasions. The cost of the trainings has been consistent and judicious based on the complexity of the subject matter and the quality of the training professionals.

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

The Office of Information services is open to using other training sources as long as the training meets the specific and customized needs of the Office. The qualifications of the training personnel and their ability to competently present complex technology training in an easily understood manner are crucial.

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

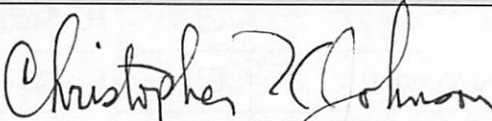
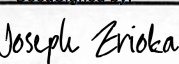
Does this request utilize ARPA/MJRP funds?

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):			
Typed Name:	Christopher K. Johnson Deputy Secretary of State	Date:	3/11/22
Signature of DAFS Procurement Official:	 <small>DocuSigned by: EA813178102243C</small>		
Typed Name:	Joseph Zrioka	Date:	3/15/2022