



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:	Maine Arts Commission		
Department Contract Administrator or Grant Coordinator:	Julie Horn		
(If applicable) Department Reference #:	94W		
Amount: (Contract/Amendment/Grant)	\$ 6,000	Advantage CT / RQS #:	20240215000000002249
CONTRACT	Proposed Start Date:	2/20/2024	Proposed End Date: 6/30/2024
AMENDMENT	Original Start Date:		Effective Date:
	Previous End Date:		New End Date:
GRANT	Project Start Date:	Click or tap to enter a date.	Grant Start Date: Click or tap to enter a date.
	Project End Date:	Click or tap to enter a date.	Grant End Date: Click or tap to enter a date.
Vendor/Provider/Grantee Name, City, State:		Ladder To The Moon Network, Portland, ME	
Brief Description of Goods/Services/Grant:		Support for Arts/Culture newspaper Amjambo Africa!	

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 Arts Commission is working hard to lift the voices of those who are marginalized and often go unheard. Among those voices are members of the immigrant community. In southern Maine there is a large population of individuals from countries within the African diaspora. This funding provides Ladder To The Moon to devote a page of their publication Amjumbo Africa! to artists from their community. Click or tap here to enter text.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	We chose to partner with Ladder To The Moon because they create an accessible online and print publication for new immigrant residents. Articles are translated into six languages besides English, including French, Kinyarwanda, Portuguese, Swahili, Somali and Spanish. There is no other publication in Maine like it.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	\$6,000 will provide the funding for Ladder To The Moon to hire writers to interview and create stories focusing on emerging artists and artist collectives within the immigrant community throughout Maine. The funds are quite modest for the amount of writing that will be generated. Multiple stories will appear in each of their monthly publications.
4. Describe the plan for future competition for the goods or services.	The Maine Arts Commission's support of this program is in part to fulfill the National Endowment for the Arts required outreach to traditional and underrepresented communities.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)	
Does this request utilize ARPA/MJRP funds?	
<input type="checkbox"/> Yes – If Yes, please attach the approved Business Case(s).	
<input checked="" type="checkbox"/> 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:	Julie Horn
Date:	2/1/2024
Signature of DAFS Procurement Official:	

Typed Name:		Date:	
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