



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES  
**OFFICE OF STATE PROCUREMENT SERVICES**  
 STATE OF MAINE

**PROCUREMENT JUSTIFICATION FORM (PJF)**

This form must accompany all contract requests and sole source requisitions (RQS) over \$10,000 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:		Agriculture, Conservation and Forestry, Division of Animal and Plant Health, CAPS Program	
Department Contract Administrator or Grant Coordinator:		Karen Coluzzi	
(If applicable) Department Reference #:			
Agency Department Code:	01A	Advantage CT / RQS #:	CT 01A 20260320*1991
Amount: (Contract/Amendment/Grant)	\$11,000		
CONTRACT	Proposed/Original Start Date:	<b>4/13/2026</b>	Proposed/Most Recent End Date: 12/31/2026
AMENDMENT	New Effective Date:		New End Date (if Applicable):
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Lamar, Atlanta, GA	
Brief Description of Goods/Services/Grant:		Vendor would provide advertising space on a billboard in MA for a firewood awareness outreach campaign	

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. Higher Education Cooperative Project	<input type="checkbox"/>	L. Other Authorization

Please respond to ALL of the questions in the following sections.

<b>PART III: SUPPLEMENTAL INFORMATION</b>	
1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.	
	The CAPS Program in the Department of Agriculture, Conservation and Forestry was awarded a grant through USDA’s Plant Protection Act to promote firewood awareness to out-of-state travelers. The bulk of the funding awarded is earmarked to rent billboard space in Massachusetts. The billboards will warn Maine-bound travelers of Maine’s out-of-state firewood ban. Other states have adopted this strategy over the years. <a href="https://www.dontmovefirewood.org/resource-library/?_sft_item_type=billboard">https://www.dontmovefirewood.org/resource-library/?_sft_item_type=billboard</a>
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number if applicable.	
	The State Horticulturist and State Survey Coordinator of the CAPS Program researched highway billboards in Massachusetts and New Hampshire that face drivers bound for Maine. We contacted Lamar that operates a digital billboard in Massachusetts on busy rt.1 entering I95. Based on billboard maps and personal driving experience, a digital billboard was chosen (Lamar #1796). This procurement justification is for the vendor Lamar, whose digital billboard we ranked first based on location and impressions.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	
	Because there are limited billboard spaces in adequate sites for this purpose, price negotiations were attempted, but the rate is competitive and we were unable to procure a lower rate.
4. Describe the plan for future competition for the goods or services.	
	If in the future we receive another grant to advertise outreach messages in other states, we would likely follow the same procedure - research the optimal locations, find out the companies that are in those locations, request quotes, and if all things are equal, go with the most economical.

<b>PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS &amp; RECOVERY PLAN (MJRP)</b>	
Does this request utilize ARPA/MJRP funds?	
<input type="checkbox"/> Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).	
<input type="checkbox"/> Yes, ARPA funds (025) or (026) – If Yes, please be aware of the requirements from awarding federal agencies.	
<input checked="" type="checkbox"/> No – If No, proceed to Part V.	

<b>PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE</b>	
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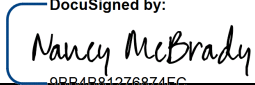
Maine law contains Conflict of Interest statutes directed to State Departments, State Officers, and Employees Generally under MRS [Title 5, §18](#) and [§18-A](#), in harmony with MRS [Title 17, §3104](#).

The requesting department's signatory affirms, understands, and acknowledges Maine's Conflict of Interest statutes and, in accordance with those statutes and to the best of their knowledge, has determined that no conflict of interest exists at the time of this contract, renewal, or amendment.

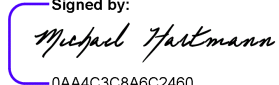
**PART VI: APPROVALS**

Governor/Department Commissioner or Designee

1. The signature below indicates approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:	Nancy McBrady	Date:	3/26/2026
2. Additional signature required <b>ONLY if box E (Emergency) is selected in PART II</b> . The signature below indicates approval by the Department's Commissioner, or the <u>designee specifically authorized to approve emergency procurement requests</u> .			
Signature of requesting Department's Commissioner (or designee):			
Typed Name:		Date:	

**\*\*OSPS Section Only\*\***

Signature of DAFS Procurement Official:			
Typed Name:	Michael Hartmann	Date:	3/27/2026