



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.

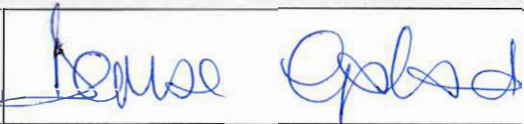

PART I: OVERVIEW				
Department Office/Division/Program:		DECD/Office of Outdoor Recreation		
Department Contract Administrator or Grant Coordinator:		Carolann Ouellette		
(If applicable) Department Reference #:		N/A		
Amount: (Contract/Amendment/Grant)		\$ 7,500.00	Advantage CT / RQS #:	CT19A20220118000000001698
CONTRACT	Proposed Start Date:	Click or tap to enter a date.	Proposed End Date:	
AMENDMENT	Original Start Date:	1/10/2022	Effective Date:	4/1/2022
	Previous End Date:	4/30/2022	New End Date:	6/30/2022
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Paul Botticello 458 Ludlow Street, Portland, ME 04102		
Brief Description of Goods/Services/Grant:		To provide consulting and facilitation services for foundational planning work in preparation for the Maine Outdoor Recreation Economy road map project.		

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 checked="" 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.	As with the contract PJF, this provider brings professional knowledge of the outdoor industry and expertise of process design, facilitation, communication, and influencing to drive outcomes; and is leading the design, planning, execution and facilitation of the activities within Foundational Planning. As we enter the 3 rd month of this work, it is apparent that more time is necessary to ensure a thorough and inclusive process.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	The selected vendor has years of experience leading large-scale strategic planning and long-term operational systems innovation processes as former Vice President Organization Development & HR Business Teams at LL.Bean. Not only does Paul bring this professional expertise in managing process design, but having worked for LL.Bean he also brings a wealth of knowledge related to the outdoor industry.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	The scope of work is very targeted and fees are in line with, and in most cases less than, other consulting contracts at the Office of Tourism including one of the most recent contracts that was awarded to Corragio Group for Sustainable Tourism Management Plan Development. The scope of work and deliverables remain the same, but we did add \$7,500 to cover extended timeframe.
4. Describe the plan for future competition for the goods or services.	The Outdoor Recreation Economy Road Map project plans on securing consultants through the RFP process.

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:	Denise Garland	Date:	4-12-22
Signature of DAFS Procurement Official:	DocuSigned by: 		
Typed Name:	1DFA565D481F42E... Debbie Jacques	Date:	4/12/2022