



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: | | Marine Resources/ Policy & Management | | |
| Department Contract Administrator or Grant Coordinator: | | Meredith Mendelson / Amanda Webb | | |
| (If applicable) Department Reference #: | | N/A | | |
| Amount: (Contract/Amendment/Grant) | | \$ 84,000.00 | Advantage <u>CT</u> / RQS #: | 13A 20230414000000002706 |
| CONTRACT | Proposed Start Date: | 5/1/2023 | Proposed End Date: | 4/30/2024 |
| 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: | | Capitol Hill Policy Group, Washington, DC | | |
| Brief Description of Goods/Services/Grant: | | Government relations for Lobster & Right Whale | | |

| 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 checked="" 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. | Renewed need for government relations support related to regulatory and legislative priorities related to right whale protections impacting the lobster fishery. |
| 2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable. | While the Department typically would conduct this work itself, this process is evolving quickly and requires a level of engagement that state employees can't manage adequately alone given competing demands on time. |
| 3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee. | The Capitol Hill Policy Group has extensive experience in legislative and regulatory advocacy in natural resource industries, both on Capitol Hill and in the private sector. The retainer is commensurate with industry standards for this work and the state has negotiated a rate that is well below his usual monthly retainer fee. The Department seeks authorization to contract with Capitol Hill Policy Group on a month-to-month basis up to one year, for an agreed upon rate of \$7k monthly, funded by the Department. |
| 4. Describe the plan for future competition for the goods or services. | N/A- this is specialized services work performed by someone with extensive experience with the Department and this issue who has necessary expertise to continue the work. |

| 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: | Patrick Keliher, Commissioner | Date: | 4/19/23 |
| Signature of DAFS Procurement Official: | <small>DocuSigned by:</small>  | | |
| Typed Name: | <small>891CE7A1493D45B...</small> Martha Verhille | Date: | 4/20/2023 |