



## 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 Public Utilities Commission		
Department Contract Administrator or Grant Coordinator:	Amy Dumeny, Administrative Director		
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 50,000	Advantage CT / RQS #:	CT65A20220311*2064
<b>CONTRACT</b>	Proposed Start Date:		Proposed End Date: <small>Click or tap to enter a date.</small>
<b>AMENDMENT</b>	Original Start Date:	<b>4/1/2022</b>	Effective Date: 4/1/2024
	Previous End Date:	<b>3/31/2024</b>	New End Date: 3/31/2026
<b>GRANT</b>	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Dr. J. Randall Woolridge State College, PA	
Brief Description of Goods/Services/Grant:		Expert utility financial consulting services.	

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 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.

The Consultant/Provider will evaluate rate of return, return on equity and other financial aspects of a large utility rate case on behalf of and at the direction of the Commission. The consulting services will include evaluating rate case filings and testimony and preparing and delivering expert witness testimony.

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

The vendor is being used as they provided expert testimony in two recent rate cases for the Commission. The Commission has just become aware of the need for this expert consultant, hence the emergency request.

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

There is no change to the contract hourly rate.

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

We will likely bid this at the end of this contract term.

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

Does this request utilize ARPA/MJRP funds?

Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).

Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.

No – If No, proceed to Part V.


### PART V: CONFLICTS OF INTEREST (COI); PURCHASES BY THE STATE

Does the requesting Department signatory understand and acknowledge Maine's COI Statute?


Yes, the requesting Department signatory understands and acknowledges Title 17, Chapter 101, §3104.

**PART VI: APPROVALS**

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):			
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Typed Name:	Amy Dumeny, Administrative Director	Date:	4/28/2024
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Signature of DAFS Procurement Official:	<p>DocuSigned by:  41C2BA36FAF44CD...</p>		
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Typed Name:	Kathy Paquette	Date:	4/30/2024
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