



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:		Secretary of State/BMV/Public Services		
Department Contract Administrator or Grant Coordinator:		Patty Leighton, Director of Public Services		
(If applicable) Department Reference #:				
Agency Department Code:	29B	Advantage CT / RQS #:	20260320000000001491	
Amount: (Contract/Amendment/Grant)		\$20,503.28		
CONTRACT	Proposed/Original Start Date:	3/1/2026	Proposed/Most Recent End Date:	12/30/2026
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:		ACF Technologies, Inc. 64 Peachtree Rd, Ste 201, Asheville, NC 28803-3154		
Brief Description of Goods/Services/Grant:		Maintenance and support for the lobby management equipment.		

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.

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.
	This will extend maintenance and support for the lobby management hardware: 13 ticketing kiosks, 13 ADA panels and brackets, 3 tabletop kiosks, 69 AIO flat mount POE streamers with flat mount VESA brackets. These items were received in 2024 and will be incorporated into the existing support framework moving forward. Currently under BPO.
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 lobby management software and hardware were purchased as a result of the RFP process and contract award. We need to pay the yearly ongoing maintenance fees to maintain the system, this is a maintenance agreement that will change yearly based on required licenses and required processes.
3.	Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.
	The hardware support is calculated in the same way as the software, it is 18% of the total cost. Maintenance and support cost of the Q-Flow system changes in cost are due to the state no longer receiving a discounted rate that we had in previous years. The overall rates look fair and reasonable. The department has approved what is being charged appropriately to what we need.
4.	Describe the plan for future competition for the goods or services.
	When the current lobby management equipment reaches end of life, the Department will pursue replacement goods and services through the State's competitive procurement process


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

PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE	
<i>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.</i>	
<input checked="" type="checkbox"/> 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:	Catherine Curtis	Date:	3/23/26

2. Additional signature required **ONLY if box E (Emergency) is selected in PART II**. The signature below indicates approval by the Department's Commissioner, or the designee specifically authorized to approve emergency procurement requests.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:		Date:	

****OSPS Section Only****

Signature of DAFS Procurement Official:	Signed by:  <small>2A1D91BCA418470...</small>		
Typed Name:	John Spier	Date:	4/9/2026