

## State of Maine Procurement Justification Form

This form must accompany ALL contract requests and sole source requisitions submitted to the Division of Procurement Services.

INSTRUCTIONS: Please provide the requested information in the white spaces below.

PART I: OVERVIEW			
Department Office/Division/Program:	DHHS/SAMHS/Leticia Huttman/Stephanie Kadnar		
Department Contract Administrator or Grant Coordinator:	Nancy Tan		
(If applicable) Department Reference #:	OSA-20-904		
Estimated Contract or Grant Amount:	\$30,222.00	Advantage CT / RQS #:	10A 20200211*2246
AMENDMENT	Original Start Date:		New Start Date:
	Original End Date:		New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
ALL OTHER	Proposed Start Date:	2/15/2020	Proposed End Date: 6/3020
Vendor/Provider/Grantee Name, City, State:	Penobscot Indian Nation VC1000072252		
Brief Description of Goods/Services/Grant:	Teen Center		

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Mark an "X" before the justification(s) that applies to this request.			
	A. Competitive Process		G. Grant
	B. Amendment		H. State Statute/Agency Directed
X	C. Single Source/Unique Vendor		I. Federal Agency Directed
	D. Proprietary/Copyright/Patents		J. Willing and Qualified
	E. Emergency		K. Client Choice
	F. University Cooperative Project		L. Other Authorization

PART III: SUPPLEMENTAL QUESTIONS
Please respond to ALL of the following questions.
<b>1. Provide a more detailed description of the goods, services or grant to supplement the response in Part I.</b>
<p>The purpose of this Agreement is to provide a free, low-barrier space to provide the services needed to combat the rising levels of drug use among Native American youth in Maine. The Penobscot Nation Youth Program is a hub for youth development programming focused on healthy relationships, suicide and substance use prevention, cultural and recreational activities, educational programming and career readiness through mentorship and service.</p>

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### PART III: SUPPLEMENTAL QUESTIONS

**2. Provide a brief justification for the selected vendor to supplement the response in Part II.**

This provider was selected due to the location within the Penobscot Nation as there are no other teen centers in the Penobscot Nation.

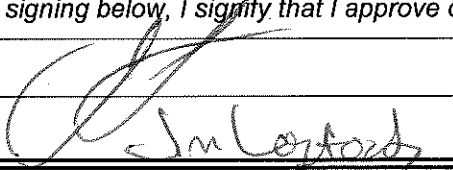
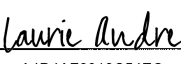
**3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.**

The salaries are comparable to other similar programs. The funding will be for 4.5 months.

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

These services will be incorporated into the Office of Child and Family Services RFP for Improving Outcomes for Youth which is schedule for a contract start date of 7/1/2020.

### PART IV: APPROVALS

<b>Signature of requesting Department's Commissioner (or designee):</b>	By signing below, I signify that I approve of this procurement request.		
<b>Printed Name:</b>		<b>Date:</b>	11 - Mar - 20
<b>Signature of DAFS Procurement Official:</b>	DocuSigned by: 		
<b>Printed Name:</b>	A4D4AF6018C54EC... Laurie Andre	<b>Date:</b>	5/26/2020