



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES

DIVISION OF PROCUREMENT SERVICES

STATE OF MAINE

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:		Judicial Marshal Office	
Department Contract Administrator or Grant Coordinator:		Ted Ross - Marshal	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 30,237.00	Advantage CT / RQS #:	
CONTRACT	Proposed Start Date:	6/1/2022	Proposed End Date:
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:		Laser Shot Inc., 4214 Bluebonnet Dr., Stafford, Texas, 77477	
Brief Description of Goods/Services/Grant:		Law Enforcement Firearm Training Simulator	

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. 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.

In today's society armed confrontations are becoming increasingly prevalent that law enforcement faces. Acquisition of this equipment greatly enhances our ability to train in a controlled and safe environment at a reduce cost overtime and creating an accessible option for staff to better prepare for these types of incidents.

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

Laser Shot was selected due to its flexibility in space for the required equipment. The ability to transfer to other locations if another location is identified. Further, the various selection(s) of training options as well as the cost (lower cost) when compared to similar units of equipment. Due to its proprietary control, the vendor is the manufacturer and distribution point of the equipment.

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

N/A

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

With competition limited to vendors in the industry, it is unknown at this time what viable vendors will be available in the future. However, all requirements as established by the State will be adhered to.

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

Does this request utilize ARPA/MJRP funds?

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

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):

DocuSigned by:
Dennis Corliss
830C1ED649954CE...

Typed Name:

5/5/2022

Date:

5/5/2022

Procurement Justification Form (PJF)

Signature of DAFS Procurement Official:	DocuSigned by: <i>Sue H. Garcia</i> <small>E5DB9ZAC0F8D490...</small>		
Typed Name:	Sue H. Garcia	Date:	5/5/2022