



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:		Maine Judicial Branch	
Department Contract Administrator or Grant Coordinator:		Elizabeth Maddaus	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)		\$ 40174.43	Advantage CT / RQS #: 20230414*1278
CONTRACT	Proposed Start Date:	02/13/2023	Proposed End Date: 02/13/2023
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:		Armstrong Family Industries, The Snowman Group 1 Printers Drive, Hermon, ME 04401	
Brief Description of Goods/Services/Grant:		Quarterly Court Forms	

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.

Court forms distributed to courts throughout the state for case processing, documentation and record keeping.

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

It is essential that certain court forms be available in bulk. These necessary court forms are either ones used by the public and provided to the public by the clerks or they are ones that are used in great quantities by the court. The current vendor is familiar with the forms and with the demands of the court and the need to update forms constantly due to legislative changes. With hundreds of complex forms used in the courts the current vendor provides timely and accurate service. With the incremental advent of Odyssey, we cannot guarantee quantities over the next three years as we dramatically decrease our need for paper as courts go online with the new case management system. While there will always be some forms needed, how many will not be known until we have some experience after the state-wide conversion is complete. All publicly used forms will be available online.

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

Snowman Printing is part of the Master Agreement. The MA associated with these items has expired.

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

It is expected that the need for certain court forms will diminish as the digital case management and electronic filing are implemented state-wide over the next three to five years. While there will always be a need for some printed forms, the quantity will be dramatically different. When we have a sense of those quantities, and all courts have been converted to the new case management system, we would go out to RFP.

### 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: <i>Dennis Corliss</i> C7C172528CF54F3... 4/20/2023		
Typed Name:	Dennis Corliss	Date:	
Signature of DAFS Procurement Official:	DocuSigned by: <i>Martha Verhille</i> 891CE7A1493D45B...		
Typed Name:	Martha Verhille	Date:	5/3/2023