



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 \$5,000 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:		DAFS/MaineIT/Print	
Department Contract Administrator or Grant Coordinator:		Kyle Pendleton	
(If applicable) Department Reference #:		N/A	
Amount: (Contract/Amendment/Grant)	\$ 16,500.00	Advantage RQS #:	BPO 18B 20240208-0933
CONTRACT	Proposed Start Date:		Proposed End Date:
AMENDMENT	Original Start Date:	<b>11/1/2024</b>	Effective Date:
	Previous End Date:	<b>4/19/2025</b>	New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Budget Business Machines Inc 251 Goddard Road, Lewiston ME 04241-2322	
Brief Description of Goods/Services/Grant:		Rental MFC Usage	

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.

Although the SOM has greatly reduced the number of multifunctional copiers rented through Budget, some are still being utilized. Since the rental agreements for these copiers have ended, the SOM is invoiced for monthly rental and usage of the remaining copiers for this vendor.

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

Multiple agreements have been established with Budget previously, including MA 18P 21010400\*0064, for rental of these multifunctional copiers.

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

MaineIT Copy Center uses various models, each with their own rates. This agreement is based on the estimated rental and usage over the terms of previous agreements which is an average cost of \$5,500 per month.

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

The intention is to reduce the number of Budget multifunctional copiers by the end of FY2025, with the goal of eventually replacing all of them with Ricoh copiers.

**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); CONTRACT WITH THE STATE**

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](#).

The requesting department signatory understands and acknowledges Maine’s Conflict of Interest statutes.

**PART VI: APPROVALS**

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	DocuSigned by: <i>Nicholas Marquis</i> A29C99359A37464...		
Typed Name:	Nicholas Marquis, Chief Information Officer	Date:	5/2/2025
Signature of DAFS Procurement Official:	DocuSigned by: <i>Joseph Zrioka</i> EA813178102243C...		
Typed Name:	Joseph Zrioka, Director of IT Procurement	Date:	5/1/2025