



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:	Secretary of State		
Department Contract Administrator or Grant Coordinator:	Joann Bautista, Deputy Secretary of State		
(If applicable) Department Reference #:	Invoice # 060322JB		
Amount: (Contract/Amendment/Grant)	\$5,500.00	Advantage CT / RQS #:	20220607000000001428
CONTRACT	Proposed Start Date:	6/7/2022	Proposed End Date: 6/30/2023
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:	Maine Development Foundation 2 Beech Street, Suite 203 Hallowell, ME 04347		
Brief Description of Goods/Services/Grant:	2022-23 Institute for Civic Leadership Program		

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.

The Institute for Civic Leadership (ICL) will provide services needed to enhance the professional development of the Deputy Secretary of State – Policy Advisor. The skills gained will allow for the expansion of efficient processes and bolster the Department of the Secretary of State's effectiveness when forming and implementing legislation and policies that impact all Mainers. Stronger leadership within the Department is necessary for the Department's success.

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

Maine Development Foundation is one of the state's preeminent non-partisan organizations that provides training and experiential learning opportunities to ensure decision makers of every type and from every sector have access to the training and resources they need to be effective catalysts and conveners in their businesses and communities. MDF works to drive sustainable economic growth and improve the lives of all Mainers through trusted research, leadership development and creative partnerships that connect businesses, policymakers, educators, community leaders and other non-profits.

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

ICL will begin in September 2022 and ends April 2023. The cost covers all materials distributed and course expenses incurred over the course of seven months.

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

If similar trainings are offered by other entities, the competitive bid process will be used.

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).

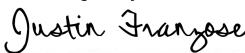
No – If No, proceed to Part V.

PART V: APPROVALS

The signatures below indicate approval of this procurement request.

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



Typed Name:	<i>Shenna Bellows</i>	Date:	<i>6/8/22</i>
Signature of DAFS Procurement Official:	<small>DocuSigned by:</small>  <small>AEED9C7B3A8044E...</small>		
Typed Name:	Justin Franzose	Date:	6/9/2022