



## 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:	Economic & Community Development			
Department Contract Administrator or Grant Coordinator:	Carolann Ouellette			
(If applicable) Department Reference #:	N/A			
Amount: (Contract/Amendment/Grant)	\$ 130,000.00	Advantage CT / RQS #:	CT19A20240606000000003578	
CONTRACT	Proposed Start Date:	<b>7/1/2024</b>	Proposed End Date:	6/30/2025
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 Outdoor Brands Portland, ME			
Brief Description of Goods/Services/Grant:	The Provider shall help drive the success of outdoor recreation industry businesses & organizations through networking, knowledge sharing, professional development and collaborative marketing efforts.			

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.

As identified by many across the various sectors that comprise the outdoor recreation economy, the following are high priority areas:

**Business Development:** Provide professional development, educational and networking opportunities to outdoor recreation businesses in Maine through at least 4 workshops and events. Represent and coordinate participation with outdoor recreation businesses at a minimum of two (2) national and/or international, business-to-business trade shows including, but not limited to Outdoor Retailer, to generate exposure for Maine product companies.

**PR/Communications:** Partner on the development of an annual Maine Outdoor Economy Summit. Assist with event planning including, but not limited to, content/theme; speaker selection; logistics; and stakeholder outreach to raise awareness of the importance of Maine’s outdoor recreation economy, particularly as it applies to the 10-year Economic Development strategy.

Assist with the creation of content to tell the story of the outdoor recreation industry by highlighting various private sector businesses and organizations showcasing their work in areas such as, but not limited to, innovation & craftsmanship, stewardship, education, access/skills building for underserved populations and economic development.

**Workforce Development:** A recent workforce project was clearly identified as a priority by business leaders in Maine’s outdoor industry. This project aligns directly with the 10-Year Economic Development Strategy in which 2 of the key strategies around workforce are Growing and Attracting Talent. It also aligns with the Maine Jobs and Recovery Plan and the recent Destination Management Plan.

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

Founded in 2017, Maine Outdoor Brands (MOB) is the only non-profit, member-led alliance of nearly 150 Maine-based outdoor product companies. With a unique understanding of Maine’s outdoor eco-system, MOB represents private sector interests, with the ability to help promote the Maine brand and the outdoors overall. MOB unites organizations across the state in demonstrating the value and importance of Maine’s growing outdoor recreation economy.

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

There are several ways to assess the cost:

1. Cost for just one of the Outdoor Retailer shows has increased to approximately \$60,000.
2. Workshops/educational forums average about \$750-1000 each which includes room rental, audio visual, speaker fess (not always charged), and communications to businesses and organizations.
3. Content development with video production and communication plan can range from \$15,000-\$60,000.
4. Planning assistance for the Outdoor Economy Summit is an average of 3 hours/week for 26 weeks.

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

**PART III: SUPPLEMENTAL INFORMATION**

Still to date, Maine Outdoor Brands truly is unique as an organization focused on the outdoor recreation economy in Maine. As the Outdoor Recreation industry continues to grow, this may change and a competitive bidding process would be put in place to secure an organization best suited to perform this scope of work.

**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: APPROVALS**

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):			
Typed Name:	Heather Johnson	Date:	6/5/2024
Signature of DAFS Procurement Official:	DocuSigned by:  41C2BA36FAF44CD...		
Typed Name:	Kathy Paquette	Date:	6/10/2024