



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 \$10,000 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:		DPS Gambling Control Unit		
Department Contract Administrator or Grant Coordinator:		Milton Champion, Executive Director		
(If applicable) Department Reference #:				
Agency Department Code:	16A	Advantage CT / RQS #:		
Amount: (Contract/Amendment/Grant)	\$30,000.00			
CONTRACT	Proposed/Original Start Date:	7/1/2026	Proposed/Most Recent End Date:	6/31/2028
AMENDMENT	New Effective Date:		New End Date (if Applicable):	
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Rebekah Smith Esq. Union ME		
Brief Description of Goods/Services/Grant:		Hearing Officer for Administrative Hearings before the Commissioner of Public Safety		

PART II: JUSTIFICATION FOR VENDOR SELECTION			
Check the box below for the justification(s) that applies to this request. (Check all that apply.)			
☐	A. Competitive Process	☐	G. Grant
☐	B. Amendment	☐	H. State Statute/Agency Directed
☒	C. Single Source/Unique Vendor	☐	I. Federal Agency Directed
☐	D. Proprietary/Copyright/Patents	☐	J. Willing and Qualified
☒	E. Emergency	☐	K. Client Choice
☐	F. Higher Education Cooperative Project	☐	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.

Ms. Smith will serve as a hearing officer for the Maine Gambling Control Unit before the Commissioner of Public Safety on an as needed basis for any adjudicatory hearing(s) held in relation to Charitable (Non-profit) Gaming activity. This is a sixth contract for Ms. Smith. The first five were in 2020, 2022, 2024, 2025 and 2026 before the Gambling Control Board.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number if applicable.

Ms. Smith is one of two options, and we have been using Ms. Smith for the last five hearings as recommended by fellow bureaus within DPS and was approved by the AG's office at the beginning in 2020. Statute requirement for a timely appeal makes this an emergency.

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

Funding is provided through the funds allocated by statute to cover expenses of the preceding. The AG's office approved of the rate in 2020 and there have been minimal increases since then that seem reasonable with all other expenses increasing over time.

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

We will, going forward, research to see if there are other hearing officers available and compare hourly rates along with their resume.

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) or (026) – 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's signatory affirms, understands, and acknowledges Maine's Conflict of Interest statutes and, in accordance with those statutes and to the best of their knowledge, has determined that no conflict of interest exists at the time of this contract, renewal, or amendment.

PART VI: APPROVALS

Governor/Department Commissioner or Designee

1. The signature below indicates approval of this procurement request.

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

Typed Name:

Michael Sauschuck

Date:

6/22/2026

2. Additional signature required **ONLY if box E (Emergency) is selected in PART II**. The signature below indicates approval by the Department's Commissioner, or the designee specifically authorized to approve emergency procurement requests.Signature of requesting
Department's Commissioner
(or designee):*Michael Sauschuck*

Typed Name:

Michael Sauschuck

Date:

6/22/2026

****OSPS Section Only****Signature of DAFS
Procurement Official:

DocuSigned by:

Michael McNeil

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Typed Name:

Michael McNeil

Date:

6/29/2026

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