



## 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:		Court Services	
Department Contract Administrator or Grant Coordinator:		Nickole Wesley, Communication Access Specialist	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$8,769.62	Advantage CT / RQS #:	20240605*1750
CONTRACT	Proposed Start Date:	04/22/2024	Proposed End Date: 04/30/2024
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:		Utah International Services, LLC.	
Brief Description of Goods/Services/Grant:		Arabic interpretation services	

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
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Please respond to ALL of the questions in the following sections.

PART III: SUPPLEMENTAL INFORMATION
<p>1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.</p> <p>The Maine Judicial Branch is required to provide interpreter services for individuals with limited English proficiency who are accessing the courts.</p>
<p>2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.</p> <p>This vendor is familiar with the Maine court system and previously worked as a team with other assigned Arabic interpreters.</p>
<p>3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.</p> <p>Click or tap here to enter text. The interpreter is very well-qualified and was able to complete multiple assignments during the week of April 22, 2024.</p>
<p>4. Describe the plan for future competition for the goods or services.</p> <p>The Communication Access Specialist will continue to research leads on other Arabic interpreters and also boost recruitment efforts for local Arabic interpreters.</p>

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)
<p>Does this request utilize ARPA/MJRP funds?</p>
<p><input type="checkbox"/> Yes – If Yes, please attach the approved Business Case(s).</p>
<p><input checked="" type="checkbox"/> No – If No, proceed to Part V.</p>

PART V: APPROVALS			
<p>The signatures below indicate approval of this procurement request.</p>			
<p>Signature of requesting Department's Commissioner (or designee):</p>	<p>DocuSigned by: <i>Connor Smith</i> <small>755F066F9C634D0...</small></p>	<p>6/6/2024</p>	
<p>Typed Name:</p>	<p>Connor Smith</p>	<p>Date:</p>	
<p>Signature of DAFS Procurement Official:</p>	<p>DocuSigned by: <i>Michael McNeil</i> <small>7008796FB36A449...</small></p>		

Typed Name:	Michael McNeil	Date:	7/30/2024
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NOI 0720240854