



## 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:	Maine Commission on Public Defense Services		
Department Contract Administrator or Grant Coordinator:	Darcy Fisher		
(If applicable) Department Reference #:			
Agency Department Code:	95F	Advantage CT / RQS # :	CT 95F 20250710*0036
Amount: (Contract/Amendment/Grant)	\$8,000		
CONTRACT	Proposed/Original Start Date:	<b>10/20/2025</b>	Proposed/Most Recent End Date: 10/23/2025
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:	Media Northeast, Hollis Center, Maine		
Brief Description of Goods/Services/Grant:	Vendor will provide audio and video recording of a training and provide edited video footage to Department.		

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. Higher Education 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.

Vendor will provide audio and video recording of a 4-day training for up to 8 hours each day. This will include recording by two cameras. Vendor will also professionally edit the video footage and provide a copy of the video to Department. The final product will feature the presenter and their visual presentation (such as a PowerPoint).

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

The Department has previously solicited bids from other vendors on numerous occasions and Media Northeast has consistently been the least expensive for these services. Department is familiar with the quality of Vendor's services based on prior dealings with the Vendor.

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

The Department has previously solicited bids from other vendors on numerous occasions and Media Northeast has consistently been the least expensive for these services.

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

If these services are needed in the future and exceed \$5,000, the Department will undertake a similar process.

### 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 VII: APPROVALS**


The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	 <small>Signed by: 7827810FEAB149F...</small>		
Typed Name:	Darcy Fisher, Deputy Director of Operations	Date:	7/10/2025

**PART VI: EMERGENCY – Required only if selecting E. Emergency Justification**

The signature below indicates approval of the Commissioner or designee approval procurement request.

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

Signature of DAFS Procurement Official:	 <small>Signed by: 4C537C52B586437...</small>		
Typed Name:	Sterling Doiron	Date:	7/15/2025

This procurement is under \$10,000 and qualifies under 5 MRS §1825-B, 2(G) for single source procurement. Media Northeast is the most economical, effective, and appropriate vendor based on their established familiarity with the the department training needs, consistent quality of service, and cost effectiveness compared to prior solicitations. Due to these factors, the department determined no alternative vendor could provide equivalent value within the required timeframe and budget.

## Certificate Of Completion

Envelope Id: 8D16995A-2AC7-4A42-8A54-EAB676878490

Status: Completed

Subject: Complete with Docusign: Signed PJF.pdf

Source Envelope:

Document Pages: 3

Signatures: 1

Envelope Originator:

Certificate Pages: 1

Initials: 0

Sterling Doiron

AutoNav: Disabled

77 State House Station

Envelopeld Stamping: Disabled

111 Sewall Street

Time Zone: (UTC-05:00) Eastern Time (US & Canada)

Augusta, ME 04333

Sterling.Doiron@maine.gov

IP Address: 198.182.163.121

## Record Tracking

Status: Original

Holder: Sterling Doiron

Location: DocuSign

07/15/2025 | 13:22

Sterling.Doiron@maine.gov

## Signer Events

Sterling Doiron

Sterling.Doiron@maine.gov

Security Level: Email, Account Authentication (None)

## Signature

Signed by:  
  
 Sterling Doiron  
 4C537C52B586437...

Signature Adoption: Pre-selected Style

Using IP Address: 198.182.163.121

## Timestamp

Sent: 07/15/2025 | 13:22

Viewed: 07/15/2025 | 13:22

Signed: 07/15/2025 | 13:26

Freeform Signing

## Electronic Record and Signature Disclosure:

Not Offered via Docusign

## In Person Signer Events

### Signature

### Timestamp

## Editor Delivery Events

### Status

### Timestamp

## Agent Delivery Events

### Status

### Timestamp

## Intermediary Delivery Events

### Status

### Timestamp

## Certified Delivery Events

### Status

### Timestamp

## Carbon Copy Events

### Status

### Timestamp

## Witness Events

### Signature

### Timestamp

## Notary Events

### Signature

### Timestamp

## Envelope Summary Events

### Status

### Timestamps

Envelope Sent

Hashed/Encrypted

07/15/2025 | 13:22

Certified Delivered

Security Checked

07/15/2025 | 13:22

Signing Complete

Security Checked

07/15/2025 | 13:26

Completed

Security Checked

07/15/2025 | 13:26

## Payment Events

### Status

### Timestamps