



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
DIVISION OF PROCUREMENT SERVICES
 STATE OF MAINE

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:		MJB/OIT		
Department Contract Administrator or Grant Coordinator:		David Plourde		
(If applicable) Department Reference #:				
Amount: (Contract/Amendment/Grant)		\$ 9,562.41	Advantage CT / RQS #:	20230808*0235
CONTRACT	Proposed Start Date:	3/13/23	Proposed End Date:	7/25/23
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:		Pitney Bowes Inc., PO box 981039, Boston MA 02298		
Brief Description of Goods/Services/Grant:		Postage machine service		

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.

They provide support for the court's postage machines

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

Pitney Bowes has won MAs in the past and has provided good service through the years.

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

PB has kept charges reasonable with the industry standard.

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

PB has applied for a new MA agreement with the state of maine.

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):

DocuSigned by:

Amy Quinlan

8/10/2023

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Typed Name:

Amy Quinlan

Date:

Signature of DAFS
Procurement Official:

DocuSigned by:

Kathy Paquette

41C2BA36FAF44CD...

Typed Name:

Kathy Paquette

Date:

8/15/2023