



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:	Department of Public Safety/Major Crimes		
Department Contract Administrator or Grant Coordinator:	Lt. Darrin Crane Sara Thompson		
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 7,600	Advantage CT / RQS #:	CT 16A 20220823*0576
CONTRACT	Proposed Start Date:	8/16/2022	Proposed End Date: 8/31/2023
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:	Friendly Footcare P.C. 50 West 94 th Place Crown Point, IN 46307		
Brief Description of Goods/Services/Grant:	Analysis and Review of Footprint		

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.

The Maine State Police Major Crimes Unit responds to complicated criminal events across the State of Maine in order to investigate, document, process, analyze and sometimes reconstruct complicated crime scenes. Crime scenes by their very nature are unpredictable, very complicated and uncontrolled environments. Our unit is currently investigating a complicated death investigation with socked foot ware impression evidence that our agency cannot hope to resolve without assistance from outside professional experts in the field of foot ware impression analysis.

Dr. Nirenberg DBA Friendly Footcare, has participated in research, publication and education in regard to the human foot. Dr. Nirenberg is a Board Certified podiatric physician and surgeon with over 30 years of experience in private practice.

He is also a forensic podiatrist and has assisted law enforcement, including the FBI, in the analysis of footprints, footwear and gait. His forensic efforts have helped convict criminals. Currently, he is President of the American Society of Forensic Podiatry.

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

The Maine State Police Major Crimes Unit has over the years worked with many vendors, specialists and experts who provide services and are able to render opinions as experts in the courtroom. Our expertise in the courtroom to present major cases causes us to scrutinize any outside expert to provide certain services and then to expound on those services for courtroom presentation. Finding a vendor to provide expertise for socked foot ware impressions can be a difficult endeavor. Finding a trusted vendor, to provide expertise and a reliable product is even more difficult. After review of Dr. Nirenberg's curriculum vitae and knowing he has survived a Daubert hearing, our primary detective is satisfied with his skills, his expertise, his reliability and his expectations. Dr. Nirenberg having endured a Daubert Hearing successfully has allowed us to have the confidence of knowing that he can help us resolve the lingering questions and problems in our current case. Providing quality, reliable, trustworthy and confident expert services from a trusted vendor for forensic testimony in a courtroom related to a death investigation is our ultimate goal. Instead of requesting this service from the lowest bidder our unit is more interested in the reliability and trustworthiness of a reputable vendor above consideration for cost.

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

Dr. Nirenberg DBA Friendly Footcare is the sole examiner in the United States that has survived a Daubert hearing regarding the type of analysis we require. Therefore, he is the only person suitable for the job.

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

PART III: SUPPLEMENTAL INFORMATION

Depending on the questions in this particular case which they are able to answer or provide insight and depending on the success or failure of performance and the potential need for additional services of this kind, competition for consultation or services may be warranted or even necessary.

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):	<i>Derek A Gorneau</i>		
Typed Name:	Derek A. Gorneau	Date:	Sep 8, 2022
Signature of DAFS Procurement Official:	<i>Kathy Paquette</i>		
Typed Name:	Kathy Paquette	Date:	9/12/2022






PJF Friendly Footcare AG 8.30.22

Final Audit Report

2022-09-08

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