

State of Maine Procurement Justification Form

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 website (Forms page) for additional instructions.

PART I: OVERVIEW

Department Office/Division/Program:		DOE-Educ In The Unorg Territories			
Department Contract Administrator or Grant Coordinator:		Cathy Severance			
(If applicable) Department Reference #:					
Amount: (Contract/Amendment/Grant)	\$5,200.00	Advantage CT / RQS #:	05C20220819*539		
CONTRACT	Proposed Start Date:	09/01/22	Proposed End Date:	08/31/23	
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:		Beverly Bubar 88 Sweet Rd, Lincoln, ME 04457 VC#0000117313			
Brief Description of Goods/Services/Grant:		AY22-23 School Nursing Services for EUT-KES students			

PART II: JUSTIFICATION FOR VENDOR SELECTION

Mark an "X" before the justification(s) that applies to this request. (Check all that apply.)

		G. Grant
A. Competitive Process		H. State Statute/Agency Directed
B. Amendment		I. Federal Agency Directed
C. Single Source/Unique Vendor		J. Willing and Qualified
D. Proprietary/Copyright/Patents	X	K. Client Choice
E. Emergency		L. Other Authorization
F. University Cooperative Project		

PART III: SUPPLEMENTAL INFORMATION

Please respond to ALL of the following:

- 1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.**

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PART III: SUPPLEMENTAL INFORMATION

Student's residing in the unorganized territories will be provided school nursing services as identified for each school. The EUT does not have certified licensed school nurses on staff to provide the required services. The EUT reaches out to and is **willing to contract with any willing and qualified, certified licensed provider to perform the necessary services.**

2. Provide a brief justification for the selected vendor to supplement the response in Part II.

The EUT does not have certified licensed school nurses on staff to provide the required services. The EUT reaches out to and is **willing to contract with any willing and qualified, certified licensed provider to perform the necessary services. This is for the required servicing for EUT students for AY22-23.**


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

Beverly Bubar is fully licensed and able to provide the necessary services as needed and upon request. In addition, the fees charged by Beverly Bubar are consistent with other service providers who were willing in the past to provide these services. The cost of travel for Beverly Bubar is less costly because of her location in nearby Lincoln and the distance to the school that is being served.

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

The EUT began the State of Maine process of submitting an RFP in order to advertise/request services from providers. During the RFP review process, it was determined that due of the nature of the rural areas requiring services, limited responses to past competitive bids for these services in these areas and the fact that the UT was willing to accept any willing, certified licensed provider, a competitive process was not required at this time. The UT continually inquires, coordinates and collaborates with local area school districts and professionals in order to gain information in order to acquire willing providers who are qualified and/or already providing services in other nearby local districts.

PART IV: APPROVALS

Signature of requesting Department's Commissioner (or designee):	<i>By signing below, I signify that I approve of this procurement request.</i>		
			
Printed Name:	Daniel A. Chuhta	Date:	9/13/2022
Signature of DAFS Procurement Official:			
Printed Name:		Date:	


Certificate Of Completion

Envelope Id: 70385AAB47444E658570EA8C575B4B28	Status: Completed
Subject: Please DocuSign This Document	
Source Envelope:	
Document Pages: 2	Signatures: 1
Certificate Pages: 1	Initials: 0
AutoNav: Enabled	Envelope Originator: Daniel A. Chuhta Daniel.Chuhta@maine.gov
Envelopeld Stamping: Disabled	IP Address: 64.207.219.7
Time Zone: (UTC-05:00) Eastern Time (US & Canada)	

Record Tracking

Status: Original 9/13/2022 10:31:55 AM	Holder: Daniel A. Chuhta Daniel.Chuhta@maine.gov	Location: DocuSign
Security Appliance Status: Connected	Pool: StateLocal	
Storage Appliance Status: Connected	Pool: Maine Department of Education	Location: DocuSign

Signer Events

Signature	Timestamp
Daniel A. Chuhta Daniel.Chuhta@maine.gov Deputy Commissioner Maine Department of Education Security Level: Email, Account Authentication (None)	Sent: 9/13/2022 10:31:56 AM Viewed: 9/13/2022 10:32:08 AM Signed: 9/13/2022 10:32:27 AM Freeform Signing
	
Signature Adoption: Uploaded Signature Image Using IP Address: 72.231.250.95	

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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	9/13/2022 10:31:57 AM
Certified Delivered	Security Checked	9/13/2022 10:32:08 AM
Signing Complete	Security Checked	9/13/2022 10:32:27 AM
Completed	Security Checked	9/13/2022 10:32:27 AM

Payment Events**Status****Timestamps**