



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
 OFFICE OF STATE 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 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:		Secretary of State, Maine State Archives	
Department Contract Administrator or Grant Coordinator:		Tammy Marks, Director	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 10,334	Advantage CT / RQS #:	20240905000000000358
CONTRACT	Proposed Start Date:	10/15/2024	Proposed End Date: 10/14/2025
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:		The Crowley Company 5111 Pegasus Ct, Suite M Frederick, MD 21704	
Brief Description of Goods/Services/Grant:		Software maintenance and support	

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.

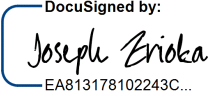
PART III: SUPPLEMENTAL INFORMATION	
1.	Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.
Regular updates to the current software and hardware are needed to continue the process of scanning State of Maine documents and historical materials to be archived, along with the preventative maintenance of both software and hardware.	
2.	Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.
The Crowley Company is currently the vendor being used for the maintenance of the microfilm scanner software and equipment. This purchase was awarded by bid on RFQ# 29C 16050300000000000751.	
3.	Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.
The Maine State Archives requested a quote from The Crowley Company. The cost of the software/hardware upgrade and maintenance costs are fair and reasonable.	
4.	Describe the plan for future competition for the goods or services.
Maine State Archives will use the competitive bid process when the software being used is no longer viable and needs to be replaced.	

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)	
Does this request utilize ARPA/MJRP funds?	
<input type="checkbox"/> Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).	
<input type="checkbox"/> Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.	
<input checked="" type="checkbox"/> No – If No, proceed to Part V.	

PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE	
<i>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.</i>	
<input checked="" type="checkbox"/> The requesting department signatory understands and acknowledges Maine’s Conflict of Interest statutes.	

PART VI: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	<i>Tammy Marks</i>		
Typed Name:	Tammy Marks, Director	Date:	9/5/2024
Signature of DAFS Procurement Official:			
Typed Name:	Joseph Zrioka Director of IT Procurement	Date:	9/11/2024