



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:		Education/Maine School Safety Center/Restorative Prac.	
Department Contract Administrator or Grant Coordinator:		Stacey Barlow	
(If applicable) Department Reference #:		n/a	
Amount: (Contract/Amendment/Grant)	\$ 8,978.60	Advantage CT / RQS #:	CT 05A 20240821*0399
<b>CONTRACT</b>	Proposed Start Date:	<b>9/10/2024</b>	Proposed End Date: 9/13/2024
<b>AMENDMENT</b>	Original Start Date:		Effective Date:
	Previous End Date:		New End Date:
<b>GRANT</b>	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Witham Family Hotels :Atlantic Oceanview Hotel & Event Center Ellsworth, ME	
Brief Description of Goods/Services/Grant:		Restorative Practices Coaching retreat	

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.

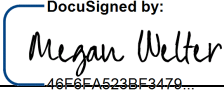
<b>PART III: SUPPLEMENTAL INFORMATION</b>	
1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.	The Department is holding a Restorative Practices Coaching retreat in September. For this event, the Department needs a facility that can accommodate the intensive training, had the lodging and space on the available on the dates the Department need, and met the geographical needs.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	This facility met all the needs of the Department, had availability, and was able to provide rates within per diem. This location was chosen because half of the coaches live in Washington, Hancock and Aroostook counties. Choosing this location means less paid for travel reimbursement and not making coaches drive six hours to a training. This location is more central for everyone. There is not an armory available in area chosen as the destination for the retreat.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	All costs were calculated based on allowed government per diem rates at which the facility is familiar with the State of Maine and its requirements. The bulk of the cost is for lodging. Billing will be done once the event is over.
4. Describe the plan for future competition for the goods or services.	There currently is no plan to have another retreat soon.

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

<b>PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE</b>	
<i>Maine law contains Conflict of Interest statutes directed to State Departments, State Officers, and Employees Generally under MRS <a href="#">Title 5, §18</a> and <a href="#">§18-A</a>, in harmony with MRS <a href="#">Title 17, §3104</a>.</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):	 <small>46F6FA523BF3479...</small>		
Typed Name:	Megan Welter, Associate Commissioner	Date:	9/10/2024
Signature of DAFS Procurement Official:			
Typed Name:		Date:	

**Certificate Of Completion**

Envelope Id: 08110461C9FE41FA8F8271DBC2B23590	Status: Completed
Subject: Please DocuSign: PJF for Atlantic Oceanview RP Retreat	
Source Envelope:	
Document Pages: 3	Signatures: 1
Certificate Pages: 4	Initials: 0
AutoNav: Enabled	Envelope Originator:
Envelopeld Stamping: Enabled	Staci Warren
Time Zone: (UTC-05:00) Eastern Time (US & Canada)	Staci.H.Warren@maine.gov
	IP Address: 64.207.219.137

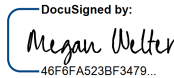
**Record Tracking**

Status: Original	Holder: Staci Warren	Location: DocuSign
9/10/2024 8:19:50 AM	Staci.H.Warren@maine.gov	
Security Appliance Status: Connected	Pool: StateLocal	
Storage Appliance Status: Connected	Pool: Maine Department of Education	Location: DocuSign

**Signer Events**

Megan Welter  
Megan.Welter@maine.gov  
Associate Commissioner of Public Education  
Security Level: Email, Account Authentication (None)

**Signature**

DocuSigned by:  
  
48F6FA523BF3479...  
Signature Adoption: Pre-selected Style  
Using IP Address: 98.2.196.75

**Timestamp**

Sent: 9/10/2024 8:20:52 AM  
Viewed: 9/10/2024 5:07:52 PM  
Signed: 9/10/2024 5:12:40 PM

**Electronic Record and Signature Disclosure:**  
Accepted: 2/22/2022 8:43:12 AM  
ID: a3f5e052-e68a-4555-b08f-3ab2586f161c

**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	9/10/2024 8:20:53 AM
Certified Delivered	Security Checked	9/10/2024 5:07:52 PM
Signing Complete	Security Checked	9/10/2024 5:12:40 PM
Completed	Security Checked	9/10/2024 5:12:40 PM

**Payment Events**

**Status**

**Timestamps**

**Electronic Record and Signature Disclosure**

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If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

### **Consequences of changing your mind**

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

### **All notices and disclosures will be sent to you electronically**

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

### **How to contact Carahsoft OBO Maine Department of Education:**

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: [jennifer.l.tarr@maine.gov](mailto:jennifer.l.tarr@maine.gov)

### **To advise Carahsoft OBO Maine Department of Education of your new email address**

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at [jennifer.l.tarr@maine.gov](mailto:jennifer.l.tarr@maine.gov) and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

If you created a DocuSign account, you may update it with your new email address through your account preferences.

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To inform us that you no longer wish to receive future notices and disclosures in electronic format you may:

- i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;
- ii. send us an email to [jennifer.l.tarr@maine.gov](mailto:jennifer.l.tarr@maine.gov) and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

### **Required hardware and software**

The minimum system requirements for using the DocuSign system may change over time. The current system requirements are found here: <https://support.docusign.com/guides/signer-guide-signing-system-requirements>.

### **Acknowledging your access and consent to receive and sign documents electronically**

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to ‘I agree to use electronic records and signatures’ before clicking ‘CONTINUE’ within the DocuSign system.

By selecting the check-box next to ‘I agree to use electronic records and signatures’, you confirm that:

- You can access and read this Electronic Record and Signature Disclosure; and
- You can print on paper this Electronic Record and Signature Disclosure, or save or send this Electronic Record and Disclosure to a location where you can print it, for future reference and access; and
- Until or unless you notify Carahsoft OBO Maine Department of Education as described above, you consent to receive exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you by Carahsoft OBO Maine Department of Education during the course of your relationship with Carahsoft OBO Maine Department of Education.