



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 \$10,000 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:		DACF/APH/Animal Health Program		
Department Contract Administrator or Grant Coordinator:		Megan Patterson		
(If applicable) Department Reference #:				
Agency Department Code:	01A	Advantage CT / RQS #:	CT 20260311*1891	
Amount: (Contract/Amendment/Grant)		\$23,980.00		
CONTRACT	Proposed/Original Start Date:	3/16/2026	Proposed/Most Recent End Date:	9/16/2026
AMENDMENT	New Effective Date:	9/14/2026	New End Date (if Applicable):	01/16/2027
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		MIM Veterinary Consulting		
Brief Description of Goods/Services/Grant:		The Provider shall perform all services and maintain all standards and requirements for services provided under this Contract in accordance with the below: shall provide an updated and complete general emergency response plan, shall provide an updated and complete HPAI poultry emergency response plan, shall train staff on both aforementioned documents, shall enter data into the EMRS portal and train staff on portal use, and shall assess the program and determine how to best assist poultry producers, and will perform other OneHealth work as necessary and appropriate.		

PART II: JUSTIFICATION FOR VENDOR SELECTION

Check the box below for the justification(s) that applies to this request. (Check all that apply.)

☐	A. Competitive Process	☐	G. Grant
--------------------------	------------------------	--------------------------	----------

☒	B. Amendment	☐	H. State Statute/Agency Directed
☒	C. Single Source/Unique Vendor	☐	I. Federal Agency Directed
☐	D. Proprietary/Copyright/Patents	☐	J. Willing and Qualified
☐	E. Emergency	☐	K. Client Choice
☐	F. Higher Education Cooperative Project	☐	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 Animal Health Program is continuing to struggle with veterinary vacancies. While we work toward filling the anticipated (as of 9/12/2026) vacancy and as new staff train in their new roles, the program needs additional support from individuals with expertise in Maine-specific, state-level animal health regulatory programs. Few people in Maine possess this expertise, even fewer possess the capacity to walk into these roles and work productively without oversight, and fewer still are willing to work for the State of Maine. This contract will provide staff support with key program areas that would otherwise remain unaddressed. Specifically, this vendor will provide an updated and complete general emergency response plan, will provide an updated and complete HPAI poultry emergency response plan, will train staff on both aforementioned documents, and will train staff on EMRS portal use.	
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number if applicable.	
This vendor has expertise in Maine state and federal animal health regulations and their application. As the former incident commander for the Animal Health Program and the Bureau of Agriculture, Food and Rural Resources, this vendor has expertise in emergency response and developed the current, but outdated, emergency response plan. This vendor has worked extensively with poultry in Maine, and at a time when the poultry industry was much more robust. The vendor is familiar with and has used the EMRS portal. This amendment continues the existing relationship due to renewed and anticipated veterinary staffing vacancies and the need for a provider who can immediately perform this specialized work with minimal State oversight. The provider's unique qualifications supporting the original Single Source determination remain applicable to the amended scope and period.	
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	
According to Ziprecruiter.com, the average hourly rate for experienced, self-employed veterinarians in Maine ranges from \$100 to over \$130 per hour (\$211,100 to \$264,800 annually). The selected provider in this case is even more valuable as a former State Veterinarian with significant, directly relevant experience. The provider will be paid \$100.00 per hour. The hourly rate remains unchanged from the original approved contract at \$100.00 per hour.	
4. Describe the plan for future competition for the goods or services.	
This amendment is intended as a temporary continuation of the existing Single Source contract through January 16, 2027 while the Department addresses current vacancies and extended staff leave. If the Department determines that these services will be required beyond January 16, 2027, it will consult with OSPS and initiate an appropriate competitive procurement sufficiently in advance of the contract expiration date.	

PART III: SUPPLEMENTAL INFORMATION**PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)**

Does this request utilize ARPA/MJRP funds?

☐ Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).☐ Yes, ARPA funds (025) or (026) – If Yes, please be aware of the requirements from awarding federal agencies.☒ No – If No, proceed to Part V.**PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE***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](#).*☒ The requesting department's signatory affirms, understands, and acknowledges Maine's Conflict of Interest statutes and, in accordance with those statutes and to the best of their knowledge, has determined that no conflict of interest exists at the time of this contract, renewal, or amendment.**PART VI: APPROVALS**

Governor/Department Commissioner or Designee

1. The signature below indicates approval of this procurement request.

Signature of requesting
Department's Commissioner
(or designee):DocuSigned by:

9BB4B81276874FC...

Typed Name:

Nancy McBrady

Date:

9/17/2026

2. Additional signature required **ONLY if box E (Emergency) is selected in PART II**. The signature below indicates approval by the Department's Commissioner, or the designee specifically authorized to approve emergency procurement requests.Signature of requesting
Department's Commissioner
(or designee):

Typed Name:

Date:

****OSPS Section Only****Signature of DAFS
Procurement Official:Signed by:

4C537C52B586437...

Typed Name:

Sterling Doiron

Date:

9/24/2026

Certificate Of Completion

Envelope Id: BB7D7724-0C53-8B7A-834D-B3E6313D2847

Status: Completed

Subject: Complete with Docusign: NEW Procurement_Justification_Form_MIM_final.pdf

Source Envelope:

Document Pages: 4

Signatures: 1

Envelope Originator:

Certificate Pages: 1

Initials: 0

Sterling Doiron

AutoNav: Disabled

77 State House Station

Envelopeld Stamping: Disabled

111 Sewall Street

Time Zone: (UTC-05:00) Eastern Time (US & Canada)

Augusta, ME 04333

Sterling.Doiron@maine.gov

IP Address: 71.169.188.88

Record Tracking

Status: Original

Holder: Sterling Doiron

Location: DocuSign

9/24/2026 8:59:37 AM

Sterling.Doiron@maine.gov

Signer Events

Sterling Doiron

Sterling.Doiron@maine.gov

Sterling Doiron

Security Level: Email, Account Authentication
(None)

Signature

Signed by:

Sterling Doiron

4C537C52B586437...

Signature Adoption: Pre-selected Style

Using IP Address: 71.169.188.88

Timestamp

Sent: 9/24/2026 8:59:44 AM

Viewed: 9/24/2026 8:59:51 AM

Signed: 9/24/2026 9:01:08 AM

Freeform Signing

Electronic Record and Signature Disclosure:

Not Offered via Docusign

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

9/24/2026 8:59:44 AM

Certified Delivered

Security Checked

9/24/2026 8:59:51 AM

Signing Complete

Security Checked

9/24/2026 9:01:08 AM

Completed

Security Checked

9/24/2026 9:01:08 AM

Payment Events

Status

Timestamps