



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES  
**DIVISION OF 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 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:                     |                      | Maine Judicial Branch               |                              |
| Department Contract Administrator or Grant Coordinator: |                      | David Plourde                       |                              |
| (If applicable) Department Reference #:                 |                      |                                     |                              |
| Amount:<br>(Contract/Amendment/Grant)                   | \$ 11,434.23         | Advantage CT / RQS #:               | 20240821*0239                |
| CONTRACT  | Proposed Start Date: | 7/9/2024                            | Proposed End Date: 7/15/2024 |
| 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:              |                      | Pro AV Systems, Chelmsford, MA      |                              |
| Brief Description of Goods/Services/Grant:              |                      | Audio Visual Equipment/Installation |                              |

| 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.


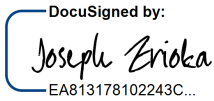
| <b>PART III: SUPPLEMENTAL INFORMATION</b>   |  |
|---|--|
| 1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.            |  |
| The touch panel for the AV system within a room in the Capital Judicial Center was upgraded to match the audio visual system within the room. |  |
| 2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.      |  |
| Pro AV was selected to create a level of consistency between the touch pad system and the AV system operating within the courtroom.           |  |
| 3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.                            |  |
| Rates are in line with market expectations for similar equipment. Installation was given at rates matching State MA.                          |  |
| 4. Describe the plan for future competition for the goods or services.  |  |
| The MJB will utilize the three quote system through the existing MAs for audio visual technology.   |  |

| <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 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.   |  |

| <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<br>Department's Commissioner<br>(or designee): |  |       |           |
| Typed Name:  | Connor Smith  | Date: | 8/21/2024 |
| Signature of DAFS<br>Procurement Official:                             |  |       |           |
| Typed Name:  | Joseph Zrioka, IT Procurement Director  | Date: | 9/30/2024 |

The mini-bid process should have been used for this procurement or an emergency PJF submitted. The invoices do not reflect the hourly rates agreed to in the master agreement. The dates on the PJF and the invoices suggest work was done in advance.