



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:		Ted Ross	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 450,000.00	Advantage CT / RQS #:	20240909*0509
CONTRACT	Proposed Start Date:	10/1/2024	Proposed End Date: 12/31/2025
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:		Somerset County Sheriff Department, Somerset, ME	
Brief Description of Goods/Services/Grant:		Court Security Services	

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.

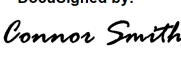
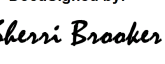
PART III: SUPPLEMENTAL INFORMATION	
1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.	The Judicial branch provides security through the Office of Judicial Marshals. Historically the Sheriff Office(s) for those counties provided security and through time that service has been transferred to the Judicial Marshals except for 2 counties (Lincoln and Somerset). The Judicial Branch has chosen to continue those relationships but once those relationships end, those services will be moved under the Office of Judicial Marshals.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	This service is only provided by Governmental Law enforcement agencies. The Sheriff Office (somerset) is the law enforcement agency for this county.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	Rates were negotiated in relation to the Legislative acceptance of parity for Sherriff staff fulfilling the role of Marshalls within Court Houses.
4. Describe the plan for future competition for the goods or services.	The duties will continue be provided by Governmental Law Enforcement Agencies, or the Marshall's office upon budget approval from the Legislature.

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):	DocuSigned by:  <small>755E066E9C634D0</small>			10/1/2024
Typed Name:	Connor Smith	Date:	10/1/2024	
Signature of DAFS Procurement Official:	DocuSigned by:  <small>BE7E88805EFD419...</small>			
Typed Name:	sherri brooker	Date:	10/2/2024	