

State of Maine Procurement Justification Form

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 website (Forms page) for additional instructions.

PART I: OVERVIEW

| | | | | | |
|---|----------------------|--|--------------------|---------|--|
| Department Office/Division/Program: | | AOC | | | |
| Department Contract Administrator or Grant Coordinator: | | Gwen DeCicco | | | |
| (If applicable) Department Reference #: | | n/a | | | |
| Amount: (Contract/Amendment/Grant) | \$ 6733.09 | Advantage CT / RQS #: | rqs 20201103*495 | | |
| CONTRACT | Proposed Start Date: | 11/2/2020 | Proposed End Date: | 6/15/21 | |
| 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: | | Zoom Video Communications Inc., 55 Almaden Blvd, 6 th flr, San Jose, CA | | | |
| Brief Description of Goods/Services/Grant: | | Video Conferencing endpoint connectors | | | |

PART II: JUSTIFICATION FOR VENDOR SELECTION

Mark an "X" before the justification(s) that applies to this request. (Check all that apply.)

| | | | |
|----------|-----------------------------------|--|----------------------------------|
| | A. Competitive Process | | G. Grant |
| | B. Amendment | | H. State Statute/Agency Directed |
| X | C. Single Source/Unique Vendor | | I. Federal Agency Directed |
| | D. Proprietary/Copyright/Patents | | J. Willing and Qualified |
| X | E. Emergency | | K. Client Choice |
| | F. University Cooperative Project | | L. Other Authorization |

PART III: SUPPLEMENTAL INFORMATION

Please respond to ALL of the following:

1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.

This software is used to for the virtual courtroom use (COVID19) – CRF OCT20

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PART III: SUPPLEMENTAL INFORMATION

2. Provide a brief justification for the selected vendor to supplement the response in Part II.

Zoom is the sole source for this support. Other vendors do not have the breakout room experience or other features needed for court. We need these connectors to connect our Polycoms reliably to the Zoom / Pexip cloud.

3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.

The pricing is comparable to other vendors for similar products.

4. Describe the plan for future competition for the goods or services.

The MJB will consider other vendors once they mature to the feature set that Zoom provides.

PART IV: APPROVALS

| | | | |
|---|--|--------------|-----------|
| Signature of requesting Department's Commissioner (or designee): | <i>By signing below, I signify that I approve of this procurement request.</i> | | |
| | <small>DocuSigned by:</small> <i>DAVID PLOURDE</i> | | |
| | <small>58CA43FD8C63479...</small> | | |
| Printed Name: | DAVID PLOURDE | Date: | 11/3/2020 |
| Signature of DAFS Procurement Official: | <small>DocuSigned by:</small> <i>Justin Franzose</i> | | |
| | <small>AEED9C7B3A8044E...</small> Justin Franzose | | |
| Printed Name: | Justin Franzose | Date: | 11/4/2020 |