



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:		Secretary of State, Information Services	
Department Contract Administrator or Grant Coordinator:		Chris Johnson, Deputy Secretary of State	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 8121.00	Advantage CT / RQS #:	20221109000000000656
CONTRACT	Proposed Start Date:	11/16/2022	Proposed End Date: 11/15/2025
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:		Dynamsoft Corp # 668 1771 Robson Street Vancouver, BC V6G 1C9 Canada	
Brief Description of Goods/Services/Grant:		Maintenance renewal- Dynamic Web TWAIN All Browsers for Windows	

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.

Since the State of Maine is required to meet Real ID requirements for driver licenses it needs to purchase software that meets Real ID requirements. The Office of Information Services searched for vendors that could provide the unique software to satisfy Real ID requirements. Two vendors were able to meet the software requirements for which cost estimates were requested, assessed, and a prototype tested, leading to the selection of Dynamsoft. The initial purchase included several years of maintenance. This purchase would renew the maintenance for the software which is currently in use and interfaced with our application software.

[Click or tap here to enter text.](#)

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.

This vendor is currently being used for this maintenance service. BPO 2018111400000000464

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

Maintenance quotes were requested from the vendor for different numbers of years. Rates were deemed reasonable, being lower than our anticipated costs for renewal of the maintenance.

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

As long as this solution continues to meet our needs, it would be disruptive to the application users and add labor costs to reconfigure and alter our software to work with a different product. Continuing our use of the current solution requires that we renew maintenance, which avoids the risks of unmaintained software and lack of vendor support. Maintenance obligates the vendor to resolve product issues and keep it current as other software/hardware is updated over time.

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

Does this request utilize ARPA/MJRP funds?

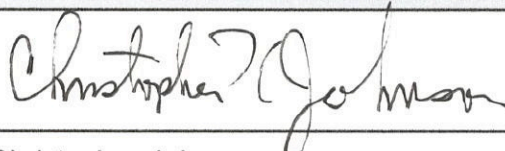
Yes – If Yes, please attach the approved Business Case(s).

No – If No, proceed to Part V.

PART V: APPROVALS

The signatures below indicate approval of this procurement request.

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



Typed Name: Christopher Johnson

Date:

11/9/22

Signature of DAFS Procurement Official:	DocuSigned by: <i>Joseph Zrioka</i> EA813178102243C	
Typed Name:	Joseph Zrioka	Date: 11/14/2022