



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 Telecommunications Relay Service Council	
Department Contract Administrator or Grant Coordinator:		Terry Morrell, Chair/Treasurer	
(If applicable) Department Reference #:			
Amount: (Contract/Amendment/Grant)	\$ 94,800	Advantage CT / RQS #:	CT-95T-2019073*0377
CONTRACT	Proposed Start Date:		Proposed End Date:
AMENDMENT	Original Start Date:	8/1/2019	Effective Date:
	Previous End Date:	6/30/2024	New End Date:
GRANT	Project Start Date:		Grant Start Date:
	Project End Date:		Grant End Date:
Vendor/Provider/Grantee Name, City, State:		Disability Rights Maine	
Brief Description of Goods/Services/Grant:		Provide Outreach and Administrative 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 checked="" type="checkbox"/>	B. Amendment	<input type="checkbox"/>	H. State Statute/Agency Directed
<input 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.

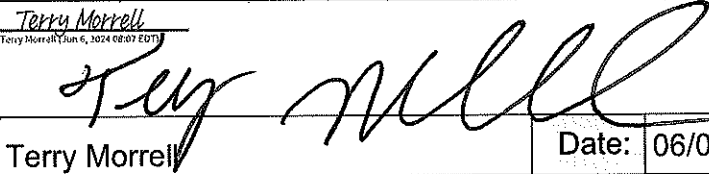

PART III: SUPPLEMENTAL INFORMATION	
1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.	To provide administrative and outreach services on behalf of the Maine Telecommunications Relay Services Council. Administrative services included but not limited to prepare for quarterly board meetings, liaison between Council Treasurer and DAFS service center relating to invoices and budgets, etc. Outreach services are to increase awareness and usage of TRS and Cap Tel/CTS in Maine.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	RFP 201901008
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	The cost is consistent with cost proposal form for outreach services and budget narrative provided with the bid (\$7,250/month), and reasonable agreed upon rate of \$650/month for administrative services.
4. Describe the plan for future competition for the goods or services.	An RFP will be developed in FY25.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)	
Does this request utilize ARPAMJRP 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):			
Typed Name:	Terry Morrell	Date:	06/06/2024
Signature of DAFS Procurement Official:			
Typed Name:	William J.E. Allen	Date:	11/7/2024

NOI 1120241303 11/7/2024 - 11/13/2024







PJF METRS FY2025

Final Audit Report

2024-06-06

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By:	Ryan Roberts (ryan.roberts@maine.gov)
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"PJF METRS FY2025" History

-  Document created by Ryan Roberts (ryan.roberts@maine.gov)
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-  Document emailed to terry.l.morrell@maine.gov for signature
2024-06-06 - 12:06:39 PM GMT
-  Email viewed by terry.l.morrell@maine.gov
2024-06-06 - 12:07:10 PM GMT
-  Signer terry.l.morrell@maine.gov entered name at signing as Terry Morrell
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-  Document e-signed by Terry Morrell (terry.l.morrell@maine.gov)
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