



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
OFFICE OF STATE PROCUREMENT SERVICES
 STATE OF MAINE

PROCUREMENT JUSTIFICATION FORM (PJF)

This form must accompany all contract requests and sole source requisitions (RQS) over \$10,000 submitted to the Office of State 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 Procurement Services intranet site (Forms page) for additional instructions.

PART I: OVERVIEW			
Department Office/Division/Program:		Maine Department of Labor, Bureau of Labor Standards	
Department Contract Administrator or Grant Coordinator:		John.L.Rioux@maine.gov	
(If applicable) Department Reference #:			
Agency Department Code:	12-170	Advantage CT / RQS #:	CT12A20250724*0112
Amount: (Contract/Amendment/Grant)		\$26,634.29	
CONTRACT	Proposed/Original Start Date:	Proposed/Most Recent End Date:	
AMENDMENT	New Effective Date:	New End Date (if Applicable):	
GRANT	Project Start Date:	Grant Start Date:	
	Project End Date:	Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Granicus LLC, 408 Saint Peter St, Suite 600, St Paul, MN 55102	
Brief Description of Goods/Services/Grant:		BLS AMANDA SaaS Case Management System	

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 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. Higher Education 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.	AMANDA is a Software as a Service (SaaS) modular case management system with prebuilt screens and programming common to government transactions and operations. The Bureau has been using the product for 8 years and have found it to be helpful tracking, processing and reporting on transactions and cases including everything from public class registrations to complicated inspections. The product is already under contract with 2-year extensions until 2031. This amendment will add licensing for programming that will enable inspectors to process inspections in the field when unable to be online. Data collected off-line will synchronize once connected. This will reduce rework reentering data into the case management system from field notes
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the solicitation (RFP/RFA/RFQ) number if applicable.	RFP# 202302016 process last selected this product as it has prebuilt screens and programming accommodating the breadth of the transactions we track and need to report on in one product.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	The base product has already been configured for our use and includes many modules and prebuilt screens and programming to build on. This amendment makes use of one of those prebuilt features and extends the use of the current product in the field without rebuilding it. The next cheapest RFP cost to build a custom product approached a million dollars. This extends field inspection functionality for a fraction of that cost using and building onto existing configurations.
4. Describe the plan for future competition for the goods or services.	The Department will issue a new RFP that includes these offline capabilities when the renewal periods approved under RFP# 202302016 have been completed.

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	
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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](#).


The requesting department's signatory affirms, understands, and acknowledges Maine's Conflict of Interest statutes and, in accordance with those statutes and to the best of their knowledge, has determined that no conflict of interest exists at the time of this contract, renewal, or amendment.

PART VI: APPROVALS

Governor/Department Commissioner or Designee

1. The signature below indicates approval of this procurement request.

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

DocuSigned by:

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Typed Name:

Kimberly A. Smith, Deputy Commissioner

Date:

11/17/2025

2. Additional signature required **ONLY if box E (Emergency) is selected in PART II**. The signature below indicates approval by the Department's Commissioner, or the designee specifically authorized to approve emergency procurement requests.

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

Typed Name:

Date:

****OSPS Section Only****

Signature of DAFS Procurement Official:

Signed by:

AE2C1DD1C5434E9...

Typed Name:

Katie Boynton, Systems Analyst

Date:

11/18/2025