

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:	Maine EMS			
Department Contract Administrator or Grant Coordinator:	Jonathan Sam Hurley			
(If applicable) Department Reference #:				
Amount: (Contract/Amendment/Grant)	\$ 0	Advantage CT / RQS #:	MA 18P 111212*142	
CONTRACT	Proposed Start Date:	01/01/2021	Proposed End Date:	12/31/2021
AMENDMENT	Original Start Date:		Effective Date:	
	Previous End Date:	12/31/2020	New End Date:	12/31/2021
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:	LifeSavers INC 39 Plymouth Street Fairfield, NJ 07004 VC1000054153			
Brief Description of Goods/Services/Grant:	AED Purchasing agreement at discounted cost			

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
X	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
	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.

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PART III: SUPPLEMENTAL INFORMATION

Automated External Defibrillators (AEDs) are critical in the situation of an out-of-hospital cardiac arrest. Early chest compressions and defibrillation are readily associated with increased survivability of these types of events and so access to quality AEDs throughout the state is vital for promoting survival rates. This agreement will allow municipalities, political subdivisions and schools the ability to acquire AEDs for a discounted price.

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

There are a limited number of vendors for AED products. Additionally, the State of Maine, municipalities, political subdivisions, and schools have used LifeSavers to specifically purchase Lifeline AEDs. This further reduces the number of companies that can provide these specific AEDs and accompanying supplies because they are manufacturer specific. If certain supplies cannot be acquired to outfit these AEDs, organizations within Maine Government may be forced to replace all of their AEDs


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

Discounted pricing per item was negotiated previously with the vendor.

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

Maine EMS anticipates submitting a Request for Proposals during calendar year 2021 for additional vendors to be able to competes for this reduced pricing contract.

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>		
			
Printed Name:	<i>Michael J. Sauschuck</i>	Date:	<i>12-16-2020</i>

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Signature of DAFS Procurement Official:	DocuSigned by: <i>Justin Franzose</i>	
Printed Name:	AEE09C7B3A8044E... Justin Franzose	Date: 12/17/2020