



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:		Public Safety- Maine State Police- Crime Laboratory		
Department Contract Administrator or Grant Coordinator:		Lt. Scott Gosselin Joseph Wilson		
(If applicable) Department Reference #:				
Amount: (Contract/Amendment/Grant)		\$ 5,400.00	Advantage CT / RQS #:	BPO-16A-20200921*0271
CONTRACT	Proposed Start Date:		Proposed End Date:	
AMENDMENT	Original Start Date:	10/1/2020	Effective Date:	1/1/2022
	Previous End Date:	12/31/2021	New End Date:	6/30/2022
GRANT	Project Start Date:		Grant Start Date:	
	Project End Date:		Grant End Date:	
Vendor/Provider/Grantee Name, City, State:		Tracker Products, LLC P.O. Box 1026 Florence, KY 41022		
Brief Description of Goods/Services/Grant:		(4) Annual Fluid Hosted Concurrent Licenses		

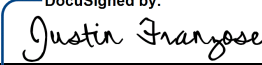
PART II: JUSTIFICATION FOR VENDOR SELECTION			
Check the box below for the justification(s) that applies to this request. (Check all that apply.)			
<input type="checkbox"/>	A. Competitive Process	<input type="checkbox"/>	G. Grant
<input checked="" type="checkbox"/>	B. Amendment	<input type="checkbox"/>	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. 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.	The Maine State Police requires a sophisticated tracking product to track evidence to sub –unit levels. This product has been working for several years and is an OIT approved barcode orientated product. This required renewal fee covers the software use, system upgrades, hosting and the maintenance and support for this software.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	The product needed must be able to inventory evidence down to a sub-unit level. This means that a bottle found at a crime scene would be entered as item but then would need to be tracked for DNA evidence, latents (fingerprints), blood typing, and possibly other sub-categories. This software has been used by the Maine State Police since 2014. To change the software now or move away from this software would require a lengthy process of transitioning the data from 6 years’ worth of evidence procurement and integrating that into a new product. This renewal is required for continued used of this software.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	This is an extension for six months only. The vendor has agreed to pro-rate the annual fee. In addition, although there is a price increase to \$3100/CAL for 2022, they have agreed to pro-rate the amount off the 2021 rate of \$2700/CAL. We have also dropped the number of licenses from five to four for this period.
4. Describe the plan for future competition for the goods or services.	There is a plan in place to migrate to a new system- EvidenceOnQ. Until that is complete, we will continue to utilize Tracker Products.

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)	
Does this request utilize ARPA/MJRP funds?	
<input type="checkbox"/> Yes – If Yes, please attach the approved Business Case(s).	
<input checked="" type="checkbox"/> 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):	<i>Kendra Coates</i>		
Typed Name:	Kendra Coates	Date:	Dec 20, 2021
Signature of DAFS Procurement Official:	DocuSigned by: 		
Typed Name:	AEED9C7B3A8044E... Justin Franzose	Date:	12/20/2021


Tracker PJF

Final Audit Report

2021-12-20

Created:	2021-12-20
By:	Joseph Wilson (joseph.wilson@maine.gov)
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