

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:		Office of Public Safety- SBI			
Department Contract Administrator or Grant Coordinator:		Matt Ruel Amy Gower			
(If applicable) Department Reference #:					
Amount: (Contract/Amendment/Grant)	\$10,638.00	Advantage CT / RQS #:	RQS-16A-20210311*0826		
CONTRACT	Proposed Start Date:	3/22/2021	Proposed End Date:	3/21/2022	
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:		MorphoTrak Anaheim CA 92807			
Brief Description of Goods/Services/Grant:		Maintenance and Support Agreement			

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
	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
X	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.

We have been using the MorphoTrak livescans dating back to 2006 when the MSP partnered with NH and Vermont to take advantage of a Tri-State partnership where all three states benefited from sharing the costs of a AFIS system. The Maine State Police, with the assistance of grant funds, purchased numerous livescans for state and local police stations strategically located across our state to ensure that we had a working system with which

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PART III: SUPPLEMENTAL INFORMATION

to share fingerprints and other identifiable data and information with each other within our state as well as sharing information to and from our partners in our neighboring states. Technology has evolved and the Maine State Police is looking to replace the 22 current livescans with newer units that offer additional and enhanced image capabilities.

Although we placed the equipment throughout the state, local police stations found it a financial burden to pay for the maintenance and sometimes this burden would be too much and the equipment would not be functioning properly or not at all. This time, to ensure that our network, and the citizens it protects, remains usable, these new machines being replaced all have full maintenance coverage included. This will ensure that this vital network is and remains fully functional.

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

Our need to use MorphoTrak Livescans has not changed. Since the LiveScan and fingerprint software is proprietary the devices can't be purchased from anyone other than our current vendor. Additionally, these livescans are connect to a shared system with NH and VT and their system does not allow transfer of information to or from other livescans devises as they use the same proprietary algorithms

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

These are normal ongoing fees that are consistent between all customers, and with the new system they have actually decreased.

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

We are currently in the middle of a 10 year contract for this system. As we approach the end of the contract we will review with our other partner states and vote on the future direction of the Tri-State partnership as well as sharing an integrated AFIS system.

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>		
	<i>Michael Sauschuck</i>		
Printed Name:	Michael J. Sauschuck	Date:	3/11/2021
Signature of DAFS Procurement Official:	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <small>DocuSigned by:</small> </div>		
Printed Name:	<small>AEED9C7B3A8044E...</small> Justin Franzose	Date:	3/12/2021

MorphoTrak-Idemia -Procurement Justification Form (PJF)3-2021

Final Audit Report

2021-03-11

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