



DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES  
**DIVISION OF PROCUREMENT SERVICES**  
 STATE OF MAINE

**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:		DAFS/MaineIT		
Department Contract Administrator or Grant Coordinator:		Hazel Stevenson		
(If applicable) Department Reference #:				
Amount: (Contract/Amendment/Grant)		\$ \$20,750	Advantage CT / RQS #:	BPO 18F 201905160*0953
CONTRACT	Proposed Start Date:	7/18/2024	Proposed End Date:	12/31/2024
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:		Accu-Time Systems, Inc 420 Somers Road Ellington, CT 06029		
Brief Description of Goods/Services/Grant:		Replacement Time clocks for DOC and DHHS facilities needed for PRISM		

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 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 checked="" 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.

<b>PART III: SUPPLEMENTAL INFORMATION</b>	
1. Provide a more detailed description and explain the need for the goods, services or grant to supplement the response in Part I.	The State of Maine needs to replace 6 of the 22 time clocks purchased for the HRMS project, which are nonoperational. It is urgent to replace these clocks/readers immediately, so the PRISM implementation schedule is not impacted.
2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.	ATS was awarded the time clocks and services through a competitive bid RFQ BPO #18F 201905160*0953. ATS was selected in the 2019 award because of the WD integration requirements, and at the recommendation of the WorkDay based on the responses to the bid by the other bidders. The original purchase includes implementation that has been paid for, and support services when the clocks are live. PRISM configuration has been developed to integrate with the Acutime time clocks and end to end testing is completed. Selecting a different vendor would require reconfiguration and testing that would delay go-live and significantly increase costs to the PRISM project.
3. Explain how the negotiated costs or rates are fair and reasonable; or how the funding was allocated to grantee.	Acutime prices are in line with the original bid, other than expected annual increases
4. Describe the plan for future competition for the goods or services.	DAFS will continue to evaluate cost effective ways to provide future goods and services using competitive bid processes.

<b>PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS &amp; RECOVERY PLAN (MJRP)</b>	
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.	

<b>PART V: APPROVALS</b>	
The signatures below indicate approval of this procurement request.	
Signature of requesting	

**Procurement Justification Form (PJF)**

Department's Commissioner (or designee):	<p>DocuSigned by: <i>Nicholas Marquis</i> A29C99359A37464...</p>		
Typed Name:	Nicholas Marquis, Chief Information Officer	Date:	7/19/2024
Signature of DAFS Procurement Official:	<p>DocuSigned by: <i>Joseph Zrioka</i> EA813178102243C...</p>		
Typed Name:	Joseph Zrioka, Director of IT Procurement	Date:	7/19/2024