



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/OIT/Client Tech	
Department Contract Administrator or Grant Coordinator:		Joy Lazore	
(If applicable) Department Reference #:		N/A	
Amount: (Contract/Amendment/Grant)	\$ 22,525.00	Advantage CT / RQS #:	RQS 18B 20240715*0063
CONTRACT	Proposed Start Date:	7/1/2024	Proposed End Date: 6/30/2025
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:		VIKING COMPUTER PARTS INC 11551 Rupp Drive Burnsville, MN 55337	
Brief Description of Goods/Services/Grant:		HP Equipment	

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 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.

With MaineIT’s aging fleet of computers, vendors have stopped direct selling products that are no longer under warranty but are needed to keep computers working. Replacing full units is more expensive and adds the loss that prior equipment was not used for its full life.

2. Provide a brief justification for the selected vendor to supplement the response in Part II. Reference the RFP number, if applicable.

MA 18P 1511190000000000078 was competitively awarded to HP, but HP no longer carries certain pieces of equipment. HP put us in contact with Viking Computers who can supply the products we need for older pieces of equipment.

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

Costs are negotiated by the original vendor from whom the equipment was originally purchased and is less or equal to the cost of the parts if they were purchased under warranty.

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

Current and future purchases of equipment have an extended warranty on the device that covers the pieces of equipment in which the items would no longer need to be purchased as well as updated refresh cycle of computers

PART IV: AMERICAN RESCUE PLAN ACT (ARPA) / MAINE JOBS & RECOVERY PLAN (MJRP)

Does this request utilize ARPA/MJRP funds?

Yes, MJRP funds (023) – If Yes, please attach the approved Business Case(s).

Yes, ARPA funds (025) – If Yes, please be aware of the requirements from awarding federal agencies.

No – If No, proceed to Part V.


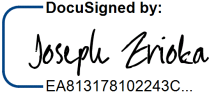
PART V: CONFLICTS OF INTEREST (COI); CONTRACT WITH THE STATE

Does the requesting Department signatory understand and acknowledge Maine’s COI Statute?

Yes, the requesting Department understands and acknowledges [MRS Title 5, §18-A, 2.](#)

PART VI: APPROVALS

The signatures below indicate approval of this procurement request.

Signature of requesting Department's Commissioner (or designee):	 A29C99359A37464...		
Typed Name:	Nicholas Marquis, Chief Information Officer	Date:	7/21/2024
Signature of DAFS Procurement Official:	 EA813178102243C...		
Typed Name:	Joseph Zrioka, Director of IT Procurement	Date:	7/19/2024