## 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:				DAFS OIT / Shared Services					
Department Contract Administrator or Grant Coordinator:			Phillip Platt						
(If applicable) Department Reference #:									
Amount: (Contract/Amendment/Grant)		\$ 84,000	Advantage C		T / RQS #:	RQS #: 20181115000000001668			
CONTRACT	Pr	oposed Start Date:		Proposed		End Date:			
AMENDMENT	Original Start Date:				Effective Date:				
	Previous End Date:		6/30/2020		New End Date:		8/31/2020		
GRANT	Project Start Date:				Grant Start Date:				
GRANT	Project End Date:				Grant End Date:				
Vendor/Provider/Grantee Name, City, State:			Premier International Enterprises, Inc 221 North LaSalle Chicaoo, IL 60601						
Brief Description of Goods/Services/Grant:			Data Migration to support the Cloud Application for Payroll						

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				
Х	B. Amendment		H. State Statute/Agency Directed				
	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

The Department has decided to delay the production cutover date for the Workday HCM solution. This delay in production cutover date will require work from Premier to support the Department for a period that was not included in the Agreement. This change order is to ensure that support can continue to be provided past the current end date of June 30, 2020.

<ol><li>Provide a brief justification for the selected vendor to supplement the response in P</li></ol>
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The delay in production cutover date will require work from Premier to support the Department for a period of time that was not included in the Agreement.

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

The cost estimates were in line with the original cost estimates for the original Agreement and prior Change Orders.

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

Any further date changes would be a scope change and will require an approved change order.

PART IV: APPROVALS							
Signature of requesting Department's Commissioner	I DV SIGNING DEIOW. I SIGNIN GUAL I ADDIOVE OF GUA DIOCGLETITE IL EGGEST.						
(or designee):	Heather L'Hommedieu Perreault						
Printed Name:	Heather Perreault	Date:	7/22/2020				
Signature of DAFS Procurement Official:	Justin Franzose						
Printed Name:	Justin Franzose	Date:	8/7/2020				