



Recipient Information

1. Recipient Name

MISSOURI DEPARTMENT OF HEALTH &
SENIOR SERVICES
920 WILDWOOD DR
Community and Public Health
JEFFERSON CITY, MO 65109-5796
[NO DATA]

2. Congressional District of Recipient
03

3. Payment System Identifier (ID)
1446000987B7

4. Employer Identification Number (EIN)
446000987

5. Data Universal Numbering System (DUNS)
878092600

6. Recipient's Unique Entity Identifier (UEI)
UETLXV8NG8F4

7. Project Director or Principal Investigator

Ms. Jennifer Harrison
Senior Program Specialist
jennifer.harrison@health.mo.gov
573-522-2881

8. Authorized Official

Mrs. Marcia Mahaney
Director, Division of Administration
marcia.mahaney@health.mo.gov
573-751-6014

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Mr. Damond Barnes
Grants Management Officer
xhp5@cdc.gov
770-488-2611

10. Program Official Contact Information

Graylin Mitchell
Program Officer
gmm0@cdc.gov
404-498-6522

Federal Award Information

11. Award Number

6 NU90TP922156-01-06

12. Unique Federal Award Identification Number (FAIN)

NU90TP922156

13. Statutory Authority

311(c)(1) of the Public Health Service Act (42 USC § 243(c)(1))

14. Federal Award Project Title

Cooperative Agreement for Emergency Response: Public Health Crisis Response - 2018

15. Assistance Listing Number

93.354

16. Assistance Listing Program Title

Public Health Emergency Response: Cooperative Agreement for Emergency Response: Public Health Crisis Response

17. Award Action Type

Change PI/PD

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date	07/01/2021	- End Date	06/30/2025
20. Total Amount of Federal Funds Obligated by this Action			\$0.00
20a. Direct Cost Amount			\$0.00
20b. Indirect Cost Amount			\$0.00
21. Authorized Carryover			\$0.00
22. Offset			\$0.00
23. Total Amount of Federal Funds Obligated this budget period			\$36,895,449.00
24. Total Approved Cost Sharing or Matching, where applicable			\$0.00
25. Total Federal and Non-Federal Approved this Budget Period			\$36,895,449.00
26. Period of Performance Start Date	07/01/2021	- End Date	06/30/2025
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance			\$36,895,449.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Mr. Damond Barnes
Grants Management Officer

30. Remarks



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Recipient Name MISSOURI DEPARTMENT OF HEALTH & SENIOR SERVICES 920 WILDWOOD DR Community and Public Health JEFFERSON CITY, MO 65109-5796 [NO DATA]
Congressional District of Recipient 03
Payment Account Number and Type 1446000987B7
Employer Identification Number (EIN) Data 446000987
Universal Numbering System (DUNS) 878092600
Recipient's Unique Entity Identifier (UEI) UETLXV8NG8F4
31. Assistance Type Cooperative Agreement
32. Type of Award Other

33. Approved Budget (Excludes Direct Assistance)	
I. Financial Assistance from the Federal Awarding Agency Only	
II. Total project costs including grant funds and all other financial participation	
a. Salaries and Wages	\$389,478.00
b. Fringe Benefits	\$247,708.00
c. Total Personnel Costs	\$637,186.00
d. Equipment	\$0.00
e. Supplies	\$5,220.00
f. Travel	\$693,758.00
g. Construction	\$0.00
h. Other	\$30,448.00
i. Contractual	\$35,407,769.00
j. TOTAL DIRECT COSTS	\$36,774,381.00
k. INDIRECT COSTS	\$121,068.00
l. TOTAL APPROVED BUDGET	\$36,895,449.00
m. Federal Share	\$36,895,449.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes						
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9390H2A	21NU90TP922156C6	TP	41.51	93.354	\$0.00	75-X-0140



DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU90TP922156-01-06

FAIN# NU90TP922156

Federal Award Date: 04/04/2024

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

AWARD ATTACHMENTS

MISSOURI DEPARTMENT OF HEALTH & SENIOR SERVICES

6 NU90TP922156-01-06

1. Terms & Conditions

ADDITIONAL TERMS AND CONDITIONS OF AWARD

Key Personnel: The purpose of this amendment is to approve the Principle Investigator/Program Director change to Jennifer Harrison. This is in response to the request submitted by your organization dated March 25, 2024.

Stewardship: Please be advised that recipient must exercise proper stewardship over Federal funds by ensuring that all costs charged to their cooperative agreement are allowable, allocable, and reasonable.

All other terms and conditions issued with this award remain in effect, unless otherwise changed, in writing, by the Grants Management Officer.

PLEASE REFERENCE YOUR AWARD NUMBER ON ALL CORRESPONDENCE.