



COOPERATIVE AGREEMENTS

Department of Health and Human Services  
Centers for Disease Control and Prevention

NATIONAL CENTER FOR CHRONIC DISEASE PREV AND HEALTH PROMO

Notice of Award

Issue Date: 03/02/2015



**Grant Number:** 5U58DP003924-02 REVISED  
**FAIN:** U58DP003924

**Principal Investigator(s):**  
Belinda Heimericks

**Project Title:** MO PROGRAMS FUNDED THROUGH: COMPREHENSIVE CANCER, CANCER  
REGISTRY

DIRECTOR, DIVISION OF ADMINISTRATION  
MISSOURI DEPARTMENT OF HEALTH &  
P.O. BOX 570  
920 WILDWOOD DRIVE  
JEFFERSON CITY, MO 65102

**Award e-mailed to:** grants@health.mo.gov

**Budget Period:** 06/30/2013 – 06/29/2015  
**Project Period:** 06/30/2012 – 06/29/2017

Dear Business Official:

The Centers for Disease Control and Prevention hereby revises this award (see “Award Calculation” in Section I and “Terms and Conditions” in Section III) to MISSOURI STATE DEPARTMENT OF HEALTH & SENIOR SERVICES in support of the above referenced project. This award is pursuant to the authority of 301A,311BC,317K2(42USC241A,243BC247BK2) and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award including the “Terms and Conditions” is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact the individual(s) referenced in Section IV.

Sincerely yours,

Annie D Harrison-Camacho  
Grants Management Officer  
Centers for Disease Control and Prevention

Additional information follows

**SECTION I – AWARD DATA – 5U58DP003924-02 REVISED**

**Award Calculation (U.S. Dollars)**

Salaries and Wages	\$542,646
Fringe Benefits	\$247,148
Personnel Costs (Subtotal)	\$789,794
Supplies	\$2,584
Travel Costs	\$7,800
Other Costs	\$253,335
Consortium/Contractual Cost	\$2,990,272

Federal Direct Costs	\$4,043,785
Federal F&A Costs	\$34,207
Approved Budget	\$5,321,612
Federal Share	\$4,077,992
Non-Federal Share	\$1,243,620
Less Unobligated Balance	\$72,797
<b>TOTAL FEDERAL AWARD AMOUNT</b>	<b>\$4,005,195</b>

**AMOUNT OF THIS ACTION (FEDERAL SHARE) \$0**

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

03	\$4,195,645
04	\$4,195,645
05	\$4,195,645

**Fiscal Information:**

CFDA Number: 93.283  
 EIN: XXXXXXXXXX  
 Document Number: UDP003924A

IC	CAN	2013	2015	2016	2017
DP	9213164		\$4,195,645	\$4,195,645	\$4,195,645
DP	921Z1RU	\$2,778,059			
DP	9390541	\$251,108			
DP	939ZRBL	\$976,028			

SUMMARY TOTALS FOR ALL YEARS		
YR	THIS AWARD	CUMULATIVE TOTALS
2	\$4,005,195	\$4,005,195
3	\$4,195,645	\$4,195,645
4	\$4,195,645	\$4,195,645
5	\$4,195,645	\$4,195,645

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project

**CDC Administrative Data:**

PCC: N / OC: 4151 / Processed: CAMACHOA 02/27/2015

**SECTION II – PAYMENT/HOTLINE INFORMATION – 5U58DP003924-02 REVISED**

For payment information see Payment Information section in Additional Terms and Conditions.

INSPECTOR GENERAL: The HHS Office Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to

hhstips@oig.hhs.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous. This note replaces the Inspector General contact information cited in previous notice of award.

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### **SECTION III – TERMS AND CONDITIONS – 5U58DP003924-02 REVISED**

This award is based on the application submitted to, and as approved by, CDC on the above-titled project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation cited in this Notice of Award.
- b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
- c. 45 CFR Part 74 or 45 CFR Part 92 as applicable.
- d. The HS Grants Policy Statement, including addenda in effect as of the beginning date of the budget period.
- e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

This award has been assigned the Federal Award Identification Number (FAIN) U58DP003924. Recipients must document the assigned FAIN on each consortium/subaward issued under this award.

This award is funded by the following list of institutes. Any papers published under the auspices of this award must cite the funding support of all institutes.

National Center For Chronic Disease Prev And Health Promo (CCDPH)

**Treatment of Program Income:**  
Additional Costs

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### **SECTION IV – DP Special Terms and Conditions – 5U58DP003924-02 REVISED**

FUNDING OPPORTUNITY ANNOUNCEMENT NUMBER: DP12-1205-02

#### **REVISED TERMS AND CONDITIONS**

REVISION FIVE

NBCCEDP CARRYOVER – EXTENSION OF PERIOD OF PERFORMANCE

**NOTE 1:** This revised Notice of Award (NOA) responds to your correspondence dated December 15, 2014 in which you requested \$74,054 in Year 02 unobligated funds. Your request was reviewed. However, the full amount of requested unobligated funds was not approved. This revised NOA authorizes use of Budget Year 02 unobligated funds in the amount of **\$44,054**. Therefore, the period of performance for Budget Period 02 has been extended to June 29, 2015. Authorization for use of the aforementioned funds is as follows:

Contractual: \$44,054

Purpose: Screening Provider Contracts with local community health clinics

Awarded unobligated funds are located in:  
Subaccount title: **CDCDP121205**  
Grant document number: **UDP003924A**

All activities associated with this request must be completed by June 29, 2015.

**NOTE 2:** Please be advised that grantee must exercise proper stewardship over Federal funds by ensuring that all costs charged to their cooperative agreement are allowable, allocable, and reasonable.

**NOTE 3:** All other terms and conditions issued with the original award remain in effect throughout the budget period unless otherwise changed, in writing, by the Grants Management Officer.

**PLEASE REFERENCE YOUR AWARD NUMBER ON ALL CORRESPONDENCE.**

**STAFF CONTACTS**

**Grants Management Specialist:** Annie D Harrison-camacho  
Centers for Disease Control and Prevention  
Procurement and Grants Office  
2920 Brandywine Road, Mail Stop:E09  
Atlanta, GA 30341  
**Email:** atc4@cdc.gov **Phone:** 770-488-2098

**Grants Management Officer:** Annie D Harrison-camacho  
Centers for Disease Control and Prevention  
Procurement and Grants Office  
2920 Brandywine Road, Mail Stop:E09  
Atlanta, GA 30341  
**Email:** atc4@cdc.gov **Phone:** 770-488-2098

**SPREADSHEET SUMMARY**

**GRANT NUMBER:** 5U58DP003924-02 REVISED

**INSTITUTION:** MISSOURI STATE DEPT/ HEALTH & SENIOR SRV

Budget	Year 2	Year 3	Year 4	Year 5
Salaries and Wages	\$542,646			
Fringe Benefits	\$247,148			
Personnel Costs (Subtotal)	\$789,794			
Supplies	\$2,584			
Travel Costs	\$7,800			
Other Costs	\$253,335	\$4,195,645	\$4,195,645	\$4,195,645
Consortium/Contractual Cost	\$2,990,272			
TOTAL FEDERAL DC	\$4,043,785	\$4,195,645	\$4,195,645	\$4,195,645
TOTAL FEDERAL F&A	\$34,207			
TOTAL COST	\$4,005,195	\$4,195,645	\$4,195,645	\$4,195,645