1. DATE ISSUED M	M/DD/YYYY	1a. SUPERSEDES AWARD NOTICE dated 09/16/2019			
11/20/2019		except that any additions or restrictions previously imposed remain in effect unless specifically rescinded			
2. CFDA NO. 93.268 - Immunizati	on Cooperative	Agreements			
3. ASSISTANCE TYPE	Cooperative	Agreement			
4. GRANT NO. 6 NH23IP922606-01-02			5. TYPE OF AWARD		
Formerly		Demonstration			
4a. FAIN NH23IP922	606		5a. ACTION TYPE	Post Award Amendment	
6. PROJECT PERIOD) MM/DD	/YYYY		MM/DD/YYYY	
From	07/01/2	2019	Through	06/30/2024	
7. BUDGET PERIOD	MM/DD	/YYYY		MM/DD/YYYY	
Erom	07/04/0	0.40	Thurstonk		

DEPARTMENT OF HEALTH AND HUMAN SERVICES Centers for Disease Control and Prevention CDC Office of Financial Resources

2939 Brandywine Road Atlanta, GA 30341

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
Sections 317, 317(k)(2) of the Public Health Service Act (42 U.S.C. Sections 247b. 247b(k)(2) and 247c), as amended.

8. TITLE OF PROJECT (OR PROGRAM)

CDC-RFA-IP19-1901 Immunization and Vaccines for Children

9a. GRANTEE NAME AND ADDRESS HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF 920 Wildwood Dr Jefferson City, MO 65109-5796 10a. GRANTEE AUTHORIZING OFFICIAL Ms. Tonya Loucks 920 WILDWOOD DR JEFFERSON CITY, MO 65109-5796 Phone: 000-000-0000			9b. GRANTEE PROJECT DIRECTOR Ms. Jennifer VanBooven 920 Wildwood Dr Community and Public Health Jefferson City, MO 65109-5796 Phone: 573-526-6643 10b. FEDERAL PROJECT OFFICER Ms. Hanan Awwad 1600 Clifton Rd NE Immunization Services Division (ISD) Atlanta, GA 30329-4018 Phone: 404.718.4623				
		ALL AMOUNTS ARE S	HOWN IN U	SD			
11. APPI	ROVED BUDGET (Excludes Direct Assistance)		12. AWARD	COMPUTATION			
I Finan	cial Assistance from the Federal Awarding Agency Only		a. Amount of Federal Financial Assistance (from item 11m) 5,730,169.00				
II Total	project costs including grant funds and all other financial part	icipation		bligated Balance From Prior Budget l			0.00
a.	Salaries and WageS	1,891,124.00	c. Less Cumulative Prior Award(s) This Budget Period 5,730,169.0				5,730,169.00
b.	Fringe Benefits	1,085,924.00				0.00	
c.	Total Personnel Costs	2,977,048.00	13. Total Federal Funds Awarded to Date for Project Period 5,730,169.00 14. RECOMMENDED FUTURE SUPPORT			5,730,169.00	
d.	Equipment	0.00		he availability of funds and satisfactor	ry progress of the	project):	
e.	Supplies	174,843.00	YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL	DIRECT COSTS
f.	Travel	192,805.00	a. 2		d. 5		
		0.00	b. 3 c. 4		e. 6 f. 7		
g.	Construction						
h.	Other	652,377.00	ALTERNATIVE		ONE OF THE FOLLOW	ING	
i.	Contractual	1,096,007.00	a. b.	DEDUCTION ADDITIONAL COSTS			b
j.	TOTAL DIRECT COSTS ————	5,093,080.00	c. d. e.	MATCHING OTHER RESEARCH (Add / Deduct Option) OTHER (See REMARKS)			
k.	INDIRECT COSTS	637,089.00		D IS BASED ON AN APPLICATION SUBMITTE	D TO AND AS APPRO	OVED BY THE FED	FRAL AWARDING AGENCY
l.	TOTAL APPROVED BUDGET	5,730,169.00	ON THE ABOVE	TITLED PROJECT AND IS SUBJECT TO THE TENCE IN THE FOLLOWING: The grant program legislation The grant program regulations.			
m.	Federal Share	5,730,169.00	c. d.	This award notice including terms and conditions Federal administrative requirements, cost princip	s, if any, noted below un- ples and audit requirement	der REMARKS. ents applicable to th	is grant.
n.	Non-Federal Share	0.00	prevail. Accep	ere are conflicting or otherwise inconsistent p tance of the grant terms and conditions is act the grant payment system.	olicies applicable to the disconledged by the grant	he grant, the abov antee when funds	e order of precedence shall are drawn or otherwise
	MARKS (Other Terms and Conditions Attached - ee next page	X Yes	No)				

GRANTS MANAGEMENT OFFICIAL:

Erica Stewart, Grants Management Officer 2939 Flowers Rd

TV-2 Atlanta, GA

Atlanta, GA 30341 Phone: 770-488-2769

17.OBJ CL	ASS 41.51	18a. VENDOR CODE	18b. EIN	19. DUNS 878092600	20. CONG. DIST. 03
F	Y-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
21. a.	9-939ZRYH	b. 19NH23IP922606	c. IP	d. \$0.00	e. 75-19-0951
22. a.		b.	c.	d.	e.
23. a.		b.	C.	d.	e.

NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of 3		DATE ISSUED 11/20/2019
GRANT NO.	6 NH	23IP922606-01-02

REMARKS:

Redirection: The purpose of this amended Notice of Award is to approve the redirection request submitted by your organization dated November 14, 2019. Funds have been distributed as indicated in the approved budget of this Notice of Award.

All the 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 AWARD NUMBER ON ALL CORRESPONDENCE

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

NOTICE OF AWARD (Continuation Sheet)

PAGE 3 of 3		DATE ISSUED 11/20/2019	
GRANT NO.	6 NH	23IP922606-01-02	

Federal Financial Report Cycle				
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date	
07/01/2019	06/30/2020	Annual	07/30/2020	
07/01/2020	06/30/2021	Annual	07/30/2021	
07/01/2021	06/30/2022	Annual	07/30/2022	
07/01/2022	06/30/2023	Annual	07/30/2023	
07/01/2023	06/30/2024	Annual	07/30/2024	