1. DATE ISSUED M	M/DD/YYYY 1a. SUPE	1a. SUPERSEDES AWARD NOTICE dated 11/12/2019				
01/14/2020	· ·	except that any additions or restrictions previously imposed remain in effect unless specifically rescinded				
2. CFDA NO. 93.136 - Injury Prevention and Control Research and State and Community Based Programs						
3. ASSISTANCE TYPI	Cooperative Agreemen	t				
4. GRANT NO. 6 NU	17CE925004-01-02	5. TYPE OF AWARD	5. TYPE OF AWARD			
Formerly		Other				
4a. FAIN NU17CE92	5004	5a. ACTION TYPE Post Award Amendment				
6. PROJECT PERIOR	MM/DD/YYYY	MM/DD/YYYY				
From	09/01/2019	Through 08/31/2022				
7. BUDGET PERIOD	MM/DD/YYYY	MM/DD/YYYY				
From	09/01/2019	Through 08/31/2020				

# 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)
Section 311(c)(1) of the PHS Act (42 USC § 243(c)(1))

#### 8. TITLE OF PROJECT (OR PROGRAM)

Overdose Data in Action - NCIPC

9a. GR	ANTEE NAME AND ADDRE	ss		9b. GRAN	TEE PROJECT DIRECTOR			
HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF			Mr. Damon Ferlazzo					
920 WILDWOOD DR			920 Wildwood Dr					
JEFFERSON CITY, MO 65109-5796			Missouri Dept. of Health and Senior Services					
			Jeffer	son City, MO 65109-5796				
				Phon	e: 573-751-3871			
10a. GI	RANTEE AUTHORIZING OF	FICIAL		10b. FEDE	RAL PROJECT OFFICER			
M	s. Marcia A Mahaney			Ms. T	awanda Asamaowei			
92	0 Wildwood Drive			4770	Buford Hwy			
Di	vision of Administration			Atlan	ta, GA 30341-3717			
Je	fferson City, MO 65109-579	6		Phon	e: 404.718.6389			
			ALL AMOUNTS ARE	SHOWN IN I	JSD			
11. APP	ROVED BUDGET (Excludes	S Direct Assistance)		12. AWARD	COMPUTATION			
I Finar	cial Assistance from the Fed	deral Awarding Agency Only		a. Amount	of Federal Financial Assistance (from	item 11m)		4,922,875.00
II Total project costs including grant funds and all other financial participation			cipation	b. Less Unobligated Balance From Prior Budget Periods			0.00	
а.	Salaries and WageS		624,872.00	c. Less Cumulative Prior Award(s) This Budget Period 4,922,875.				4,922,875.00
	Fringe Benefits		377,381.00	d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION				
b.	Tringe benefits		377,301.00	13. Total Federal Funds Awarded to Date for Project Period 4,922,87				4,922,875.00
c.	Total Personnel Costs		1,002,253.00		MENDED FUTURE SUPPORT	• "		
d.	Equipment		0.00	(Subject to	the availability of funds and satisfacto	ry progress of the	e project):	
e.	Supplies		37,018.00	YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL	DIRECT COSTS
	• •		04 005 00	a. 2		d. 5		
f.	Travel		81,285.00	b. 3		e. 6		
g.	Construction		0.00	c. 4		f. 7		
h.	Other		92,178.00	15. PROGRAI ALTERNATIV	I INCOME SHALL BE USED IN ACCORD WITH	ONE OF THE FOLLO	WING	
i.	Contractual		3,495,656.00	a. b.	DEDUCTION ADDITIONAL COSTS			b
j.	TOTAL DIRECT COS	тs <b>→</b>	4,708,390.00	c. MATCHING d. OTHER RESEARCH (Add / Deduct Option) e. OTHER (See REMARKS)				
k.	INDIRECT COSTS		214,485.00		RD IS BASED ON AN APPLICATION SUBMITTE	ED TO AND AS APPE	POVED BY THE FE	DERAL AWARDING AGENCY
				ON THE ABOV	TITLED PROJECT AND IS SUBJECT TO THE T			
I. TOTAL APPROVED BUDGET 4,922,875.00			OR BY REFERENCE IN THE FOLLOWING:  a. The grant program legislation					
				b. c.	The grant program regulations. This award notice including terms and condition	s, if any, noted below i	under REMARKS.	
m.	Federal Share		4,922,875.00	d.	Federal administrative requirements, cost princi	ples and audit require	ments applicable to	•
n. Non-Federal Share 0.00			In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall of prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.					
RE	MARKS (Other Terms an	d Conditions Attached -	X Yes	No)				

#### GRANTS MANAGEMENT OFFICIAL:

Barbara (Rene) Benyard, Grants Management Officer, Team Lead

2939 Flowers Road Mailstop TV2 Atlanta, GA 30341-5509 Phone: 770.488.2757

17.OBJ CI	LASS 41.51	18a. VENDOR CODE	18b. EIN		19. DUNS	878092600	20. C	ONG. DIST. 03
F	FY-ACCOUNT NO.	DOCUMENT NO.		ADMINISTRATIVE CODE	AMT A	ACTION FIN ASST		APPROPRIATION
21. a.	9-939ZUCS	b. 19NU17CE925004OPCE	C.	CE	d.	\$0.00	e.	75-19-0952
22. a.		b.	C.		d.		e.	
23. a.		b.	C.		d.		e.	

## NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of 2		DATE ISSUED 01/14/2020
GRANT NO. 6 NU		17CE925004-01-02

#### **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

6 NU17CE925004-01-02

1. T&C change in key personnel

The purpose of this amendment is to approve the Authorized Official, change to Marcia Mahaney and PI change to Damon Ferlazzo (with Co PI Lynn Smith added in GrantSolutions). This is in response to the request submitted by your organization dated December 23, 2019

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 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

#### **GMS Contact:**

Julie Davis, Grants Management Specialist Centers for Disease Control and Prevention Office of Financial Resources (OFR) Email: xxg6@cdc.gov Phone: 770-488-2936