1.	DATE ISSUED	
	08/07/2020	

1a. SUPERSEDES AWARD NOTICE dated 02/12/2020 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remain in effect unless specifically rescinded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 TYPE Cooperative Agreement					
4. GRANT NO. 6 NU17CE Formerly	925004-01-04	5. TYPE OF AWARD Other			
4a. FAIN NU17CE925004		5a. ACTION TYPE	Post Award Amendment		
6. PROJECT PERIOD	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		

8. TITLE OF PROJECT (OR PROGRAM)

MM/DD/YYYY

Overdose Data in Action - NCIPC

DEPARTMENT OF HEALTH AND HUMAN SERVICES **Centers for Disease Control and Prevention**

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))

9a. GRANTEE NAME AND ADDRESS	9b. GRANTEE 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
	Jefferson City, MO 65109-5796
	Phone: 573-751-3871
10a. GRANTEE AUTHORIZING OFFICIAL	10b. FEDERAL PROJECT OFFICER
10a. GRANTEE AUTHORIZING OFFICIAL Ms. Marcia A Mahaney	10b. FEDERAL PROJECT OFFICER Ms. Tawanda Asamaowei
Ms. Marcia A Mahaney	Ms. Tawanda Asamaowei
Ms. Marcia A Mahaney 920 Wildwood Drive	Ms. Tawanda Asamaowei 4770 Buford Hwy

ALL AMOUNTS ARE SHOWN IN USD

11. APP	ROVED BUDGET (Exclude	es Direct Assistance)		12. AWARD	COMPUTATION			
I Finar	icial Assistance from the Fe	deral Awarding Agency Only		a. Amount	of Federal Financial Assistance (fron	n item 11m)	4	,922,875.00
II Total	project costs including gran	nt funds and all other financial participation	, L	b. Less Un	obligated Balance From Prior Budget	Periods		0.00
a.	Salaries and WageS		624,872.00	c. Less Cur	nulative Prior Award(s) This Budget I	Period	4	,922,875.00
α.	0			d. AMOUN	T OF FINANCIAL ASSISTANCE TH	IS ACTION		0.00
b.	Fringe Benefits		377,381.00	13. Total Fe	deral Funds Awarded to Date for P	roject Period	9	,845,750.00
с.	Total Personnel Cost	s	1,002,253.00	14. RECOM	MENDED FUTURE SUPPORT	-		
d.	Equipment		0.00	(Subject to	the availability of funds and satisfacto	ory progress of the p	project):	
e.	Supplies		37,018.00	YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT CO	OSTS
f.	Travel		81,285.00	a. 2 b. 3		d. 5 e. 6		
g.	Construction		0.00	c. 4		f. 7		
h.	Other		92,178.00	15. PROGRAM	I INCOME SHALL BE USED IN ACCORD WITH	ONE OF THE FOLLOWI	NG	
i.	Contractual	······	3,495,656.00	a. b.	DEDUCTION ADDITIONAL COSTS MATCHING		b	
j.	TOTAL DIRECT COS	sts	4,708,390.00	d. e.	OTHER RESEARCH (Add / Deduct Option) OTHER (See REMARKS)			
k.	INDIRECT COSTS		214,485.00	-	х <i>У</i>			
	TOTAL APPROVED BU	DCET	4.922.875.00	ON THE ABOVE	RD IS BASED ON AN APPLICATION SUBMITT TITLED PROJECT AND IS SUBJECT TO THE T ENCE IN THE FOLLOWING:			
١.	TOTAL APPROVED BO		1,022,010.00	a. b.	The grant program legislation The grant program regulations.			
m.	Federal Share		4,922,875.00	с. d.	This award notice including terms and condition Federal administrative requirements, cost princ	iples and audit requireme	nts applicable to this grant.	
n.	Non-Federal Share		0.00	prevail. Accept	ere are conflicting or otherwise inconsistent tance of the grant terms and conditions is a the grant payment system.			
RE	MARKS (Other Terms a	nd Conditions Attached -	es	No)				

GRANTS MANAGEMENT OFFICIAL:

Valencia Williams, Lead Grant Management Specialist 1600 Clifton Rd Atlanta, GA 30333 Phone: 404.498.3260

17.0BJ CLASS	41.51	18a. VENDOR CODE	18b. EIN	19. DUNS 878092600	20. CONG. DIST. 03
FY-A	COUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
21. a.	9-939ZUCS	b. 19NU17CE925004OPCE	c. CE	d. \$0.00	e. 75-19-0952
22. a.		b.	с.	d.	e.
23. a.		b.	с.	d.	е.

PAGE 2 of 2	DATE ISSUED
	08/07/2020

GRANT NO. 6 NU17CE925004-01-04

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 NU17CE925004-01-04

1. Terms and Conditions

ADDITIONAL TERMS AND CONDITIONS OF AWARD

Technical Review Statement Response Requirement: The review comments on the strengths and weaknesses of the proposal are provided as part of this award. A response to the weaknesses in these statements must be submitted to and approved, in writing, by the Grants Management Specialist/Grants Management Officer (GMS/GMO) noted in the Staff Contacts section of this NoA, no later than 30 days from the budget period start date. Failure to submit the required information by the due date, October 1, 2020, will cause delay in programmatic progress and will adversely affect the future funding of this project

Natasha Jones Grants Management Specialist (GMS) Office of Grants Services (OGS) Office of Financial Resources (OFR) Office of the Chief Operating Officer (OCOO) Centers for Disease Control and Prevention (CDC) Njones6@cdc.gov | 770-488-1649