1.	DATE ISSUED MM/D	D/YYYY   1a. SUPER	1a. SUPERSEDES AWARD NOTICE dated 05/06/2019						
	07/31/2019		except that any additions or restrictions previously imposed remain in effect unless specifically rescinded						
2.	CFDA No.								
	93.898 - Cancer Prevention	on and Control Progran	ns for State, Territoria	and Tribal Organizations					
3.	ASSISTANCE TYPE	Cooperative Agre	ement						
4.	GRANT NO. 6 NU58	DP006299-03-01	5. TYPE OF AWA	RD					
	Formerly		Other						
4a	. FAIN NU58DP006299		5a. ACTION TYPE	Post Award Amendment					
6.	PROJECT PERIOD	MM/DD/YYYY		MM/DD/YYYY					
	From	06/30/2017	Through	06/29/2022					
7.	BUDGET PERIOD	MM/DD/YYYY		MM/DD/YYYY					
	From	06/30/2019	Through	06/29/2020					

#### **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) 301(a) and 317(k)(2) of the Public Health Service Act, [42 U.S.C. Section 241(a) and 247b(k)(2)], as amended.

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

Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations

	ANTEE NAME AND ADDRESS			EE PROJECT DIRECTOR				
	EALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT	OF	Ms. Mindy Laughlin					
92	0 Wildwood Dr		920 Wildwood Dr					
Co	ommunity and Public Health		Jefferso	on City, MO 65109-5796				
Je	fferson City, MO 65109-5796		Phone:	5737516435				
10a. GF	RANTEE AUTHORIZING OFFICIAL		10b. FEDER	AL PROJECT OFFICER				
M	s. Tonya R Loucks		Valerie	Richmond-Reese				
92	20 WILDWOOD DR		4770 B	uford Highway				
Je	fferson City, MO 65109-5796		Chamb	lee, GA 30341				
Pl	none: 573-751-6014		Phone:	770-488-3694				
44 ADE	DOVED BUDGET (Final video Bire et Annieteuro)	ALL AMOUNTS ARE						
	PROVED BUDGET (Excludes Direct Assistance)			COMPUTATION		4 000 000 00		
	nancial Assistance from the Federal Awarding Agency Only			of Federal Financial Assistance (fron		4,286,682.00		
II To	tal project costs including grant funds and all other financial pa	articipation		bligated Balance From Prior Budget		249,045.00		
a.	Salaries and Wages	620,439.00	c. Less Cumulative Prior Award(s) This Budget Period 4,037,637					
b.	Fringe Benefits	352,372.00		d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 0.00  13. Total Federal Funds Awarded to Date for Project Period 12,476,019,00				
c. Total Personnel Costs				MENDED FUTURE SUPPORT	roject i eriou	12,476,019.00		
d.	Equipment	0.00	(Subject to the availability of funds and satisfactory progress of the project):					
e.	Supplies	3,771.00	YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT COSTS		
	Toward	24,412.00	a. 4		d. 7			
т.	Travel	•	b. 5		e. 8			
g.	Construction	0.00	c. 6		f. 9			
h.	Other	213,799.00	15. PROGRAM ALTERNATIVES	INCOME SHALL BE USED IN ACCORD WITH S:	ONE OF THE FOLLOWING			
i.	Contractual	2,864,680.00	a. b.	DEDUCTION ADDITIONAL COSTS		b		
j.	TOTAL DIRECT COSTS	4,079,473.00	c. d. e.	MATCHING OTHER RESEARCH (Add / Deduct Option) OTHER (See REMARKS)				
k.	INDIRECT COSTS	207,209.00	16. THIS AWAR	D IS BASED ON AN APPLICATION SUBMITTE	ED TO, AND AS APPROVE	ED BY, THE FEDERAL AWARDING AGENCY		
				TITLED PROJECT AND IS SUBJECT TO THE T NCE IN THE FOLLOWING:	ERMS AND CONDITIONS I	NCORPORATED EITHER DIRECTLY		
I.	TOTAL APPROVED BUDGET	4,286,682.00	a. b.	The grant program legislation The grant program regulations.				
m.	Federal Share	4,286,682.00	C. d.	This award notice including terms and condition Federal administrative requirements, cost princi	iples and audit requirements	s applicable to this grant.		
n. Non-Federal Share 3,285,567.00				In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall 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 and Conditions Attached -	X Yes	No)					

#### **GRANTS MANAGEMENT OFFICIAL:**

Pamela Render, Grants Management Officer

2920 Brandywine Road Mailstop E09 Atlanta, GA 30341 Phone: 770-488-2712

17. OBJ 0	CLASS 41.51	18a.	VENDOR CODE			18b. El	N			19. DUNS	878092600	20	). CONG. DIST.	03
	FY-ACCOUNT NO.		DOCUMENT NO.		CFDA		ADN	INISTRATIVE CODE		AMT ACTI	ON FIN ASST		APPROPRIATIO	N
21. a.	9-921Z1RL	b.	17NU58DP006299	C.	93.898		d.	DP	e.		\$0.00	f.	75-1	9-0948
22. a.	9-921Z1RU	b.	17NU58DP006299	C.	93.898		d.	DP	e.		\$0.00	f.	75-1	9-0948
23. a.	9-9390539	b.	17NU58DP006299	C.	93.898		d.	DP	e.		\$0.00	f.	75-1	9-0948

# NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of 3		DATE ISSUED 07/31/2019	
GRANT NO.	6 NU	58DP006299-03-01	

FY-ACCOUNT NO.	DOCUMENT NO.	CFDA	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
24.a. 9-9390540	b. 17NU58DP006299	c. 93.898	d. DP	e. \$0.00	f. 75-19-0948
25.a. 9-9390541	b. 17NU58DP006299	c. 93.898	d. DP	e. \$0.00	f. 75-19-0948
26.a. 9-9390542	b. 17NU58DP006299	c. 93.898	d. DP	e. \$0.00	f. 75-19-0948
27.a. 9-9390543	b. 17NU58DP006299	c. 93.898	d. DP	e. \$0.00	f. 75-19-0948
28.a. 9-939ZRBC	b. 17NU58DP006299	c. 93.898	d. DP	e. \$0.00	f. 75-19-0948
29.a. 9-939ZRBL	b. 17NU58DP006299	c. 93.898	d. DP	e. \$0.00	f. 75-19-0948
30.a. 9-939ZUUK	b. 17NU58DP006299	c. 93.898	d. DP	e. \$0.00	f. 75-19-0948

### **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 07/31/2019	
GRANT NO.	6 NU	58DP006299-03-01	

Federal Financial Report Cycle						
Reporting Period Start Date Reporting Period End Date Reporting Type Reporting Period Due Date						
06/30/2017	06/29/2018	Annual	09/27/2018			
06/30/2018	06/29/2019	Annual	09/27/2019			
06/30/2019	06/29/2020	Annual	09/27/2020			

## **AWARD ATTACHMENTS**

### Missouri Department of Health

6 NU58DP006299-03-01

1. Change in Key Personnel

### ADDITIONAL TERMS AND CONDITIONS OF AWARD

# FUNDING OPPORTUNITY ANNOUNCEMENT (FOA) NUMBER: DP17-1701 6 NU58DP006299-03-01

**Key Personnel:** The purpose of this amendment is to approve the *Project Director* change to Melinda Laughlin. This is in response to the request submitted by your organization dated July 1, 2019.

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

All other terms and conditions issued with the original Notice of Award remain in effect throughout the budget period unless changed, in writing, by the CDC Grants Management Officer.

PLEASE REFERENCE THE GRANT NUMBER ON ALL CORRESPONDENCE.

#### **OGS Contact:**

### Pamela Render

Grants Management Specialist
Office of Grants Services (OGS)
Office of Financial Resources (OFR)
Office of the Chief Operating Officer (OCOO)
Centers for Disease Control and Prevention (CDC)
PRender@cdc.gov | 770-488-2712 office |