Notice of Award

Award# 6 NUF2CE002490-02-04

FAIN# NUF2CE002490

Federal Award Date: 12/18/2022

Recipient Information

1. Recipient Name

HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF

920 Wildwood Dr

Missouri Dept. of Health and Senior Services Jefferson City, MO 65109-5796

[NO DATA]

2. Congressional District of Recipient

3. Payment System Identifier (ID)

1446000987B7

4. Employer Identification Number (EIN) 446000987

5. Data Universal Numbering System (DUNS) 878092600

6. Recipient's Unique Entity Identifier (UEI) UETLXV8NG8F4

7. Project Director or Principal Investigator

Ms. Sarah Ehrhard Reid WOMEN'S HEALTH INITIATIVE MANAGER Sarah.EhrhardReid@health.mo.gov 573-522-2833

8. Authorized Official

Mrs. Marcia Mahaney
Director, Division of Admnistration
marcia.mahaney@health.mo.gov
573-751-6014

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Uliecia Bolton

Grants Management Specialist

uaj0@cdc.gov

678-475-4805

10.Program Official Contact Information

Ms. Shayla L Wilkinson

Project Officer

DVP PPTB IHB9@cdc.gov

17704881638

Federal Award Information

11. Award Number

6 NUF2CE002490-02-04

12. Unique Federal Award Identification Number (FAIN)

NUF2CE002490

13. Statutory Authority

Recipient is funded under Category" B" / Statutory Authority: 392(a)(1) of the PHS Act (42 USC § 280b-1(a)(1))

14. Federal Award Project Title

Rape Prevention and Education: Using the best available evidence for Sexual Violence Prevention

15. Assistance Listing Number

93.136

16. Assistance Listing Program Title

Injury Prevention and Control Research and State and Community Based Programs

17. Award Action Type

Deob/Reob

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19.	Budget Period Start Date	02/01/2020	- End Date	01/31/2021	

20.	Total Amount of Federal Funds Obligated by this Action	(\$43,911.93)
	20a. Direct Cost Amount	(\$99,511.93)
	20b. Indirect Cost Amount	\$0.00
21.	Authorized Carryover	\$0.00
22.	Offset	\$0.00
23.	Total Amount of Federal Funds Obligated this budget period	\$1,019,824.00
24.	Total Approved Cost Sharing or Matching, where applicable	\$0.00
25.	Total Federal and Non-Federal Approved this Budget Period	\$975,912.07
26.	Period of Perfomance Start Date 02/01/2019 - End Date 01/31/2024	
27.	Total Amount of the Federal Award including Approved	

28. Authorized Treatment of Program Income

Cost Sharing or Matching this Period of Performance

ADDITIONAL COSTS

29. Grants Management Officer - Signature

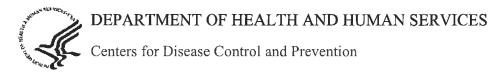
Ms. Stephanie Latham

Team Lead, Grants Management Officer

30. Remarks

This is an Administrative Action. No further action needed.

\$3,904,813.07



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Recipient Information

Recipient Name

HEALTH AND SENIOR SERVICES, MISSOURI

DEPARTMENT OF

920 Wildwood Dr

Missouri Dept. of Health and Senior Services

Jefferson City, MO 65109-5796

[NO DATA]
Congressional District of Recipient

03

Payment Account Number and Type

1446000987B7

Employer Identification Number (EIN) Data

446000987

Universal Numbering System (DUNS)

878002600

Recipient's Unique Entity Identifier (UEI)

UETLXV8NG8F4

31. Assistance Type

Cooperative Agreement

32. Type of Award

Other

(Excludes Direct Assistance)				
I. Financial Assistance from the Federal Awarding Age	ncy Only			
II. Total project costs including grant funds and all other financial participation				
a. Salaries and Wages	\$73,802.00			
b. Fringe Benefits	\$44,281.00			
c. TotalPersonnelCosts	\$118,083.00			
d. Equipment	\$0.00			
e. Supplies	\$5,626.00			
f. Travel	\$2,212.00			
g. Construction	\$0.00			
h. Other	\$4,920.00			

I. TOTAL APPROVED BUDGET	\$975,912.07
m. Federal Share	\$975,912.07
n. Non-Federal Share	\$0.00

34. Accounting	Classification	Codes
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FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
0-9390EWQ	19NUF2CE002490C3	CE	41.51	93.136	(\$43,911.93)	75-2024-0943

33. Approved Budget

i. Contractual

j. TOTAL DIRECT COSTS

k. INDIRECT COSTS

\$832,408.07

\$963,249.07

\$12,663.00



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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