



**Recipient Information**

**1. Recipient Name**  
 MISSOURI DEPARTMENT OF HEALTH &  
 SENIOR SERVICES  
 PO BOX 570  
 Jefferson Cty, MO 65102-0570  
 [NO DATA]

**2. Congressional District of Recipient**  
 03

**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. Neann Wedgeworth  
 neann.wedgeworth@health.mo.gov  
 816-251-0791

**8. Authorized Official**  
 Ms. Marcia Mahaney  
 Grants@health.mo.gov  
 573-751-6014

**Federal Agency Information**  
 CDC Office of Financial Resources

**9. Awarding Agency Contact Information**  
 Natasha Jones  
 Grants Management Officer  
 mgz2@cdc.gov  
 770-488-1649

**10. Program Official Contact Information**  
 Latoya Golden  
 Program Officer  
 ql11@cdc.gov  
 404.498.1726

**Federal Award Information**

**11. Award Number**  
 6 NU17CE010204-01-02

**12. Unique Federal Award Identification Number (FAIN)**  
 NU17CE010204

**13. Statutory Authority**  
 Section 311(c)(1) of the PHS Act (42 USC § 243(c)(1))

**14. Federal Award Project Title**  
 OVERDOSE DATA TO ACTION-STATES

**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**  
 Change PI/PD

**18. Is the Award R&D?**  
 No

**Summary Federal Award Financial Information**

<b>19. Budget Period Start Date</b>	09/01/2023	<b>- End Date</b>	08/31/2024
<b>20. Total Amount of Federal Funds Obligated by this Action</b>			\$0.00
20a. Direct Cost Amount			\$0.00
20b. Indirect Cost Amount			\$0.00
<b>21. Authorized Carryover</b>			\$0.00
<b>22. Offset</b>			\$0.00
<b>23. Total Amount of Federal Funds Obligated this budget period</b>			\$4,394,497.00
<b>24. Total Approved Cost Sharing or Matching, where applicable</b>			\$0.00
<b>25. Total Federal and Non-Federal Approved this Budget Period</b>			\$4,394,497.00
<b>26. Period of Performance Start Date</b>	09/01/2023	<b>- End Date</b>	08/31/2028
<b>27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance</b>			\$4,394,497.00

**28. Authorized Treatment of Program Income**  
 ADDITIONAL COSTS

**29. Grants Management Officer - Signature**  
 Ms. Tajsha LaShore

**30. Remarks**



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

Notice of Award

Award# 6 NU17CE010204-01-02  
FAIN# NU17CE010204  
Federal Award Date: 01/02/2024

<p><b>Recipient Information</b></p> <p><b>Recipient Name</b> MISSOURI DEPARTMENT OF HEALTH &amp; SENIOR SERVICES PO BOX 570 Jefferson Cty, MO 65102-0570 [NO DATA]</p> <p><b>Congressional District of Recipient</b> 03</p> <p><b>Payment Account Number and Type</b> 1446000987B7</p> <p><b>Employer Identification Number (EIN) Data</b> 446000987</p> <p><b>Universal Numbering System (DUNS)</b> 878092600</p> <p><b>Recipient's Unique Entity Identifier (UEI)</b> UETLXV8NG8F4</p>
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<p><b>31. Assistance Type</b> Cooperative Agreement</p> <p><b>32. Type of Award</b> Other</p>
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<b>33. Approved Budget</b> (Excludes Direct Assistance)	
i. Financial Assistance from the Federal Awarding Agency Only	
ii. Total project costs including grant funds and all other financial participation	
a. Salaries and Wages	\$688,064.00
b. Fringe Benefits	\$469,518.00
c. Total Personnel Costs	\$1,157,582.00
d. Equipment	\$0.00
e. Supplies	\$27,683.00
f. Travel	\$42,414.00
g. Construction	\$0.00
h. Other	\$307,526.00
i. Contractual	\$2,649,770.00
<b>j. TOTAL DIRECT COSTS</b>	<b>\$4,184,975.00</b>
<b>k. INDIRECT COSTS</b>	<b>\$209,522.00</b>
<b>l. TOTAL APPROVED BUDGET</b>	<b>\$4,394,497.00</b>
<b>m. Federal Share</b>	<b>\$4,394,497.00</b>
<b>n. Non-Federal Share</b>	<b>\$0.00</b>

<b>34. Accounting Classification Codes</b>						
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
3-9390BX6	23NU17CE010204OPCE	CE	410Q	93.136	\$0.00	75-23-0952



**DEPARTMENT OF HEALTH AND HUMAN SERVICES** Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU17CE010204-01-02

FAIN# NU17CE010204

Federal Award Date: 01/02/2024

**Direct Assistance**

<b>BUDGET CATEGORIES</b>	<b>PREVIOUS AMOUNT (A)</b>	<b>AMOUNT THIS ACTION (B)</b>	<b>TOTAL (A + B)</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
<b>Total</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

# AWARD ATTACHMENTS

MISSOURI DEPARTMENT OF HEALTH & SENIOR SERVICES

6 NU17CE010204-01-02

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1. Terms and Conditions

## ADDITIONAL TERMS AND CONDITIONS OF AWARD

**Key Personnel:** The purpose of this amendment is to approve the *Principle Investigator* change to Neann Wedgeworth. This is in response to the request submitted by your organization dated December 26, 2023.