#### 1. DATE ISSUED MM/DD/YYYY|2. CFDA NO. | 3. ASSISTANCE TYPE 06/04/2018 Cooperative Agreement 93.136 1a. SUPERSEDES AWARD NOTICE dated 03/02/2018 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded 4. GRANT NO. 5. ACTION TYPE Post Award 6 NU17CE924884-02-04 Amendment Formerly 6. PROJECT PERIOD MM/DD/YYYY MM/DD/YYYY From Through 08/31/2019 09/01/2016 7. BUDGET PERIOD MM/DD/YYYY MM/DD/YYYY From Through 08/31/2018 09/01/2017

#### **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

# Centers for Disease Control and Prevention CDC Office of Financial Resources

2920 Brandywine Road Atlanta, GA 30341

### **NOTICE OF AWARD**

AUTHORIZATION (Legislation/Regulations) SEC 301,317,&391A 42USC241,247B&280B-B3

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

Enhanced State Surveillance of Opioid-Involved Morbidity and Mortality

#### 9a. GRANTEE NAME AND ADDRESS 9b. GRANTEE PROJECT DIRECTOR MISSOURI STATE DEPT/ HEALTH & SENIOR SRV Andrew Hunter 920 Wildwood Dr 920 Wildwood Drive -DIIP3 Jefferson City, MO 65102-0570 Jefferson City, MO 65109-5796 Phone: 573-526-0444 10b. FEDERAL PROJECT OFFICER 10a. GRANTEE AUTHORIZING OFFICIAL Terry Davis Ms. Patricia Bedell 4770 Buford Hwy 920 WILDWOOD DR DUIP Division of Administration Atlanta, GA 30341 Phone: 770-488-3940 JEFFERSON CITY, MO 65109-5796 Phone: 573-751-6014 ALL AMOUNTS ARE SHOWN IN USD 11. APPROVED BUDGET (Excludes Direct Assistance) 12. AWARD COMPUTATION 567,696.00 I Financial Assistance from the Federal Awarding Agency Only a. Amount of Federal Financial Assistance (from item 11m) ı 119,696.00 b. Less Unobligated Balance From Prior Budget Periods II Total project costs including grant funds and all other financial participation c. Less Cumulative Prior Award(s) This Budget Period 448,000.00 Salaries and Wages ..... a. 163,328.00 d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 0.00 b. Fringe Benefits 86,564.00 13. Total Federal Funds Awarded to Date for Project Period 768,000.00 **Total Personnel Costs** C. 14. RECOMMENDED FUTURE SUPPORT 249,892.00 (Subject to the availability of funds and satisfactory progress of the project): Equipment d. 0.00 YEAR TOTAL DIRECT COSTS YEAR TOTAL DIRECT COSTS Supplies e. 3,293.00 a. 3 d. 6 Travel e. 7 37,176.00 b. 4 Construction c. 5 q. f. 8 ...... 0.00 15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES: Other 8,808.00 DEDUCTION Contractual i 215,050.00 b ADDITIONAL COSTS MATCHING OTHER RESEARCH (Add / Deduct Option) OTHER (See REMARKS) TOTAL DIRECT COSTS 514,219.00 INDIRECT COSTS 53,477.00 16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARDING AGENCY ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING: **TOTAL APPROVED BUDGET** 567,696.00 The grant program legislation The grant program regulations. This award notice including terms and conditions, if any, noted below under REMARKS. The derail administrative requirements, cost principles and audit requi Federal Share 567,696.00 In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall 0.00 Non-Federal Share 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. REMARKS (Other Terms and Conditions Attached -**X** Yes No)

GRANTS MANAGEMENT OFFICIAL: Brownie Anderson-Rana, Grants Management Officer

17. OBJ CLASS 41.51		18a. VENDOR CODE		18b. E		in en			19. DUNS	878092600	20	0. CONG. DIST.	03	
FY-ACCOUNT NO.		DOCUMENT NO.		CFDA		ADMINISTRATIVE CODE		DDE	AMT ACTION FIN ASST		APPROPRIATION			
21. a.	7-93905UW	b. 16CE92	4884	C.	93.13	36	d.	CE		e.	\$0.00	f.	75-17-	0952
22. a.	7-939039R	b. 16CE92	4884	C.	93.13	36	d.	CE		e.	\$0.00	f.	75-17-	0952
23. a.	6-93905UW	b. 16CE92	4884	C.	93.13	36	d.	CE		e.	\$0.00	f.	75-16-	0952

## NOTICE OF AWARD (Continuation Sheet)

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GRANT NO. 6 N		17CE924884-02-04

## **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

# NOTICE OF AWARD (Continuation Sheet)

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						06/04/2018	
GR	GRANT NO. 6 NU		NU	J17CE924884-02-04			

Federal Financial Report Cycle							
Reporting Period Start Date Reporting Period End Date Reporting Type Reporting Period Due Date							
09/01/2016	08/31/2017	Annual	11/29/2017				
09/01/2017	08/31/2018	Annual	11/29/2018				

# **AWARD ATTACHMENTS**

# MISSOURI STATE DEPT/ HEALTH & SENIOR SRV

6 NU17CE924884-02-04

1. Revised Terms and Conditions

**NOTE 1 Carryover:** The purpose of this amended Notice of Award is to approve carryover of unobligated funds in the amount of \$119,696 from budget period 01 to budget period 02. This is in response to a request submitted by your organization dated February 28, 2018. These funds have been distributed as indicated in the approved budget of this Notice of Award.

Unobligated funds in the amount of \$119,696 have been applied to this award. Please note that if the actual amount of available unobligated funds is less than the amount used in this action, the total approved budget may be reduced by the difference in a subsequent award action, thus reducing the amount of the current award.

These funds are approved for the current year budget period only with no commitment for continued support in future budget periods.

**NOTE 2**: Please be advised that the recipient must exercise proper stewardship over Federal funds by ensuring that all costs charged to their cooperative agreement are allowable, allocable, necessary and reasonable.

**NOTE 3:** 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 include the NOFO and Award number on all correspondence

#### **CDC Contacts:**

LaQuanda Lewis, Grants Management Specialist Center for Disease Control and Prevention Office of Financial Resources Office of Grants Services 2960 Brandywine Rd Atlanta GA 30341

Email: <a href="mailto:hrf6@cdc.gov">hrf6@cdc.gov</a> Phone: 770-488-2969

Brownie Anderson-Rana, Grants Management Officer Centers for Disease Control and Prevention Office of Financial Resources Office of Grants Services Telephone: 770-488-2771

Email: fli2@cdc.gov