**Title of Project (or Program):** Improving the Health of People with Mobility Limitations and Intellectual Disabilities through State-based Public Health Programs

### 9a. Grantee Name and Address
Missouri Dept. of Health and Senior Services/DSS&R
920 Wildwood Dr
Jefferson City, MO 65109-5796

### 9b. Grantee Project Director
Mr. Steve Cramer
930 Wildwood Dr
Jefferson City, MO 65109-5796
Phone: 573-522-2806

### 10a. Grantee Authorizing Official
Mr. Bret743162 Fischer
920 WILLOWOOD DR
JEFFERSON CITY, MO 65109-5796
Phone: 573-751-6014

### 10b. Federal Project Officer
Mary Helen Witten
Centers for Disease Control and Prevention
CCHP/NCDDD/DHDD
Atlanta, GA 30333
Phone: 404-498-3023

---

### 11. Approved Budget (Excludes Direct Assistance)

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial Assistance from the Federal Awarding Agency Only</td>
<td>0.00</td>
</tr>
<tr>
<td>Total project costs including grant funds and all other financial participation</td>
<td></td>
</tr>
<tr>
<td>a. Salaries and Wages</td>
<td>28,013.00</td>
</tr>
<tr>
<td>b. Fringe Benefits</td>
<td>14,007.00</td>
</tr>
<tr>
<td>c. Total Personnel Costs</td>
<td>42,020.00</td>
</tr>
<tr>
<td>d. Equipment</td>
<td>0.00</td>
</tr>
<tr>
<td>e. Supplies</td>
<td>263.00</td>
</tr>
<tr>
<td>f. Travel</td>
<td>3,161.00</td>
</tr>
<tr>
<td>g. Construction</td>
<td>0.00</td>
</tr>
<tr>
<td>h. Other</td>
<td>6,053.00</td>
</tr>
<tr>
<td>i. Contractual</td>
<td>88,586.00</td>
</tr>
<tr>
<td>j. TOTAL DIRECT COSTS</td>
<td>140,083.00</td>
</tr>
<tr>
<td>k. INDIRECT COSTS</td>
<td>9,917.00</td>
</tr>
<tr>
<td>l. TOTAL APPROVED BUDGET</td>
<td>150,000.00</td>
</tr>
</tbody>
</table>

### 12. Award Computation
- **a. Amount of Federal Financial Assistance (from item 11m)** 150,000.00
- **b. Less Unobligated Balance From Prior Budget Periods** 0.00
- **c. Less Cumulative Prior Award(s) This Budget Period** 150,000.00
- **d. Amount of Financial Assistance This Action** 0.00

### 13. Total Federal Funds Awarded to Date for Project Period
300,000.00

### 14. Recommended Future Support

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Direct Costs</th>
<th>Year</th>
<th>Total Direct Costs</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>6,053.00</td>
<td>5</td>
<td>300,000.00</td>
</tr>
<tr>
<td>3</td>
<td>150,000.00</td>
<td>6</td>
<td>150,000.00</td>
</tr>
<tr>
<td>4</td>
<td>0.00</td>
<td>7</td>
<td>0.00</td>
</tr>
</tbody>
</table>

### 15. Program Income Shall Be Used in Accord with One of the Following Alternatives:
- **a. Deduction**
- **b. Additional Costs**
- **c. Matching**
- **d. Other Research (Add / Deduct Option)**
- **e. Other (See Remarks)**

### 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:
- **a. The Grant Program Legislation**
- **b. The Grant Program Regulations**
- **c. The Award Notice Including Terms and Conditions, if Any, Noted Below Under Remarks**
- **d. Federal Administrative Requirements, Cost Principles and Audit Requirements Applicable to the Grant**

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.

### Remarks
(Other Terms and Conditions Attached - Yes [X] No)
Approval of Response to Technical Review.

---

### Grants Management Official
Roslyn Curington, Grants Management Officer
<table>
<thead>
<tr>
<th>Reporting Period Start Date</th>
<th>Reporting Period End Date</th>
<th>Reporting Type</th>
<th>Reporting Period Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/2016</td>
<td>06/30/2017</td>
<td>Annual</td>
<td>09/28/2017</td>
</tr>
<tr>
<td>07/01/2017</td>
<td>06/30/2018</td>
<td>Annual</td>
<td>09/28/2018</td>
</tr>
</tbody>
</table>
1. Terms and Conditions
FUNDING OPPORTUNITY ANNOUNCEMENT (FOA) NUMBER: DD16-1603
GRANT #NU27DD000013
Revision 1

ADDITIONAL TERMS AND CONDITIONS OF THIS AWARD

SUMMARY STATEMENT: The purpose of this revised Notice of Award (NOA) is to retroactively approve the responses to the summary statement dated September 7, 2016. This request has been reviewed and approved.

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 award remain in effect throughout the budget period unless otherwise changed in writing, by the Grants Management Officer.

PLEASE REFERENCE YOUR AWARD NUMBER ON ALL CORRESPONDENCE.

LaShanda Washington, MPH
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)
LNWashington@cdc.gov I 770-488-2766

Stephanie Latham
Grants Management Officer (GMO)
Office of Grants Services (OGS)
Office of Financial Resources (OFR)
Office of the Chief Operating Officer (OCOO)
Centers for Disease Control and Prevention (CDC)
FZV6@cdc.gov I 770-488-2917