<table>
<thead>
<tr>
<th>DATE ISSUED</th>
<th>MM/DD/YYYY</th>
</tr>
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<td>01/07/2019</td>
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</table>

**1a. SUPERSEDES AWARD NOTICE dated 06/15/2018**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

Centers for Disease Control and Prevention
CDC Office of Financial Resources

1600 Clifton Road
Atlanta, GA 30329

**NOTICE OF AWARD**

AUTHORIZATION (Legislation/Regulations)

---

**8. 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**

HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF
920 Wildwood Dr
- DUP6
Jefferson City, MO 65109-5796

**9b. GRANTEE PROJECT DIRECTOR**

Mr. Steve Cramer
930 Wildwood Dr
Jefferson City, MO 65109-5796
Phone: 573-522-2806

---

**11. APPROVED BUDGET (Excludes Direct Assistance)**

<table>
<thead>
<tr>
<th>OBJECT CLASS</th>
<th>AMOUNT OF FINANCIAL ASSISTANCE</th>
<th>TOTAL DIRECT COSTS</th>
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<tr>
<td>41.51</td>
<td>450,000.00</td>
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**12. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION**

<table>
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<tr>
<th>ACTION TYPE</th>
<th>AMOUNT</th>
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<tbody>
<tr>
<td>Post Award Amendment</td>
<td>150,000.00</td>
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</table>

**13. Total Federal Funds Awarded to Date for Project Period**

450,000.00

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**14. RECOMMENDED FUTURE SUPPORT**

(Subject to the availability of funds and satisfactory progress of the project):

---

**15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:**

---

**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:**

---

**17. OBJ CLASS | 41.51**

**18a. VENDOR CODE**

**18b. EIN**

**19. DUNS**

**20. CONG. DIST.**

---

**GRANTS MANAGEMENT OFFICIAL:**

Patricia French, Grants Management Officer
2960 Brandonville Road
Mableton E09
Atlanta, GA 30341
Phone: 770-488-2849

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# Federal Financial Report Cycle

<table>
<thead>
<tr>
<th>Reporting Period Start Date</th>
<th>Reporting Period End Date</th>
<th>Reporting Type</th>
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<td>09/28/2017</td>
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<td>07/01/2017</td>
<td>06/30/2018</td>
<td>Annual</td>
<td>09/28/2018</td>
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<tr>
<td>07/01/2018</td>
<td>06/30/2019</td>
<td>Annual</td>
<td>09/28/2019</td>
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</tbody>
</table>
1. Terms and Conditions
**ADDITIONAL TERMS AND CONDITIONS OF AWARD**

**Technical Review:** The purpose of this amended Notice of Award is to approve the response to the Technical Review submitted by your organization dated July 31, 2018.

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 | 770-488-2766

Patricia French  
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)  
PFrench@cdc.gov | 770-488-2849