1. DATE ISSUED MM/D 03/14/2018	93.283	3. ASSISTANCE TYPE Cooperative Agreement			
1a. SUPERSEDES AWARD NOTICE dated 07/20/2017 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded					
4. GRANT NO. 6 NU500E00 Formerly 111500		5. ACTION TYPE Post Award Amendment			
6. PROJECT PERIOD From	<i>MM/DD/YYYY</i> 09/01/2015	<i>MM/DD/YYYY</i> <b>Through</b> 08/31/2019			
7. BUDGET PERIOD From	MM/DD/YYYY 09/01/2017	MM/DD/YYYY Through 08/31/2018			

#### **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) 42 USC 241 31 USC 6305 42 CFR 52

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

MISSOURI: NATIONAL SYNDROMIC SURVEILLANCE PROGRAM

#### 9a. GRANTEE NAME AND ADDRESS 9b. GRANTEE PROJECT DIRECTOR Missouri Dept. of Health and Senior Services/DSS&R Mr. Linton H Bartlett 920 Wildwood Dr P.O. BOX 570 Jefferson City, MO 65109-5796 930 WILDWOOD DRIVE JEFFERSON CITY, MO 65102-0570 Phone: 573-751-6407 10a. GRANTEE AUTHORIZING OFFICIAL 10b. FEDERAL PROJECT OFFICER Kim Raymond Ms. Patricia Bedell 1600 Clifton Rd 920 WILDWOOD DR Atlanta, GA 30333 Division of Administration Phone: 404-498-6531 JEFFERSON CITY, MO 65109-5796 Phone: 573-751-6014 ALL AMOUNTS ARE SHOWN IN USD 11. APPROVED BUDGET (Excludes Direct Assistance) 12. AWARD COMPUTATION 141,013.00 I Financial Assistance from the Federal Awarding Agency Only a. Amount of Federal Financial Assistance (from item 11m) ı 0.00 II Total project costs including grant funds and all other financial participation b. Less Unobligated Balance From Prior Budget Periods c. Less Cumulative Prior Award(s) This Budget Period 141,013.00 Salaries and Wages ..... a. 60.305.00 d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 0.00 Fringe Benefits b. 29,378.00 13. Total Federal Funds Awarded to Date for Project Period 423,039.00 **Total Personnel Costs** C. 14. RECOMMENDED FUTURE SUPPORT

89,683.00 (Subject to the availability of funds and satisfactory progress of the project): Equipment d. 0.00 YEAR Supplies e. 20,373.00 a. 4 Travel 6,953.00 b. 5 Construction q. с. б ...... 0.00 15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES: Other 2,839.00 Contractual 0.00 TOTAL DIRECT COSTS 119,848.00 INDIRECT COSTS 21,165.00 **TOTAL APPROVED BUDGET** 141,013.00 Federal Share 141,013.00

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:

YEAR

d. 7

e. 8

f. 9

TOTAL DIRECT COSTS

b

DEDUCTION

ADDITIONAL COSTS

TOTAL DIRECT COSTS

MATCHING
OTHER RESEARCH (Add / Deduct Option)
OTHER (See REMARKS)

- The grant program legislation The grant program regulations. This award notice including terms and conditions, if any, noted below under REMARKS. Federal administrative requirements, cost principles and audit requirements applicable to this 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 -

Non-Federal Share

**X** Yes

No)

0.00

Tiffany Mannings GRANTS MANAGEMENT OFFICIAL:

17. OBJ CLASS 41.51	18a. VENDOR CODE	18b. E	IN	19. DUNS 878092600	20. CONG. DIST. 03
FY-ACCOUNT NO.	DOCUMENT NO.	CFDA	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
21. a. 7-93904SH	b. 0000770E15	c. 93.283	d. OE	e. \$0.00	f. 75-17-0956
22. a.	b.	C.	d.	e.	f.
23. a.	b.	C.	d.	e.	f.

# NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of	3	DATE ISSUED
		03/14/2018
GRANT NO. 6 NUS		500E000077-03-01

# **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)

PAGE 3 of	3	DATE ISSUED
		03/14/2018
GRANT NO. 6 NU500E000077-03-01		

Federal Financial Report Cycle					
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date		
09/01/2015	08/31/2016	Annual	11/29/2016		
09/01/2016	08/31/2017	Annual	11/29/2017		
09/01/2017	08/31/2018	Annual	11/29/2018		

# **AWARD ATTACHMENTS**

Missouri Dept. of Health and Senior Services/DSS&R

6 NU50OE000077-03-01

1. Terms and Conditions

Funding Opportunity Announcement (FOA) Number: OE15-1502

Award Number: 6 NU50OE000077 Award Type: Cooperative Agreement

#### TERMS AND CONDITIONS OF THIS AWARD

Applicable Regulations: 45 Code of Federal Regulations (CFR) Part 75, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards.

45 CFR Part 75 supersedes regulations at 45 CFR Part 74 and Part 92.

The purpose of this amendment is to approve the Authorizing/Business Official change to Patricia Bedell. This is in response to the request submitted by your organization dated December 18, 2017.

Please be advised that recipient must exercise proper stewardship over Federal Funds by ensuring that all costs charged to their cooperative agreement are allowable, allocable, and reasonable.

All other terms and conditions issued with this award remain in full effect, unless otherwise changed, in writing, by the Grants Management Officer.

### **Grants Management Officer**

Tiffany Mannings, Grants Management Officer Centers for Disease Control and Prevention KOGR Bldg Stanford Atlanta, GA 30341

Telephone: 770-488-2515 E-Mail: YUO7@CDC.GOV

### **Grants Management Specialist**

Lisa DeBouse, Grants Management Specialist Centers for Disease Control and Prevention KOGR Bldg Stanford Atlanta, GA 30341

Telephone: 770-488-3198 E-Mail: WZN5@CDC.GOV

## **Programmatic Contact**

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