**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)  
301(A)AND317(K)(2)PHS42USC241(A)247B(K)2

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**PROJECT**  
ACTIONS TO PREVENT CHRONIC DISEASE & CONTROL RISK FACTOR

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**9a. GRANTEE NAME AND ADDRESS**  
MISSOURI STATE DEPT/ HEALTH & SENIOR SRV  
PO BOX 570  
MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
Jefferson City, MO 65102-0570

**9b. GRANTEE PROJECT DIRECTOR**  
Mr. Steve Cramer  
930 Wildwood Dr  
Jefferson City, MO 65109-5796  
Phone: 573-522-2806

**9c. GRANTEE AUTHORIZING OFFICIAL**  
Ms. Patricia Bedell  
920 WILLOW DR  
Division of Administration  
JEFFERSON CITY, MO 65109-5796  
Phone: 573-751-6014

**10b. FEDERAL PROJECT OFFICER**  
Christopher Kissler  
4770 Buford Hwy  
Chamblee, GA 30341  
Phone: 770-488-5374

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

<table>
<thead>
<tr>
<th>Financial Assistance from the Federal Awarding Agency Only</th>
<th>Total project costs including grant funds and all other financial participation</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Salaries and Wages</td>
<td>0.00</td>
</tr>
<tr>
<td>b. Fringe Benefits</td>
<td>0.00</td>
</tr>
<tr>
<td>c. Total Personnel Costs</td>
<td>0.00</td>
</tr>
<tr>
<td>d. Equipment</td>
<td>0.00</td>
</tr>
<tr>
<td>e. Supplies</td>
<td>0.00</td>
</tr>
<tr>
<td>f. Travel</td>
<td>0.00</td>
</tr>
<tr>
<td>g. Construction</td>
<td>0.00</td>
</tr>
<tr>
<td>h. Other</td>
<td>0.00</td>
</tr>
<tr>
<td>i. Contractual</td>
<td>0.00</td>
</tr>
<tr>
<td>j. TOTAL DIRECT COSTS</td>
<td>0.00</td>
</tr>
<tr>
<td>k. INDIRECT COSTS</td>
<td>0.00</td>
</tr>
<tr>
<td>l. TOTAL APPROVED BUDGET</td>
<td>0.00</td>
</tr>
<tr>
<td>m. Federal Share</td>
<td>0.00</td>
</tr>
<tr>
<td>n. Non-Federal Share</td>
<td>0.00</td>
</tr>
</tbody>
</table>

**12. AWARD COMPUTATION**

- a. Amount of Federal Financial Assistance (from item 11m)  
  0.00
- b. Less Unobligated Balance From Prior Budget Periods  
  -2,119,064.00
- c. Less Cumulative Prior Award(s) This Budget Period  
  2,119,064.00
- d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION  
  0.00
- 13. Total Federal Funds Awarded to Date for Project Period  
  10,789,997.00

**14. RECOMMENDED FUTURE SUPPORT**

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

<table>
<thead>
<tr>
<th>YEAR</th>
<th>TOTAL DIRECT COSTS</th>
<th>YEAR</th>
<th>TOTAL DIRECT COSTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. 6</td>
<td></td>
<td>d. 9</td>
<td></td>
</tr>
<tr>
<td>b. 7</td>
<td></td>
<td>e. 10</td>
<td></td>
</tr>
<tr>
<td>c. 8</td>
<td></td>
<td>f. 11</td>
<td></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. This 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.

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**REMARKS**  
(Other Terms and Conditions Attached -  
Yes  
No)

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**GRANTS MANAGEMENT OFFICIAL:** Kang Lee

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**17. OBJ CLASS**  
41.51  
18a. VENDOR CODE  
18b. EIN

<table>
<thead>
<tr>
<th>FY-ACCOUNT NO.</th>
<th>DOCUMENT NO.</th>
<th>CFDA</th>
<th>ADMINISTRATIVE CODE</th>
<th>AMT ACTION FIN ASST</th>
<th>APPROPRIATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>21a. 7-921ZSSG</td>
<td>b. 004817DP14BASII17</td>
<td>c. 93.945</td>
<td>d. DP</td>
<td>e. 50.00</td>
<td>f. 75-17-0948</td>
</tr>
<tr>
<td>22a. 7-939013H</td>
<td>b. 004817DP14BASII17</td>
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<td>23a. 7-93903P0</td>
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<td>c. 93.945</td>
<td>d. DP</td>
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<td>f. 75-17-0948</td>
</tr>
</tbody>
</table>
### Direct Assistance

<table>
<thead>
<tr>
<th>BUDGET CATEGORIES</th>
<th>PREVIOUS AMOUNT (A)</th>
<th>AMOUNT THIS ACTION (B)</th>
<th>TOTAL (A + B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Fringe Benefits</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Travel</td>
<td>$0.00</td>
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<tr>
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<td>$0.00</td>
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<tr>
<td>Other</td>
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</tr>
<tr>
<td>Total</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>
1. Terms and Conditions
ADDITIONAL TERMS AND CONDITIONS OF AWARD

Key Personnel: The purpose of this amendment is to approve the Authorizing Business Official change from Mr. Bret Fischer to Ms. Patricia (Pat) Bedell. This is in response to the request submitted by your organization dated December 21, 2017.

Key Personnel: The purpose of this amendment is to approve the Domain 2 Lead change from Karen Wallace to Pat Simmons. This is in response to the request submitted by your organization dated January 8, 2018.

Monique McEwen  
Grants Management Specialist  
Office of Grant Services (OGS)  
Office of Financial Resources (OFR)  
Office of the Chief Operating Officer (OCOO)  
Centers for Disease Control and Prevention (CDC)  
mmcewen@cdc.gov | 770-488-2617 office

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