

1. DATE ISSUED MM/DD/YYYY 01/10/2020		1a. SUPERSEDES AWARD NOTICE dated 07/03/2019 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded	
2. CFDA No. 93.735			
3. ASSISTANCE TYPE Cooperative Agreement			
4. GRANT NO. 6 NU58DP005328-04-08 Formerly 1U58DP005328-01		5. TYPE OF AWARD Other	
4a. FAIN NU58DP005328		5a. ACTION TYPE Post Award Amendment	
6. PROJECT PERIOD MM/DD/YYYY From 08/01/2014		Through 04/28/2020	
7. BUDGET PERIOD MM/DD/YYYY From 08/01/2017		Through 04/28/2020	

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

CDC Office of Financial Resources

2939 Brandywine Road
Atlanta, GA 30341

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
Section 4002 of the Affordable Care Act, Prevention and Public Health
Fund.

8. TITLE OF PROJECT (OR PROGRAM)
PPHF 14 STATE PUBLIC HEALTH APPROACHES FOR ENSURING QUITLINE CAPACITY

9a. GRANTEE NAME AND ADDRESS HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF 920 Wildwood Dr Jefferson City, MO 65109-5796	9b. GRANTEE PROJECT DIRECTOR Mr. Steve Cramer 930 Wildwood Dr Jefferson City, MO 65109-5796 Phone: 5735222806
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10a. GRANTEE AUTHORIZING OFFICIAL Ms. Marcia Mahaney 920 WILDWOOD DR JEFFERSON CITY, MO 65109-5796 Phone: 573-751-6014	10b. FEDERAL PROJECT OFFICER Daphne Kennebrew 1600 Clifton Rd Atlanta, GA 30333 Phone: 404-639-8015
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ALL AMOUNTS ARE SHOWN IN USD

11. APPROVED BUDGET (Excludes Direct Assistance)		12. AWARD COMPUTATION			
I Financial Assistance from the Federal Awarding Agency Only		a. Amount of Federal Financial Assistance (from item 11m) 1,063,648.00			
II Total project costs including grant funds and all other financial participation		b. Less Unobligated Balance From Prior Budget Periods 0.00			
a. Salaries and Wages 0.00	I	c. Less Cumulative Prior Award(s) This Budget Period 1,063,648.00			
b. Fringe Benefits 0.00		d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 0.00			
c. Total Personnel Costs 0.00		13. Total Federal Funds Awarded to Date for Project Period 2,254,964.99			
d. Equipment 0.00		14. RECOMMENDED FUTURE SUPPORT			
e. Supplies 0.00		(Subject to the availability of funds and satisfactory progress of the project):			
f. Travel 3,176.00		YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT COSTS
g. Construction 0.00		a. 5		d. 8	
h. Other 0.00		b. 6		e. 9	
i. Contractual 1,060,472.00		c. 7		f. 10	
j. TOTAL DIRECT COSTS 1,063,648.00		15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:		b	
k. INDIRECT COSTS 0.00	a. DEDUCTION				
l. TOTAL APPROVED BUDGET 1,063,648.00		b. ADDITIONAL COSTS			
m. Federal Share 1,063,648.00		c. MATCHING			
n. Non-Federal Share 0.00		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 AWARING 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 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 - Yes No)

GRANTS MANAGEMENT OFFICIAL:

Stephanie Latham, Team Lead, Grants Management Officer
2939 Flowers Rd. South
TV-2
Atlanta, GA 30333
Phone: 770.488.2917

17. OBJ CLASS 41.51	18a. VENDOR CODE	18b. EIN	19. DUNS 878092600	20. CONG. DIST. 03	
FY-ACCOUNT NO.	DOCUMENT NO.	CFDA	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
21. a. 9-9390BU8	b. 16DP005328PPHF17	c. 93.735	d. DP	e. \$0.00	f. 75-X-0948
22. a.	b.	c.	d.	e.	f.
23. a.	b.	c.	d.	e.	f.

NOTICE OF AWARD (Continuation Sheet)

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GRANT NO. 6 NU58DP005328-04-08	

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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Federal Financial Report Cycle			
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date
08/01/2014	07/31/2015	Annual	10/29/2015
08/01/2015	07/31/2016	Annual	10/29/2016
08/01/2016	07/31/2017	Annual	10/29/2017
08/01/2017	07/31/2018	Annual	10/29/2018
08/01/2018	07/31/2019	Annual	10/29/2019
08/01/2019	04/28/2020	Annual	07/27/2020

AWARD ATTACHMENTS

Missouri Department of Health

6 NU58DP005328-04-08

1. ADDITIONAL TERMS AND CONDITIONS

ADDITIONAL TERMS AND CONDITIONS OF AWARD

Key Personnel: The purpose of this amendment is to approve the **Authorizing Official Representative** change to Ms. Marcia Mahaney, Director, Division of Administration, Department of Health and Senior Services. This is in response to the request submitted by your organization dated December 12, 2019.

GMS Contact:

Barbara Strother, Grants Management Specialist
Centers for Disease Control and Prevention
Chronic Disease and Birth Defects Service Branch
2939 Flowers Road, South MS-TV2 Atlanta, GA 30341
Telephone: 404-498-1275
Fax: 770-488-2640
Email: kty4@cdc.gov