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)
317(K)(2) 42 USC 247B(K)(2)

1. DATE ISSUED: 05/29/2018
2. CFDA NO.: 93.305
3. ASSISTANCE TYPE: Cooperative Agreement

1a. SUPERSEDES AWARD NOTICE dated 11/16/2017
   except that any additions or restrictions previously imposed remain in effect unless specifically rescinded

4. GRANT NO.: 6 NU58DP006006-03-03
   Formerly 1NU58DP006006-01
5. ACTION TYPE: Post Award Amendment

6. PROJECT PERIOD: MM/DD/YYYY
   From 03/29/2015 Through 03/28/2020
7. BUDGET PERIOD: MM/DD/YYYY
   From 03/29/2017 Through 03/28/2018

8. TITLE OF PROJECT (OR PROGRAM): TOBACCO CONTROL PROGRAM

9a. GRANTEE NAME AND ADDRESS:
    MISSOURI STATE DEPT/ HEALTH & SENIOR SRV
    920 Wildwood Dr
    Jefferson City, MO 65109-5796

9b. GRANTEE PROJECT DIRECTOR:
    Mr. Steve Cramer
    930 Wildwood Dr
    Jefferson City, MO 65109-5796
    Phone: 573-522-806

10a. GRANTEE AUTHORIZING OFFICIAL:
    Ms. Patricia Bedell
    920 WILDWOOD DR
    Division of Administration
    JEFFERSON CITY, MO 65109-5796
    Phone: 573-751-6014

10b. FEDERAL PROJECT OFFICER:
    Lorraine Reed
    4700 Buford Highway
    Chamblee, GA 30341
    Phone: 770-488-6586

11. APPROVED BUDGET (Excludes Direct Assistance):
   Financial Assistance from the Federal Awarding Agency Only
   Total project costs including grant funds and all other financial participation
   a. Salaries and Wages ................. 412,438.00
   b. Fringe Benefits .................... 206,219.00
   c. Total Personnel Costs ............ 618,657.00
   d. Equipment .......................... 0.00
   e. Supplies .......................... 2,500.00
   f. Travel ................................ 25,552.00
   g. Construction .......................... 0.00
   h. Other .......................... 47,124.00
   i. Contractual ......................... 451,420.00
   j. TOTAL DIRECT COSTS ............. 1,145,253.00
   k. INDIRECT COSTS .................... 132,352.00
   l. TOTAL APPROVED BUDGET .......... 1,277,605.00
   m. Federal Share ....................... 1,277,605.00
   n. Non-Federal Share .................. 0.00

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

   ALL AMOUNTS ARE SHOWN IN USD

12. AWARD COMPUTATION:
   a. Amount of Federal Financial Assistance (from item 11m) 1,277,605.00
   b. Less Unobligated Balance From Prior Budget Periods 146,961.00
   c. Less Cumulative Prior Award(s) This Budget Period 1,130,644.00
   d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 0.00

13. Total Federal Funds Awarded to Date for Project Period 4,567,849.00

14. RECOMMENDED FUTURE SUPPORT:
   (Subject to the availability of funds and satisfactory progress of the project):
   YEAR TOTAL DIRECT COSTS YEAR TOTAL DIRECT COSTS
   a. 4 ........................................ d. 7
   b. 5 ........................................ e. 8
   c. 6 ........................................ f. 9

   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 regulation
   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.

GRANTS MANAGEMENT OFFICIAL: Pamela Render

17. OBJ CLASS: 41.51
18a. VENDOR CODE: [Redacted]
18b. EIN: [Redacted]
19. DUNS: 878092600
20. CONG. DIST: 03

17a. FY-ACCOUNT NO.: 7-9392REN
17b. DOCUMENT NO.: 006006DP15
17c. CFDA: 93.305
17d. ADMINISTRATIVE CODE: DP
17e. AMT ACTION FIN ASS'T: 0.00
17f. APPROPRIATION: 75-17-0948
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>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Equipment</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Supplies</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Contractual</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Construction</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Other</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Total</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>
### Federal Financial Report Cycle

<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>03/29/2015</td>
<td>03/28/2016</td>
<td>Annual</td>
<td>06/26/2016</td>
</tr>
<tr>
<td>03/29/2016</td>
<td>03/28/2017</td>
<td>Annual</td>
<td>06/26/2017</td>
</tr>
<tr>
<td>03/29/2017</td>
<td>03/28/2018</td>
<td>Annual</td>
<td>06/26/2018</td>
</tr>
<tr>
<td>03/29/2018</td>
<td>03/28/2019</td>
<td>Annual</td>
<td>06/26/2019</td>
</tr>
</tbody>
</table>
1. Terms and Conditions
Key Personnel: The purpose of this amendment is to approve the *Authorizing Official Representative*, change to Patricia Bedell. This is in response to the request submitted by your organization dated December 21, 2017.