

1. DATE ISSUED MM/DD/YYYY 10/24/2018	2. CFDA NO. 93.898	3. ASSISTANCE TYPE Cooperative Agreement
---	-----------------------	---

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
CDC Office of Financial Resources
1600 Clifton Road
Atlanta, GA 30329

1a. SUPERSEDES AWARD NOTICE dated 10/15/2018
except that any additions or restrictions previously imposed remain in effect unless specifically rescinded

4. GRANT NO. 6 NU58DP006299-02-04 Formerly	5. ACTION TYPE Post Award Amendment
--	--

6. PROJECT PERIOD MM/DD/YYYY From 06/30/2017	Through 06/29/2022
---	--------------------

7. BUDGET PERIOD MM/DD/YYYY From 06/30/2018	Through 06/29/2019
--	--------------------

NOTICE OF AWARD
AUTHORIZATION (Legislation/Regulations)
301(a) and 317(k)(2) of the Public Health Service Act, [42 U.S.C. Section 241(a) and 247b(k)(2)], as amended.

8. TITLE OF PROJECT (OR PROGRAM)
Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations

9a. GRANTEE NAME AND ADDRESS
HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF
Alternate Name: MISSOURI STATE DEPT/ HEALTH & SENIOR SRV
920 Wildwood Dr
Community and Public Health
Jefferson City, MO 65109-5796

9b. GRANTEE PROJECT DIRECTOR
Mr. Steve Cramer
930 Wildwood Dr
Jefferson City, MO 65109-5796
Phone: 5735222806

10a. GRANTEE AUTHORIZING OFFICIAL
Ms. Tonya R Loucks
920 WILDWOOD DR
Jefferson City, MO 65109-5796
Phone: 573-751-6014

10b. FEDERAL PROJECT OFFICER
Valerie Richmond-Reese
4770 Buford Highway
Chamblee, GA 30341
Phone: 770-488-3694

ALL AMOUNTS ARE SHOWN IN USD

11. APPROVED BUDGET (Excludes Direct Assistance)	
I Financial Assistance from the Federal Awarding Agency Only	<input type="checkbox"/>
II Total project costs including grant funds and all other financial participation	<input checked="" type="checkbox"/>
a. Salaries and Wages	614,322.00
b. Fringe Benefits	319,660.00
c. Total Personnel Costs	933,982.00
d. Equipment	0.00
e. Supplies	6,185.00
f. Travel	20,536.00
g. Construction	0.00
h. Other	120,352.00
i. Contractual	2,901,818.00
j. TOTAL DIRECT COSTS →	3,982,873.00
k. INDIRECT COSTS	236,318.00
l. TOTAL APPROVED BUDGET	4,219,191.00
m. Federal Share	4,219,191.00
n. Non-Federal Share	3,025,512.00

12. AWARD COMPUTATION	
a. Amount of Federal Financial Assistance (from item 11m)	4,219,191.00
b. Less Unobligated Balance From Prior Budget Periods	0.00
c. Less Cumulative Prior Award(s) This Budget Period	4,219,191.00
d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	0.00
13. Total Federal Funds Awarded to Date for Project Period	8,438,382.00

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. 3		d. 6	
b. 4		e. 7	
c. 5		f. 8	

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)	<input checked="" type="checkbox"/>

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:

- 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 - Yes No)

GRANTS MANAGEMENT OFFICER Pamela Render

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. 8-921Z1RU	b. 17NU58DP006299	c. 93.898	d. DP	e. \$0.00	f. 75-18-0948
22. a. 8-9390539	b. 17NU58DP006299	c. 93.898	d. DP	e. \$0.00	f. 75-18-0948
23. a. 8-9390540	b. 17NU58DP006299	c. 93.898	d. DP	e. \$0.00	f. 75-18-0948

NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of 3	DATE ISSUED 10/24/2018
GRANT NO. 6 NU58DP006299-02-04	

FY-ACCOUNT NO.	DOCUMENT NO.	CFDA	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
24.a. 8-9390541	b. 17NU58DP006299	c. 93.898	d. DP	e. \$0.00	f. 75-18-0948
25.a. 8-9390542	b. 17NU58DP006299	c. 93.898	d. DP	e. \$0.00	f. 75-18-0948
26.a. 8-9390543	b. 17NU58DP006299	c. 93.898	d. DP	e. \$0.00	f. 75-18-0948
27.a. 8-939ZRBL	b. 17NU58DP006299	c. 93.898	d. DP	e. \$0.00	f. 75-18-0948

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 10/24/2018
GRANT NO. 6 NU58DP006299-02-04	

Federal Financial Report Cycle			
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date
06/30/2017	06/29/2018	Annual	09/27/2018
06/30/2018	06/29/2019	Annual	09/27/2019

AWARD ATTACHMENTS

MISSOURI STATE DEPT/ HEALTH & SENIOR SRV

6 NU58DP006299-02-04

1. Contractor approval terms and conditions

ADDITIONAL TERMS AND CONDITIONS OF AWARD

**FUNDING OPPORTUNITY ANNOUNCEMENT (FOA) NUMBER: DP17-1701
6 NU58DP006299-02-04**

Contract/Consultant: The purpose of this amended Notice of Award is to acknowledge receipt of all required elements for the Contract/Consultant(s) below. This approval is in response to the request submitted by your organization dated October 9, 2018.

Contractor 1: McDonald County Health Department

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

All other terms and conditions issued with the original Notice of Award remain in effect throughout the budget period unless changed, in writing, by the CDC Grants Management Officer.

PLEASE REFERENCE THE GRANT NUMBER ON ALL CORRESPONDENCE.

OGS Contact:

Pamela Render

Grants Management Specialist
Office of Grants Services (OGS)
Office of Financial Resources (OFR)
Office of the Chief Operating Officer (OCOO)
Centers for Disease Control and Prevention (CDC)
PRender@cdc.gov | 770-488-2712 office |