Notice of Award

Award# 6 NU58DP007546-01-01

FAIN# NU58DP007546

Federal Award Date: 01/12/2024

Recipient Information

1. Recipient Name

MISSOURI DEPARTMENT OF HEALTH &

SENIOR SERVICES

920 Wildwood Dr

Jefferson City, MO 65109-5796

[NO DATA]

2. Congressional District of Recipient

3. Payment System Identifier (ID)

1446000987B7

4. Employer Identification Number (EIN)

446000987

5. Data Universal Numbering System (DUNS)

6. Recipient's Unique Entity Identifier (UEI)

UETLXV8NG8F4 7. Project Director or Principal Investigator

Ms. Sarah R Young MS, RD, LD

MO Physical Activity & Nutrition Program Manager

sarah.young@health.mo.gov

573-751-7109

8. Authorized Official

Ms. Marcia Mahaney

Grants@health.mo.gov

573-751-6014

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Mr. Daniel Jackson

Grants Management Specialist

qpz2@cdc.gov

(678) 475-4577

10.Program Official Contact Information

Everett Jackson

Public Health Advisor

pvw4@cdc.gov

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Federal Award Information

11. Award Number

6 NU58DP007546-01-01

12. Unique Federal Award Identification Number (FAIN)

NU58DP007546

13. Statutory Authority

Public Health Service Act, as amended, Section 301(a) and Section 317K, 42 U.S.C. 241(a); 42 U.S.C. 247b-

14. Federal Award Project Title

Missouri Physical Activity and Nutrition Program (MPAN)

15. Assistance Listing Number

16. Assistance Listing Program Title

State Physical Activity and Nutrition (SPAN)

17. Award Action Type

Budget Revision

18. Is the Award R&D?

21. Authorized Carryover

Summary Federal Award Financial Information

19. Budget Period Start Date 09/30/2023 - End Date 09/29/2024

ı	20. Total Amount of Federal Funds Obligated by this Action	\$0.00
	20a. Direct Cost Amount	(\$73,649.40)
ı	20b. Indirect Cost Amount	\$73,649.40

22. Offset

23. Total Amount of Federal Funds Obligated this budget period

\$888,000.00 24. Total Approved Cost Sharing or Matching, where applicable \$0.00

25. Total Federal and Non-Federal Approved this Budget Period \$888,000.00

26. Period of Perfomance Start Date 09/30/2023 - End Date 09/29/2028

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance

\$888,000.00

\$0.00

\$0.00

\$0.00

\$73,649.40

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Stephanie Latham

30. Remarks

Notice of Award

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Recipient Information

Recipient Name

MISSOURI DEPARTMENT OF HEALTH &

SENIOR SERVICES

920 Wildwood Dr

-DUP

Jefferson City, MO 65109-5796

[NO DATA]

Congressional District of Recipient

03

Payment Account Number and Type

1446000987B7

Employer Identification Number (EIN) Data

446000987

Universal Numbering System (DUNS)

272002600

Recipient's Unique Entity Identifier (UEI)

UETLXV8NG8F4

31. Assistance Type

Cooperative Agreement

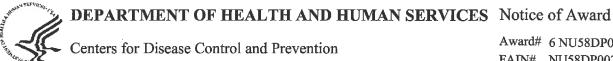
32. Type of Award

Other

I. Financial Assistance from the Federal Awardi	ng Agency Only
II. Total project costs including grant funds an	d all other financial participation
a. Salaries and Wages	\$219,446.86
b. Fringe Benefits	\$134,636.79
c. TotalPersonnelCosts	\$354,083.65
d. Equipment	\$0.00
e. Supplies	\$600.00
f. Travel	\$38,941.50
g. Construction	\$0.00
h. Other	\$62,956.45
i. Contractual	\$357,769.00
j. TOTAL DIRECT COSTS	\$814,350.60
k. INDIRECT COSTS	\$73,649.40
l. TOTAL APPROVED BUDGET	\$888,000.00
m. Federal Share	\$888,000,00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes

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	FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
	3-921047C	23NU58DP007546	DP	410Q	93.439	\$0.00	75-23-0948



Award# 6 NU58DP007546-01-01 FAIN# NU58DP007546

Federal Award Date: 01/12/2024

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

AWARD ATTACHMENTS

MISSOURI DEPARTMENT OF HEALTH & SENIOR SERVICES

6 NU58DP007546-01-01

1. Terms and Conditions

ADDITIONAL TERMS AND CONDITIONS OF AWARD

Revised Budget: The purpose of this amended Notice of Award is to approve the **revised budget request** submitted by your organization dated November 13, 2023. Funds have been distributed as indicated in the approved budget of this Notice of Award.

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 **13 November 2023**.

Contractor 1: Southeast Missouri State University

Contractor 2: Health Literacy Media

Missing Contractual/Consultant Elements – The contract(s)/consultant(s) listed below are approved, however, the recipient must provide *Name of Contractor*, via GrantSolutions as a Grant Note prior to beginning work on the contract.

Consultant 1: State University or other government entity, TBD

Consultant 2: Local Public Health Agencies or Local Organizations, TBD

Consultant 3: Community sites and Producers, Regional Planning Commissions (RPCs), various TBD

Consultant 4: Breastfeeding support organizations, TBD

Consultant 5: Baby-Friendly Hospital Collaborative Professional and Mentor Speakers, various TBD

Consultant 6: Worksites, various TBD

Consultant 7: ECE providers, various TBD

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