



Recipient Information

1. Recipient Name

MISSOURI DEPARTMENT OF HEALTH & SENIOR SERVICES
920 Wildwood Dr
-DUP
Jefferson City, MO 65109-5796
[NO DATA]

2. Congressional District of Recipient

03

3. Payment System Identifier (ID)

1446000987B7

4. Employer Identification Number (EIN)

446000987

5. Data Universal Numbering System (DUNS)

878092600

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
1111111111

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-12

14. Federal Award Project Title

Missouri Physical Activity and Nutrition Program (MPAN)

15. Assistance Listing Number

93.439

16. Assistance Listing Program Title

State Physical Activity and Nutrition (SPAN)

17. Award Action Type

Budget Revision

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date	09/30/2023	- End Date	09/29/2024
20. Total Amount of Federal Funds Obligated by this Action			\$0.00
20a. Direct Cost Amount			(\$73,649.40)
20b. Indirect Cost Amount			\$73,649.40
21. Authorized Carryover			\$0.00
22. Offset			\$0.00
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 Performance 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

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Stephanie Latham

30. Remarks



DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention

Notice of Award

Award# 6 NU58DP007546-01-01
FAIN# NU58DP007546
Federal Award Date: 01/12/2024

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) 878092600
Recipient's Unique Entity Identifier (UEI) UETLXV8NG8F4

31. Assistance Type Cooperative Agreement
32. Type of Award Other

33. Approved Budget (Excludes Direct Assistance)	
i. Financial Assistance from the Federal Awarding Agency Only	
ii. Total project costs including grant funds and all other financial participation	
a. Salaries and Wages	\$219,446.86
b. Fringe Benefits	\$134,636.79
c. Total Personnel Costs	\$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						
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



DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

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

