



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

Notice of Award

Award# 6 NU58DP007668-02-01

FAIN# NU58DP007668

Federal Award Date: 04/04/2025

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)
[REDACTED]

4. Employer Identification Number (EIN)
[REDACTED]

5. Data Universal Numbering System (DUNS)
878092600

6. Recipient's Unique Entity Identifier (UEI)
UETLXV8NG8F4

7. Project Director or Principal Investigator
KELLY PALERMO
KELLY.PALERMO@HEALTH.MO.GOV
5735222871

8. Authorized Official

Ms. Amy Blankenship
AOR & Interim Director, Division of Administration
amy.blankenship@health.mo.gov
753-526-9722

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Ms. Barbara Strother
Grant Management Specialist
kty4@cdc.gov
404-498-1275

10. Program Official Contact Information

Mr. William Tanner
Public Health Analyst
cwx1@cdc.gov
770-488-1786

Federal Award Information

11. Award Number

6 NU58DP007668-02-01

12. Unique Federal Award Identification Number (FAIN)

NU58DP007668

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 WISEWOMAN PROGRAM

15. Assistance Listing Number

93.436

16. Assistance Listing Program Title

WELL-INTEGRATED SCREENING AND EVALUATION FOR WOMEN ACROSS THE NATION
(WISEWOMAN)

17. Award Action Type

Change in Key Personnel

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date 09/30/2024 **- End Date** 09/29/2025

20. Total Amount of Federal Funds Obligated by this Action \$0.00

20a. Direct Cost Amount \$0.00

20b. Indirect Cost Amount \$0.00

21. Authorized Carryover \$0.00

22. Offset \$0.00

23. Total Amount of Federal Funds Obligated this budget period \$925,000.00

24. Total Approved Cost Sharing or Matching, where applicable \$343,296.00

25. Total Federal and Non-Federal Approved this Budget Period \$1,268,296.00

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 \$2,536,282.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Natasha Jones
Grants Management Officer

30. Remarks



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Jefferson City, MO 65109-5796

[NO DATA]

Congressional District of Recipient

03

Payment Account Number and Type

Employer Identification Number (EIN) Data

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	\$236,956.00
b. Fringe Benefits	\$146,856.00
c. Total Personnel Costs	\$383,812.00
d. Equipment	\$0.00
e. Supplies	\$2,869.00
f. Travel	\$9,352.00
g. Construction	\$0.00
h. Other	\$120,983.00
i. Contractual	\$407,984.00
j. TOTAL DIRECT COSTS	\$925,000.00
k. INDIRECT COSTS	\$0.00
l. TOTAL APPROVED BUDGET	\$925,000.00
m. Federal Share	\$925,000.00
n. Non-Federal Share	\$343,296.00

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
4-939ZRBH	23NU58DP007668	DP	410Q	93.436	\$0.00	75-24-0948



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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 NU58DP007668-02-01

1. ADDITIONAL 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 submitted by your organization dated March 25, 2025. Funds have been distributed as indicated in the approved budget of this Notice of Award.

Key Personnel: The purpose of this amendment is to approve the Authorizing Official Representative change to Ms. Amy Blankenship . This is in response to the request submitted by your organization dated March 25, 2025.