



**Recipient Information**

**1. Recipient Name**

HEALTH AND SENIOR SERVICES, MISSOURI  
DEPARTMENT OF  
PO BOX 570  
MISSOURI DEPARTMENT OF HEALTH AND  
SENIOR SERVICES  
Jefferson City, MO 65102-0570

**2. Congressional District of Recipient**  
04

**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**

Venkata Garikapaty  
Venkata.Garikapaty@health.mo.gov  
573-526-0452

**8. Authorized Official**

Ms. Marcia A Mahaney  
Director  
Marcia.Mahaney@health.mo.gov  
573-751-6014

**Federal Agency Information**

CDC Office of Financial Resources

**9. Awarding Agency Contact Information**

Dwayne Cooper  
yih4@cdc.gov  
770-488-2874

**10. Program Official Contact Information**

Sue Shaw  
ZGX7@cdc.gov  
770-488-6142

**Federal Award Information**

**11. Award Number**

6 U01DP006213-05-03

**12. Unique Federal Award Identification Number (FAIN)**

U01DP006213

**13. Statutory Authority**

Section 317K of the Public Health Service Act, [42 U.S.C. 247b-12], as amended

**14. Federal Award Project Title**

COMPONENT A - MISSOURI PREGNANCY RISK ASSESSMENT MONITORING SYSTEM

**15. Assistance Listing Number**

93.946

**16. Assistance Listing Program Title**

**17. Award Action Type**

Administrative Action

**18. Is the Award R&D?**

Yes

**Summary Federal Award Financial Information**

<b>19. Budget Period Start Date</b>	05/01/2020	- End Date	04/30/2021
<b>20. Total Amount of Federal Funds Obligated by this Action</b>			(\$25,802.39)
20a. Direct Cost Amount			(\$25,802.39)
20b. Indirect Cost Amount			\$0.00
<b>21. Authorized Carryover</b>			\$0.00
<b>22. Offset</b>			\$37,585.00
<b>23. Total Amount of Federal Funds Obligated this budget period</b>			\$134,465.00
<b>24. Total Approved Cost Sharing or Matching, where applicable</b>			\$0.00
<b>25. Total Federal and Non-Federal Approved this Budget Period</b>			\$108,662.61
<b>26. Period of Performance Start Date</b>	05/01/2016	- End Date	04/30/2021
<b>27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance</b>			\$961,111.61

**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

**29. Grants Management Officer - Signature**

Ms. Angie Willard  
Team Lead

**30. Remarks**



Award# 6 U01DP006213-05-03

FAIN# U01DP006213

Federal Award Date: 09/22/2022

<b>Recipient Information</b>	
<b>Recipient Name</b> HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF PO BOX 570 MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES Jefferson City, MO 65102-0570	
<b>Congressional District of Recipient</b> 04	
<b>Payment Account Number and Type</b> [REDACTED]	
<b>Employer Identification Number (EIN) Data</b> [REDACTED]	
<b>Universal Numbering System (DUNS)</b> 878092600	
<b>Recipient's Unique Entity Identifier (UEI)</b> UETLXV8NG8F4	
<b>31. Assistance Type</b> Cooperative Agreement	
<b>32. Type of Award</b> Research	

<b>33. Approved Budget</b> (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	\$62,394.82
b. Fringe Benefits	\$43,122.00
c. Total Personnel Costs	\$105,516.82
d. Equipment	\$0.00
e. Supplies	\$7,748.79
f. Travel	\$0.00
g. Construction	\$0.00
h. Other	\$5,072.00
i. Contractual	\$0.00
<b>j. TOTAL DIRECT COSTS</b>	<b>\$118,337.61</b>
<b>k. INDIRECT COSTS</b>	<b>\$27,910.00</b>
<b>l. TOTAL APPROVED BUDGET</b>	<b>\$146,247.61</b>
<b>m. Federal Share</b>	<b>\$146,247.61</b>
<b>n. Non-Federal Share</b>	<b>\$0.00</b>

<b>34. Accounting Classification Codes</b>						
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
0-9390FBT	16DP006213	DP	41 41	93 946	\$0 00	75-20-0844
0-939ZRDR	16DP006213	DP	41 41	93 946	\$0 00	75-20-0948
8-939ZREU	16DP006213	DP	41 41	93 946	\$0 00	75-18-0948
9-9390ATV	16DP00621318OCDP	DP	41 41	93 946	(\$24,902 18)	75-1819-0952
8-9390B42	16DP006213	DP	41 41	93 946	\$0 00	75-18-0844
8-9390ATV	16DP006213	DP	41 41	93 946	\$0 00	75-1819-0952
7-93907P2	17DP006213	DP	41 41	93 946	(\$900 21)	75-1617-0943

# AWARD ATTACHMENTS

HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF

6 U01DP006213-05-03

---

1. Terms and Conditions

## TERMS AND CONDITIONS OF THIS AWARD

**De-obligation of Funds:** The purpose of this amended Notice of Award is to de-obligate funds in the amount of \$24,902.18. This is in response to the FY22 HHS Closeout backlog.

**Payment Management System Unobligated Balances:** The recipient may no longer draw down funds associated with the award in the Payment Management System (PMS).

Unobligated funds were reported on the Final FFR for the document numbers below. Those funds have been de-obligated from the following document numbers in the amount of **\$24,902.18** as follows:

<b>Document Numbers</b>	<b>CAN</b>	<b>De-obligation Amount</b>
<b>16DP00621318OCDP</b>	<b>2019-9390ATV</b>	<b>\$24,902.18</b>

PLEASE REFERENCE YOUR AWARD NUMBER ON ALL CORRESPONDENCE

### **Grants Management Specialist/Officer**

Sharon Cassel  
Centers for Disease Control and Prevention (CDC)  
Office of Financial Resources (OFR)  
Office of Grants Services (OGS)  
Research Branch 2, Team 1  
Telephone Number: (770) 488-2703  
Email: [scassell@cdc.gov](mailto:scassell@cdc.gov)

### **Scientific Programmatic**

Sue Shaw, Health Scientist  
Centers for Disease Control  
National Center for Chronic Disease Prevention & Health  
Telephone: 770-488-6142  
Email: [zgx7@cdc.gov](mailto:zgx7@cdc.gov)

### **Grants Management Officer/Specialist**

Angie Willard, Grants Management Officer  
Centers for Disease Control and Prevention (CDC)  
Office of Financial Resources (OFR)  
Office of Grants Services (OGS)  
Research Branch 2, Team 1  
Telephone: 770-488-2863  
Email: [aen4@cdc.gov](mailto:aen4@cdc.gov)