



Recipient Information

1. Recipient Name

COUNTY OF FULTON
141 PRYOR ST SW
FULTON CNTY DEPT HLTH & WELLNESS
ATLANTA, GA 30303-3444
[NO DATA]

2. Congressional District of Recipient
05

3. Payment System Identifier (ID)
1586001729A1

4. Employer Identification Number (EIN)
586001729

5. Data Universal Numbering System (DUNS)
133894167

6. Recipient's Unique Entity Identifier (UEI)
J3Y1XYZYUFQ5

7. Project Director or Principal Investigator

Erika Williams-Walker
Behavioral Health Program Manager
erika.williams-walker@fultoncountyga.gov
404-613-1053

8. Authorized Official

Ms. LaTrina Foster
Director
latrina.foster@fultoncountyga.gov
404-612-1687

Federal Agency Information

OASH Grants and Acquisitions Management Division

9. Awarding Agency Contact Information

Mrs. Jessica Hall-Shields
Grants Specialist
Jessica.Shields@hhs.gov
240-453-8839

10. Program Official Contact Information

Mr. Alexis Leal
Project Officer
alexis.leal@hhs.gov
240-453-0490

Federal Award Information

11. Award Number

6 CPIMP211236-01-04

12. Unique Federal Award Identification Number (FAIN)

CPIMP211236

13. Statutory Authority

42 U.S.C. § 300u-6, (Section 1707 of the Public Health Service Act)

14. Federal Award Project Title

Fulton County DBHDD Advancing Health Literacy

15. Assistance Listing Number

93.137

16. Assistance Listing Program Title

Community Program to Improve Minority Health

17. Award Action Type

Budget Revision

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date	07/01/2021	- End Date	06/30/2024
20. Total Amount of Federal Funds Obligated by this Action			\$0.00
20a. Direct Cost Amount			\$18,466.00
20b. Indirect Cost Amount			(\$18,466.00)
21. Authorized Carryover			\$0.00
22. Offset			\$0.00
23. Total Amount of Federal Funds Obligated this budget period			\$3,900,000.00
24. Total Approved Cost Sharing or Matching, where applicable			\$0.00
25. Total Federal and Non-Federal Approved this Budget Period			\$3,900,000.00
26. Period of Performance Start Date	07/01/2021	- End Date	06/30/2024
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance			\$3,900,000.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Dr. Scott Moore
OASH Grants Management Officer

30. Remarks

This action approves the budget revision and has updated the line items. All prior terms and conditions remain in effect unless specifically removed.



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Congressional District of Recipient 05
Payment Account Number and Type 1586001729A1
Employer Identification Number (EIN) Data 586001729
Universal Numbering System (DUNS) 133894167
Recipient's Unique Entity Identifier (UEI) J3Y1XYZYUFQ5
31. Assistance Type Project Grant
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	\$904,082.00
b. Fringe Benefits	\$472,210.00
c. Total Personnel Costs	\$1,376,292.00
d. Equipment	\$346,000.00
e. Supplies	\$73,563.00
f. Travel	\$4,000.00
g. Construction	\$0.00
h. Other	\$171,570.00
i. Contractual	\$1,775,690.00
j. TOTAL DIRECT COSTS	\$3,747,115.00
k. INDIRECT COSTS	\$152,885.00
l. TOTAL APPROVED BUDGET	\$3,900,000.00
m. Federal Share	\$3,900,000.00
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
1-199CVBE	CPIMP1236C5	MPD-52	41.51	93.137	\$0.00	75-2122-0140