

1. DATE ISSUED (Mo./Day/Yr.) HELLO!		2. CFDA NO. HELLO!	
3. SUPERCEDES AWARD NOTICE dated HELLO! except that any additions or restrictions previously imposed remain in effect unless specifically rescinded			
4. GRANT NO. HELLO! Formerly: HELLO!		5. ADMINISTRATIVE CODES HELLO!	
6. PROJECT PERIOD Mo./Day/Yr. From HELLO!		Through HELLO!	
7. BUDGET PERIOD Mo./Day/Yr. From HELLO!		Through HELLO!	
8. TITLE OF PROJECT (OR PROGRAM) (Limit to 56 spaces) HELLO!			
9. GRANTEE NAME AND ADDRESS a. HELLO! b. HELLO! c. Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. d. HELLO! e. Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. f. HELLO!			
10. DIRECTOR OF PROJECT (PROGRAM DIRECTOR/PRINCIPLE INVESTIGATOR) (LAST NAME FIRST AND ADDRESS) HELLO! Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Phone: HELLO!			

11. APPROVED BUDGET (Excludes PHS Direct Assistance)		12. AWARD COMPUTATION FOR GRANT	
I PHS Grant Funds Only		a. Amount of PHS Financial Assistance (from item 11.u) HELLO!	
II Total project costs including grant funds and all other financial participation (Select one and place NUMERAL in box)		b. Less Unobligated Balance From Prior Budget Periods HELLO!	
a. Salaries and Wages HELLO!		c. Less Cumulative Prior Award(s) This Budget Period HELLO!	
b. Fringe Benefits HELLO!		d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION HELLO!	
c. Total Personnel Costs HELLO!		13. RECOMMENDED FUTURE SUPPORT (Subject to the availability of funds and satisfactory progress of the project):	
d. Consultants Costs HELLO!		YEAR TOTAL DIRECT COSTS YEAR TOTAL DIRECT COSTS	
e. Equipment HELLO!		a HELLO HELLO! d. HELLO HELLO!	
f. Supplies HELLO!		b HELLO HELLO! e. HELLO HELLO!	
g. Travel HELLO!		c. HELLO HELLO! f. HELLO HELLO!	
h. Patient Care – Inpatient HELLO!		14. APPROVED DIRECT ASSISTANCE BUDGET (IN LIEU OF CASH):	
i. Patient Care – Outpatient HELLO!		a. AMOUNT OF PHS Direct Assistance HELLO!	
j. Alterations and Renovations HELLO!		b. Less Unobligated Balance From Prior Budget Periods HELLO!	
k. Other HELLO!		c. Less Cumulative Prior Award(s) This Budget Period HELLO!	
l. Consortium/Contractual Costs HELLO!		d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION HELLO!	
m. Trainee Related Expenses HELLO!		15. PROGRAM INCOME SUBJECT TO 45 CFR PART 74, SUBPART F, OR 45 CFR 92.25, SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES: (Select one and place LETTER in box.)	
n. Trainee Stipends HELLO!		a. DEDUCTION	
o. Trainee Tuition and Fees HELLO!		b. ADDITIONAL COSTS	
p. Trainee Travel HELLO!		c. MATCHING	
q. TOTAL DIRECT COSTS HELLO!		d. OTHER RESEARCH (Add / Deduct Option)	
r. INDIRECT COSTS HELLO!		e. OTHER (See REMARKS)	
s. TOTAL APPROVED BUDGET \$ HELLO!		16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE PHS ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING: a. The grant program legislations cited above. b. The grant program regulation cited above. c. This award notice including terms and conditions, if any, noted below under REMARKS. d. PHS Grants Policy Statement including addenda in effect as of the beginning date of the budget period. e. 45 CFR Part 74 or 45 CFR Part 92 as applicable. In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.	
t. SBIR Fee HELLO!			
u. Federal Share \$ HELLO!			
v. Non-Federal Share \$ HELLO!			

REMARKS: (Other Terms and Conditions Attached - ☐ Yes ☐ No)

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PHS GRANTS MANAGEMENT OFFICER: (Signature) (Name – Typed/Print) (Title)
HELLO! HELLO!

17. OBJ CLASS	HELLO!	18. CRS - EIN	HELLO!	19. LIST NO.	HELLO!	CONG. DIST.:	HELLO!
FY-CAN		DOCUMENT NO.	ADMINISTRATIVE CODE	AMT ACTION FIN ASST		AMT ACTION DR ASST	
20. a.	HELLO!	b.	HELLO!	d.	HELLO!	e.	HELLO!
21. a.	HELLO!	b.	HELLO!	d.	HELLO!	e.	HELLO!
22. a.	HELLO!	b.	HELLO!	d.	HELLO!	e.	HELLO!