

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 04268]

HIV and TB Prevention and Care in Eastlands, Nairobi, Kenya; Notice of Intent To Fund Single Eligibility Award

A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the intent to fund fiscal year (FY) 2004 funds for a cooperative agreement program to provide a comprehensive AIDS prevention and care program in and around Eastlands, Nairobi, Kenya. The Catalog of Federal Domestic Assistance number for this program is 93.941.

B. Eligible Applicant

Assistance will be provided only to the Eastern Deanery AIDS Relief Program (EDARP).

Because of its long history and experience in providing TB and AIDS care in Eastlands, the EDARP is currently the only appropriate and qualified organization to conduct the specific activities needed to achieve the goals of this program. The EDARP has been serving the people of Eastlands and surrounding slums for more than 10 years through provision of TB and AIDS prevention and care. As a faith-based organization building on local church structures and involving volunteers from the church, EDARP has a unique and committed pool of staff, volunteers, and community leaders who can contribute to the success of this project. EDARP has demonstrated an ability to introduce new services when appropriate, including the introduction of VCT in 2001, TB preventive therapy in 2002, PMTCT in 2003, and on a very limited scale, ART in 2004. Because of EDARP's long tradition of serving members of all faiths in this disadvantaged community, EDARP enjoys the trust and confidence not only of the local community but also the local and national government. Thus, no other organization is capable of delivering the described services to this large, resource poor community.

C. Funding

Approximately \$5,000,000 is available in FY 2004 to fund this award. It is expected that the award will begin on or before August 15, 2004 and will be made for a 12-month budget period within a project period of up to five years. Funding estimates may change.

D. Where To Obtain Additional Information

For general comments or questions about this announcement, contact: Technical Information Management, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341-4146, telephone: 770-488-2700.

For technical questions about this program, contact: Barbara Marston, MD, Project Officer, Global Aids Program (GAP), Kenya Country Team, National Center for HIV, STD and TB Prevention, Centers for Disease Control and Prevention (CDC), PO Box 606 Village Market, Nairobi, Kenya, telephone: 256-20-271-3008, e-mail: emarum@cdcnairobi.mimcom.net.

Dated: July 2, 2004.

Alan A. Kotch,

Acting Director, Procurement and Grants Office, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Capacity Building To Support Local and Indigenous Organizations Providing HIV Prevention and Care in Kenya

Announcement Type: New.
Funding Opportunity Number: PA 04261.

Catalog of Federal Domestic Assistance Number: 93.941.

Key Dates: Application Deadline: August 9, 2004.

I. Funding Opportunity Description

Authority: This program is authorized under sections 307 and 317(k)(2) of the Public Health Service Act, (42 U.S.C. Sections 242l and 247b(k)(2)), as amended, and under Public Law 108-25 (United States Leadership Against HIV/AIDS, Tuberculosis and Malaria Act of 2003) (22 U.S.C. 7601).

Purpose: The Centers for Disease Control and Prevention (CDC) announces the availability for Fiscal Year (FY) 2004 funds for a cooperative agreement program to improve the capacity of, and provide support to, local and indigenous organizations in Kenya to enable them to provide a range of services, including: Voluntary counseling and testing (VCT); prevention of mother-to-child transmission (PMTCT); on-going treatment of HIV+ mothers (PMTCT+); prevention education and outreach,

including abstinence and faithfulness education; anti-retroviral treatment (ART); and palliative care.

The Global AIDS Program (GAP) has established field operations to support national HIV/AIDS control programs in 25 countries. The CDC's GAP exists to help prevent HIV infection, improve care and support, and build capacity to address the global AIDS pandemic. GAP provides financial and technical assistance through partnerships with governments, community- and faith-based organizations, the private sector, and national and international entities working in the 25 resource-constrained countries. CDC/GAP works with the Health Resources and Services Administration (HRSA), the National Institutes of Health (NIH), the U.S. Agency for International Development (USAID), the Peace Corps, the Departments of State, Labor and Defense, and other agencies and organizations. These efforts complement multilateral efforts, including UNAIDS, the Global Fund to Combat HIV, TB and Malaria, World Bank funding, and other private sector donation programs.

The U.S. Government seeks to reduce the impact of HIV/AIDS in specific countries within sub-Saharan Africa, Asia, and the Americas through the Presidential Emergency Plan for AIDS Relief (PEPFAR). Through this new initiative, CDC's GAP will continue to work with host countries to strengthen capacity and expand activities in the areas of: (1) Primary HIV prevention; (2) HIV care, support, and treatment; and (3) capacity and infrastructure development, especially for surveillance and training. Targeted countries represent those with the most severe epidemics where the potential for impact is greatest and where U.S. government agencies are already active. Kenya is one of these targeted countries.

To carry out its activities in these countries, CDC is working in a collaborative manner with national governments and other agencies to develop programs of assistance to address the HIV/AIDS epidemic. CDC's program of assistance to Kenya focuses on several areas of national priority, including scaling up of activities and funding for HIV prevention, care, and treatment; improvement of the national blood safety program; and support for the National AIDS and STD Control Program.

CDC Kenya has already been supporting a number of local, indigenous, faith-based, and international organizations to provide HIV prevention education, VCT, PMTCT, and AIDS care services in their communities. Under PEPFAR, CDC

Kenya plans to provide support and capacity building to these organizations, and expand the number of such organizations to extend and strengthen their programs and services.

The measurable outcomes of the program will be in alignment with goals of the GAP to reduce HIV transmission and improve care of persons living with HIV/AIDS (PLWHA). They also will contribute to the goals of the PEPFAR which are: Within five years treat more than two million HIV-infected persons with effective combination anti-retroviral therapy; care for ten million HIV-infected and affected persons including those orphaned by HIV/AIDS; and prevent seven million infections in 14 countries throughout the world.

Some of the specific measurable outcomes from this program will be: The number of local organizations, including community- and faith-based organizations, receiving assistance from the awardee; the number of clients or patients receiving counseling and testing; the number of patients receiving basic care packages; the number of pregnant women receiving a comprehensive package of PMTCT and PMTCT+ services; the number of new patients served with ART, and those current ART patients receiving continuous service for more than 12 months; the number of people receiving prevention services including abstinence and faithfulness interventions; and the number of clinicians, counselors, community or religious leaders trained by these local organizations. An additional outcome is the number of these organizations that learn how to successfully apply for and manage funding independently, as a result of technical assistance provided by the awardee.

Activities: Awardee activities for this program are as follows:

- Develop a plan to support local organizations to provide a range of services, including VCT; PMTCT; ART; palliative care; prevention education, including abstinence and faithfulness services; and workplace programs.
- Develop a mechanism to identify prospective collaborating partners and provide capacity building and financial support to these agencies. In year one, these local partners must be consistent with the FY 2004 Kenya Country Operational Plan approved by the PEPFAR coordinator, though in future years the awardee should also identify new potential partners. In all years, activities proposed by these local partners must contribute to the achievement of PEPFAR targets for Kenya. Approximately 25 local partners are anticipated in year one, with total

financial support ranging from \$25,000 to \$300,000 annually. Average anticipated funding to local partners will be approximately \$125,000. Anticipated activities of the local partners include VCT; PMTCT; care and treatment, including ART; and prevention activities delivered in workplaces, churches, mosques, and communities.

- Provide fiscal oversight and technical assistance to these local partners in the areas of program and financial management, administration, personnel management, data management, and other aspects of institution strengthening.

- Develop and implement a plan to improve the capacity of the local partners to become independent and sustainable, and for these local groups to become effective contributors in their communities.

- Develop mechanisms for information sharing, including sharing of lessons learned among local partners, and referral systems between partners, when appropriate.

- Monitor, assess and report on the performance of the local partners.

- Assist the local partners to write reports describing their programs.

- Provide training and technical assistance to the local partners so they may develop the skills to apply for funds independently and manage funds effectively after the completion of the program.

Awardee should ensure that all of the above activities integrate into the national HIV/AIDS strategy.

In a cooperative agreement, CDC staff is substantially involved in the program activities, above and beyond routine grant monitoring.

CDC Activities for this program are as follows:

- Assist awardee in identifying prospective local partners. In particular, in year one, those partners must be consistent with the Kenya PEPFAR FY 2004 Country Operational Plan.

- Assist awardee in developing strategies and mechanisms to identify new partners for years two and three.

- Provide technical assistance in clinical, counseling and laboratory issues, training, data management, and program monitoring and evaluation.

- Monitor project and budget performance to ensure satisfactory progress towards the goals of the project.

II. Award Information

Type of Award: Cooperative Agreement. CDC involvement in this program is listed in the Activities Section above.

Fiscal Year Funds: 2004.

Approximate Total Funding: \$12,000,000. (This amount is the approximate total funding amount for the entire three-year project period.)

Approximate Number of Awards: One or two.

Approximate Average Award: \$4,000,000. (This amount is for the first 12-month budget period, and includes both direct and indirect costs.)

Floor of Award Range: \$2,000,000.

Ceiling of Award Range: \$4,000,000.

Anticipated Award Date: September 1, 2004.

Budget Period Length: 12 months.

Project Period Length: Three years.

Throughout the project period, CDC's commitment to continuation of awards will be conditioned on the availability of funds, evidence of satisfactory progress by the recipient (as documented in required reports), and the determination that continued funding is in the best interest of the Federal Government.

III. Eligibility Information

III.1. Eligible Applicants

Applications may be submitted by public nonprofit organizations, private nonprofit organizations, for-profit organizations, and faith-based organizations that meet the following criteria:

1. Have at least five years of documented experience in building the capacity of local and indigenous organizations, and in managing sub-grants to local organizations.

2. Have an existing program or office in Kenya. It is critical that this activity commence quickly, and that the applicant is not delayed by procedures required for programs to operate in Kenya.

III.2. Cost Sharing or Matching

Matching funds are not required for this program.

III.3. Other

If you request a funding amount greater than the ceiling of the award range, your application will be considered non-responsive, and will not be entered into the review process. You will be notified that your application did not meet the submission requirements.

If your application is incomplete or non-responsive to the requirements listed in this section, it will not be entered into the review process. You will be notified that your application did not meet submission requirements.

Note: Title 2 of the United States Code Section 1611 states that an organization

described in section 501(c)(4) of the Internal Revenue Code that engages in lobbying activities is not eligible to receive Federal funds constituting an award, grant, or loan.

IV. Application and Submission Information

IV.1. Address To Request Application Package

To apply for this funding opportunity use application form PHS 5161. Application forms and instructions are available on the CDC Web site, at the following Internet address: www.cdc.gov/od/pgo/forminfo.htm.

If you do not have access to the Internet, or if you have difficulty accessing the forms on-line, you may contact the CDC Procurement and Grants Office Technical Information Management Section (PGO-TIM) staff at: (770) 488-2700. Application forms can be mailed to you.

IV.2. Content and Form of Submission

Application: You must include a project narrative with your application forms. The narrative must be submitted in the following format:

- Maximum number of pages: 15. If your narrative exceeds the page limit, only the first pages which are within the page limit will be reviewed.
- Font size: 12 point un-reduced.
- Double Spaced.
- Paper size: 8.5 by 11 inches.
- Page margin size: One inch.
- Printed only on one side of page.
- Held together only by rubber bands or metal clips; not bound in any other way.
- All pages should be numbered, and a complete index to the application and any appendices must be included.
- Submitted in English.

Your narrative should address activities to be conducted over the entire project period, and should consist of, as a minimum, a plan; objectives; activities; methods; an evaluation framework; and a budget highlighting any supplies mentioned in the Program Requirements, and any proposed capital expenditure. The budget justification will not be counted in the page limit stated above.

Additional information is optional and may be included in the application appendices. The appendices will not be counted toward the narrative page limit. Additional information could include, but is not limited to: Organizational charts, curriculum vitas, letters of support, etc.

You are required to have a Dun and Bradstreet Data Universal Numbering System (DUNS) number to apply for a grant or cooperative agreement from the

Federal Government. The DUNS number is a nine-digit identification number, which uniquely identifies business entities. Obtaining a DUNS number is easy and there is no charge. To obtain a DUNS number, access <http://www.dunandbradstreet.com> or call 1-866-705-5711.

For more information, see the CDC Web site at: <http://www.cdc.gov/od/pgo/funding/pubcomm.htm>.

If your application form does not have a DUNS number field, please write your DUNS number at the top of the first page of your application, and/or include your DUNS number in your application cover letter.

Additional requirements that may require you to submit additional documentation with your application are listed in section "VI.2. Administrative and National Policy Requirements."

IV.3. Submission Dates and Times

Application Deadline Date: August 9, 2004.

Explanation of Deadlines: Applications must be received in the CDC Procurement and Grants Office by 4 p.m. eastern time on the deadline date. If you send your application by the United States Postal Service or commercial delivery service, you must ensure that the carrier will be able to guarantee delivery of the application by the closing date and time. If CDC receives your application after closing due to: (1) Carrier error, when the carrier accepted the package with a guarantee for delivery by the closing date and time, or (2) significant weather delays or natural disasters, you will be given the opportunity to submit documentation of the carriers guarantee. If the documentation verifies a carrier problem, CDC will consider the application as having been received by the deadline.

This announcement is the definitive guide on application submission address and deadline. It supersedes information provided in the application instructions. If your application does not meet the deadline above, it will not be eligible for review, and will be discarded. You will be notified that your application did not meet the submission requirements.

CDC will not notify you upon receipt of your application. If you have a question about the receipt of your application, first contact your courier. If you still have a question, contact the PGO-TIM staff at: (770) 488-2700.

Before calling, please wait two to three days after the application deadline. This will allow time for applications to be processed and logged.

IV.4. Intergovernmental Review of Applications

Executive Order 12372 does not apply to this program.

IV.5. Funding Restrictions

Restrictions, which must be taken into account while writing your budget, are as follows:

- Funds may be used for: Establishing a program to improve the capacity of local organizations; provide sub-grants to local organizations; provide technical assistance to these organizations; and for procurement of equipment and supplies needed by these organizations.

- Antiretroviral Drugs—The purchase of antiretrovirals, reagents, and laboratory equipment for antiretroviral treatment projects require pre-approval from the GAP headquarters.

- Needle Exchange—No funds appropriated under this Act shall be used to carry out any program of distributing sterile needles or syringes for the hypodermic injection of any illegal drug.

- Funds may be spent for reasonable program purposes, including personnel, training, travel, supplies and services. Equipment may be purchased and renovations completed if deemed necessary to accomplish program objectives; however, prior written approval by CDC officials must be requested in writing.

- All requests for funds contained in the budget shall be stated in U.S. dollars. Once an award is made, CDC will not compensate foreign grantees for currency exchange fluctuations through the issuance of supplemental awards.

- The costs that are generally allowable in grants to domestic organizations are allowable to foreign institutions and international organizations, with the following exception: With the exception of the American University, Beirut, and the World Health Organization, Indirect Costs will not be paid (either directly or through sub-award) to organizations located outside the territorial limits of the United States or to international organizations regardless of their location.

- The applicant may contract with other organizations under this program, however, the applicant must perform a substantial portion of the activities relating to the management of sub-grants to local organizations and improving their capacity.

- An annual audit of these funds is required by a U.S. based audit firm with international branches and current licensure/authority in-country, and in accordance with International

Accounting Standards or equivalent standard(s) approved in writing by CDC. The audit should specify the use of funds and the appropriateness and reasonableness of expenditures.

- A fiscal Recipient Capability Assessment may be required with the potential awardee, pre or post award, in order to review their business management and fiscal capabilities regarding the handling of U.S. Federal funds.

- Prostitution and Related Activities. The U.S. Government is opposed to prostitution and related activities, which are inherently harmful and dehumanizing, and contribute to the phenomenon of trafficking in persons.

Any entity that receives, directly or indirectly, U.S. Government funds in connection with this document ("recipient") cannot use such U.S. Government funds to promote or advocate the legalization or practice of prostitution or sex trafficking. Nothing in the preceding sentence shall be construed to preclude the provision to individuals of palliative care, treatment, or post-exposure pharmaceutical prophylaxis, and necessary pharmaceuticals and commodities, including test kits, condoms, and, when proven effective, microbicides. A recipient that is otherwise eligible to receive funds in connection with this document to prevent, treat, or monitor HIV/AIDS shall not be required to endorse or utilize a multisectoral approach to combating HIV/AIDS, or to endorse, utilize, or participate in a prevention method or treatment program to which the recipient has a religious or moral objection. Any information provided by recipients about the use of condoms as part of projects or activities that are funded in connection with this document shall be medically accurate and shall include the public health benefits and failure rates of such use.

In addition, any foreign recipient must have a policy explicitly opposing, in its activities outside the United States, prostitution and sex trafficking, except that this requirement shall not apply to the Global Fund to Fight AIDS, Tuberculosis and Malaria, the World Health Organization, the International AIDS Vaccine Initiative or to any United Nations agency, if such entity is a recipient of U.S. government funds in connection with this document.

The following definitions apply for purposes of this clause:

- Sex trafficking means the recruitment, harboring, transportation, provision, or obtaining of a person for the purpose of a commercial sex act. 22 U.S.C. 7102(9).

- A foreign recipient includes an entity that is not organized under the laws of any State of the United States, the District of Columbia or the Commonwealth of Puerto Rico. Restoration of the Mexico City Policy, 66 FR 17303, 17303 (March 28, 2001).

All recipients must insert provisions implementing the applicable parts of this section, "Prostitution and Related Activities," in all subagreements under this award. These provisions must be express terms and conditions of the subagreement, acknowledge that each certification to compliance with this section, "Prostitution and Related Activities," are a prerequisite to receipt of U.S. Government funds in connection with this document, and must acknowledge that any violation of the provisions shall be grounds for unilateral termination of the agreement prior to the end of its term. In addition, all recipients must ensure, through contract, certification, audit, and/or any other necessary means, all the applicable requirements in this section, "Prostitution and Related Activities," are met by any other entities receiving U.S. Government funds from the recipient in connection with this document, including without limitation, the recipients' sub-grantees, sub-contractors, parents, subsidiaries, and affiliates. Recipients must agree that HHS may, at any reasonable time, inspect the documents and materials maintained or prepared by the recipient in the usual course of its operations that relate to the organization's compliance with this section, "Prostitution and Related Activities."

All primary grantees receiving U.S. Government funds in connection with this document must certify compliance prior to actual receipt of such funds in a written statement referencing this document (e.g., "[Recipient's name] certifies compliance with the section, 'Prostitution and Related Activities.'" addressed to the agency's grants officer. Such certifications are prerequisites to the payment of any U.S. government funds in connection with this document.

Recipients' compliance with this section, "Prostitution and Related Activities," is an express term and condition of receiving U.S. Government funds in connection with this document, and any violation of it shall be grounds for unilateral termination by HHS of the agreement with HHS in connection with this document prior to the end of its term. The recipient shall refund to HHS the entire amount furnished in connection with this document in the event it is determined by HHS that the recipient has not

complied with this section, 'Prostitution and Related Activities.'

Awards will not allow reimbursement of pre-award costs.

Guidance for completing your budget can be found on the United States Government Web site at the following address: <http://www.cdc.gov/od/pgo/funding/budgetguide.htm>.

IV.6. Other Submission Requirements

Application Submission Address: Submit the original and two hard copies of your application by mail or express delivery service to: Technical Information Management-PA 04261, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341. Applications may not be submitted electronically at this time.

V. Application Review Information

V.1. Criteria

You are required to provide measures of effectiveness that will demonstrate the accomplishment of the various identified objectives of the cooperative agreement. Measures of effectiveness must relate to the performance goals stated in the "Purpose" section of this announcement. Measures must be objective and quantitative, and must measure the intended outcome. These measures of effectiveness must be submitted with the application and will be an element of evaluation.

Your application will be evaluated against the following criteria:

1. Ability To Carry Out the Project (30 points)

Does the applicant document demonstrate capability to achieve the purpose of the project? Does the applicant have demonstrated and prior experience with providing capacity building and support to local and indigenous organizations in developing countries? Does the applicant demonstrate an understanding of the issues and problems facing local and indigenous organizations implementing HIV prevention and care services in Kenya?

2. Plans for Administration and Management of the Project (30 points)

Are there adequate plans for administering the project? Does the applicant have the capacity to award at least five to ten sub-grants within the first three months after the award, and at least 10 to 20 sub-grants by March 31, 2005? Does the applicant have the capacity to assist the local partners to achieve measurable outcomes to contribute to PEPFAR targets? Does the applicant describe activities which are

realistic, achievable, time-framed and appropriate to complete this program?

3. Personnel (25 points)

Are the professional personnel involved in this project qualified, with evidence of experience in working to support local, indigenous, faith-based, and small international organizations? Do the personnel have prior experience with improving the capacity of local and indigenous organizations in Kenya and elsewhere in developing countries? Do the personnel have appropriate technical qualifications?

4. Administrative and Accounting Plan (15 points)

Is there a plan to account for, prepare reports for, monitor, and audit expenditures under this agreement; manage the resources of the program; and produce, collect and analyze performance data?

5. Budget (not scored)

Is the itemized budget for conducting the project, along with justification, reasonable and consistent with stated objectives and planned program activities? Does the budget reflect a commitment to ensure that local organizations receive an adequate percentage of the total award so that they can achieve their targets? Is the percentage of funds designated for administration and capacity building, including technical oversight from a head office, reasonable?

V.2. Review and Selection Process

Applications will be reviewed for completeness by the Procurement and Grants Office (PGO) staff, and for responsiveness by the National Center for HIV, STD and TB Prevention (NCHSTP). Incomplete applications and applications that are non-responsive to the eligibility criteria will not advance through the review process. Applicants will be notified that their application did not meet submission requirements.

An objective review panel will evaluate complete and responsive applications according to the criteria listed in the "V.1. Criteria" section above.

No award will be made without the concurrence of the U.S. Embassy and the CDC representative in Kenya.

V.3. Anticipated Announcement Award Date

September 1, 2004.

VI. Award Administration Information

VI.1. Award Notices

Successful applicants will receive a Notice of Grant Award (NGA) from the

CDC Procurement and Grants Office. The NGA shall be the only binding, authorizing document between the recipient and CDC. The NGA will be signed by an authorized Grants Management Officer, and mailed to the recipient fiscal officer identified in the application.

Unsuccessful applicants will receive notification of the results of the application review by mail.

VI.2. Administrative and National Policy Requirements

45 CFR part 74 and part 92.

For more information on the Code of Federal Regulations, see the National Archives and Records Administration at the following Internet address: <http://www.access.gpo.gov/nara/cfr/cfr-table-search.html>.

The following additional requirements apply to this project:

- AR-1 Human Subjects Requirements.
- AR-4 HIV/AIDS Confidentiality Provisions.
- AR-6 Patient Care.
- AR-8 Public Health System Reporting Requirements.
- AR-10 Smoke-Free Workplace Requirements.
- AR-14 Accounting System Requirements.

Additional information on these requirements can be found on the CDC Web site at the following Internet address: <http://www.cdc.gov/od/pgo/funding/ARs.htm>.

VI.3. Reporting Requirements

You must provide CDC with an original, plus two hard copies of the following reports:

1. Semi-annual reports are required 30 days after the end of the budget period.
 2. Interim progress report, no less than 90 days before the end of the budget period. The progress report will serve as your non-competing continuation application, and must contain the following elements:
 - a. Current Budget Period Activities Objectives.
 - b. Current Budget Period Financial Progress.
 - c. New Budget Period Program Proposed Activity Objectives.
 - d. Budget.
 - e. Additional Requested Information.
 - f. Measures of Effectiveness.
 3. Financial status report, no more than 90 days after the end of the budget period.
 4. Final financial and performance reports, no more than 90 days after the end of the project period.
- These reports must be mailed to the Grants Management or Contract

Specialist listed in the "Agency Contacts" section of this announcement.

VII. Agency Contacts

For general questions about this announcement, contact: Technical Information Management Section, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341, telephone: (770) 488-2700.

For program technical assistance, contact: Elizabeth Marum, Ph.D., Project Officer, Global Aids Program (GAP), Kenya Country Team, National Center for HIV, STD and TB Prevention, Centers for Disease Control and Prevention [CDC], PO Box 606 Village Market, Nairobi, Kenya, telephone: 256-20-271-3008, e-mail: emarum@cdcnairobi.mimcom.net.

For budget assistance, contact: Diane Flournoy, Contract Specialist, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341, telephone: (770) 488-2072, e-mail: dmf6@cdc.gov.

Dated: July 2, 2004.

William P. Nichols,

Acting Director, Procurement and Grants Office, Centers for Disease Control and Prevention.

[FR Doc. 04-15599 Filed 7-8-04; 8:45 am]

BILLING CODE 4163-18-U

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 04224]

Strengthening HIV Counselor Training in the Republic of Uganda; Amendment

A notice announcing the availability of fiscal year (FY) 2004 funds for a cooperative agreement entitled, "Strengthening HIV Counselor Training in the Republic of Uganda" was published in the **Federal Register** Thursday, June 24, 2004, Volume 69, Number 121, pages 35373-35377. The notice is amended as follows:

On page 35374, column three, section "II. Award Information,": Please change the anticipated award date from July 1, 2004, to September 1, 2004.

Dated: July 2, 2004.

Alan A. Kotch,

Acting Director, Procurement and Grants Office, Centers for Disease Control and Prevention.

[FR Doc. 04-15600 Filed 7-8-04; 8:45 am]

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