OMB Number: 4040-0010
Expiration Date: mm/dd/yyyy

Project Abstract Summary				
Program Announcement (CFDA)				
Program Announcement (Funding Opp	portunity Number)	1		
Closing Date				
Applicant Name				
ength of Proposed Project				
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lon-Federal Share 4th Year	Non-Federal Share 5th Year	•		
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Project Title				

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 4040-0010. The time required to complete this information collection is estimated to average 1 hour per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer

Project Abstract Summary				
Project Summary				
Estimated number of people to be se	erved as a result of the award of the	hie grant		
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