Agency Grant program Grant Administrator G 9010 Department of Public Health and Human Services	rant Administrator Phone Grant Administrator Email Grantee (project manager/director) (Section 2a) COMMUNITY HEALTH CARE CENTER INC	Address of Grantee (Section 2b) 601 1ST AVE NORTH	Address of Grantee 2 (Section 2b) City (section 2b) GREAT FALLS	County Zipcode (Section 2b) Grant Amount (State Fund Type Av 59401 \$54,134.21		Beginning End grant pe Purpose of grant (Section 2e) O8/01/2023 O9/30/2025 First Episode Psychosis Statutory Reference (MCA) CFDA #, if av
2010 Department of Public Health and Human Services 2010 Department of Public Health and Human Services	COMMUNITY HEALTH CARE CENTER INC FDH & ASSOCIATES	601 1ST AVE NORTH PO BOX 7984	GREAT FALLS MISSOULA	59401 \$445,865.79 59807-7984 \$42,500.00	08/01/2023 (06/01/2023 (08/01/2023
2010 Department of Public Health and Human Services 2010 Department of Public Health and Human Services 2010 Department of Public Health and Human Services	FDH & ASSOCIATES GALLATIN COUNTY TREASURER FORT PECK ASSINIBOINE & SIOUX TRIBES	PO BOX 7984 311 W MAIN ST PO BOX 1027	MISSOULA BOZEMAN POPLAR	59807-7984 \$19,700.00 59715 \$35,000.00 59255-1027 \$378,013.00	10/01/2023	06/01/2023
2010 Department of Public Health and Human Services 2010 Department of Public Health and Human Services	NORTHERN CHEYENNE TRIBAL COUNC HUMAN RESOURCE DEV DIST 7	PO BOX 67 PO BOX 2016	LAME DEER BILLINGS	59233-1027 \$370,013.00 59043 \$196,324.00 59103-2016 \$321,274.00	10/01/2023	10/01/2023 09/30/2025 Food Distribution Program on Indian Reservations 10/01/2023 09/30/2025 Food Distribution Program on Indian Reservations 10/01/2023 09/30/2025 Food Distribution Program on Indian Reservations
010 Department of Public Health and Human Services 010 Department of Public Health and Human Services	LITTLE SHELL TRIBE OF CHIPPEWA INDIANS ACTION FOR EASTERN MONTANA	511 CENTRAL AVE WEST PO BOX 1309	GREAT FALLS GLENDIVE	59404 \$432,640.00 59330-1309 \$130,981.00	10/01/2023 1 10/01/2023	10/01/2023 09/30/2025 Food Distribution Program on Indian Reservations 10/01/2023 09/30/2025 Low Income Home Energy Assistance Program Admin
010 Department of Public Health and Human Services 010 Department of Public Health and Human Services	ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE MISSOULA	59330-1309 \$25,000.00 59330-1309 \$99,524.00	10/01/2023	10/01/2023 09/30/2025 Low Income Home Energy Assistance Program Admin 10/01/2023 09/30/2025 Low Income Home Energy Assistance Program Admin
010 Department of Public Health and Human Services 010 Department of Public Health and Human Services 010 Department of Public Health and Human Services	HRDC XI HRDC XI HRDC XI	1801 S HIGGINS AVE 1801 S HIGGINS AVE 1801 S HIGGINS AVE	MISSOULA MISSOULA MISSOULA	59801-5763 \$50,000.00 59801-5763 \$218,660.00 59801-5763 \$167,481.00	10/01/2023	10/01/202309/30/2025Low Income Home Energy Assistance Program Admin10/01/202309/30/2025Low Income Home Energy Assistance Program Admin10/01/202309/30/2025Low Income Home Energy Assistance Program Admin
2010 Department of Public Health and Human Services 2010 Department of Public Health and Human Services	ACTION INC ACTION INC	25 W SILVER ST 25 W SILVER ST	BUTTE BUTTE	59701 \$163,091.00 59701 \$25,000.00	10/01/2023	10/01/2023 09/30/2025 Low Income Home Energy Assistance Program Admin 10/01/2023 09/30/2025 Low Income Home Energy Assistance Program Admin
2010 Department of Public Health and Human Services 2010 Department of Public Health and Human Services	ACTION INC HRDC XI	25 W SILVER ST 1801 S HIGGINS AVE	BUTTE MISSOULA	59701 \$144,779.00 59801-5763 \$4,750.00	10/01/2023	10/01/2023 09/30/2025 Low Income Home Energy Assistance Program Admin 10/01/2023 09/30/2024 Bonneville Power Administration
2010 Department of Public Health and Human Services 2010 Department of Public Health and Human Services 2010 Department of Public Health and Human Services	HRDC XI HRDC XI	1801 S HIGGINS AVE 1801 S HIGGINS AVE 1801 S HIGGINS AVE	MISSOULA MISSOULA MISSOULA	59801-5763 \$2,262.00 59801-5763 \$38,083.00 59801-5763 \$6,100.00	10/01/2023	10/01/2023 09/30/2024 Bonneville Power Administration 10/01/2023 09/30/2024 Bonneville Power Administration 10/01/2023 09/30/2024 Bonneville Power Administration
2010 Department of Public Health and Human Services 2010 Department of Public Health and Human Services	CARBON COUNTY TREASURER CARBON COUNTY TREASURER	PO BOX 828 PO BOX 828	RED LODGE RED LODGE	59068 \$10,000.00 59068 \$10,000.00	01/01/2024	01/01/2024 11/30/2025 Public Health System Improvements 01/01/2024 11/30/2025 Public Health System Improvements
010 Department of Public Health and Human Services 010 Department of Public Health and Human Services	LEWIS & CLARK COUNTY LEWIS & CLARK COUNTY	316 N PARK AVE 316 N PARK AVE	HELENA HELENA	59601-4759 \$17,500.00 59601-4759 \$14,500.00	03/01/2024 (03/01/2024 (03/01/2024 11/30/2025 Public Health System Improvements 03/01/2024 11/30/2025 Public Health System Improvements
010 Department of Public Health and Human Services 010 Department of Public Health and Human Services	BIG HORN COUNTY BIG HORN COUNTY PLO HORN COUNTY PUBLIC HEALTH DEPT	121 WEST 3RD AVE 121 WEST 3RD AVE	HARDIN HARDIN	59034-0908 \$7,500.00 59034-0908 \$2,500.00 59034-1634 \$12,500.00	04/01/2024	04/01/2024
010 Department of Public Health and Human Services 010 Department of Public Health and Human Services 010 Department of Public Health and Human Services	BIG HORN COUNTY PUBLIC HEALTH DEPT LEWIS & CLARK COUNTY LEWIS & CLARK COUNTY	200 N MITCHELL AVE #201 316 N PARK AVE 316 N PARK AVE	HELENA HELENA	59034-1634 \$12,500.00 59601-4759 \$70,966.00 59601-4759 \$60,000.00	10/01/2023	04/01/2024 11/30/2025 Public Health System Improvements 10/01/2023 07/31/2025 Emergency Medical Services 10/01/2023 07/31/2025 Emergency Medical Services
010 Department of Public Health and Human Services 010 Department of Public Health and Human Services	MONTANA PUBLIC HEALTH INSTITUTE MONTANA PUBLIC HEALTH INSTITUTE	235 SEGIAH WAY 235 SEGIAH WAY	KALISPELL KALISPELL	59901 \$300,000.00 59901 \$300,000.00	04/01/2024	04/01/2024 08/31/2025 Emergency Medical Services 04/01/2024 08/31/2025 Emergency Medical Services
010 Department of Public Health and Human Services 010 Department of Public Health and Human Services	BUTTE SILVER BOW CONSOLIDATED GOV BUTTE SILVER BOW CONSOLIDATED GOV	126 WEST GRANITE 126 WEST GRANITE	BUTTE BUTTE	59701-9256 \$0.00 59701-9256 \$3,000.00	11/01/2023 1 11/01/2023	11/01/2023 09/29/2025 Epidemiology 11/01/2023 09/29/2025 Epidemiology
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 110 Department of Public Health and Human Services	BUTTE SILVER BOW CONSOLIDATED GOV ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	126 WEST GRANITE PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE	59701-9256 \$3,000.00 59330-1309 \$33,350.00 59330-1309 \$14,824.00	07/01/2023	11/01/2023 09/29/2025 Epidemiology
010 Department of Public Health and Human Services 010 Department of Public Health and Human Services	ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE	59330-1309 \$1,426.00 59330-1309 \$1,426.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE	59330-1309 \$9,204.00 59330-1309 \$239,259.00	07/01/2023 (07/01/2023 (07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	PO BOX 1309 PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE	59330-1309 \$167,538.00 59330-1309 \$1,015.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	PO BOX 1309 PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE GLENDIVE	59330-1309 \$23,204.00 59330-1309 \$38,430.00 59330-1309 \$4,476.02	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE	59330-1309 \$120.27 59330-1309 \$2,085.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE	59330-1309 \$78,763.00 59330-1309 \$1,932.00	07/01/2023 (07/01/2023 (07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	PO BOX 1309 PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE GLENDIVE	59330-1309 \$60,264.00 59330-1309 \$2,477.00 59330-1309 \$87,163.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	PO BOX 1309 PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE GLENDIVE	59330-1309 \$1,506.00 59330-1309 \$9,498.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE	59330-1309 \$288,120.00 59330-1309 \$59,477.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
0 Department of Public Health and Human Services 0 Department of Public Health and Human Services	ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE	59330-1309 \$3,513.00 59330-1309 \$196,209.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	PO BOX 1309 PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE GLENDIVE	59330-1309 \$9,009.00 59330-1309 \$57,759.00 59330-1309 \$73,005.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE	59330-1309 \$1,903,275.00 59330-1309 \$297,692.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE	59330-1309 \$14,253.00 59330-1309 \$1,894.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE GLENDIVE	59330-1309 \$227,103.00 59330-1309 \$8,096.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	PO BOX 1309 PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE GLENDIVE	59330-1309 \$81,277.00 59330-1309 \$403.00 59330-1309 \$7,915.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ACTION FOR EASTERN MONTANA ACTION FOR EASTERN MONTANA	PO BOX 1309 PO BOX 1309	GLENDIVE GLENDIVE	59330-1309 \$312.00 59330-1309 \$13,340.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	AREA II AGENCY ON AGING AREA II AGENCY ON AGING	PO BOX 127 PO BOX 127	ROUNDUP ROUNDUP	59072-0127 \$1,523.00 59072-0127 \$344,786.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	AREA II AGENCY ON AGING AREA II AGENCY ON AGING AREA II AGENCY ON AGING	PO BOX 127 PO BOX 127 PO BOX 127	ROUNDUP ROUNDUP ROUNDUP	59072-0127 \$10,000.00 59072-0127 \$340,006.00 59072-0127 \$45,596.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	AREA II AGENCY ON AGING AREA II AGENCY ON AGING	PO BOX 127 PO BOX 127	ROUNDUP ROUNDUP	59072-0127 \$1,536.00 59072-0127 \$2,656,454.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	AREA II AGENCY ON AGING AREA II AGENCY ON AGING	PO BOX 127 PO BOX 127	ROUNDUP ROUNDUP	59072-0127 \$15,993.00 59072-0127 \$177,850.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	AREA II AGENCY ON AGING AREA II AGENCY ON AGING AREA II AGENCY ON AGING	PO BOX 127 PO BOX 127 PO BOX 127	ROUNDUP ROUNDUP ROUNDUP	59072-0127 \$83,442.00 59072-0127 \$26,598.00 59072-0127 \$109,344.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	AREA II AGENCY ON AGING AREA II AGENCY ON AGING AREA II AGENCY ON AGING	PO BOX 127 PO BOX 127	ROUNDUP ROUNDUP	59072-0127 \$6,486.00 59072-0127 \$18,213.00	07/01/2023 (07/01/2023 (07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
0 Department of Public Health and Human Services 0 Department of Public Health and Human Services 0 Department of Public Health and Human Services	AREA II AGENCY ON AGING AREA II AGENCY ON AGING AREA II AGENCY ON AGING	PO BOX 127 PO BOX 127 PO BOX 127	ROUNDUP ROUNDUP ROUNDUP	59072-0127 \$466,094.00 59072-0127 \$345,390.00 59072-0127 \$499,992.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
0 Department of Public Health and Human Services 0 Department of Public Health and Human Services	AREA II AGENCY ON AGING AREA II AGENCY ON AGING	PO BOX 127 PO BOX 127	ROUNDUP ROUNDUP	59072-0127 \$26,755.00 59072-0127 \$4,407.00	07/01/2023 (07/01/2023 (07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
0 Department of Public Health and Human Services 0 Department of Public Health and Human Services 0 Department of Public Health and Human Services	AREA II AGENCY ON AGING AREA II AGENCY ON AGING AREA II AGENCY ON AGING	PO BOX 127 PO BOX 127 PO BOX 127	ROUNDUP ROUNDUP ROUNDUP	59072-0127 \$615.00 59072-0127 \$2,786.00 59072-0127 \$2,146.00	07/01/2023 (07/01/2023 (07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
0 Department of Public Health and Human Services 0 Department of Public Health and Human Services 0 Department of Public Health and Human Services	AREA II AGENCY ON AGING AREA II AGENCY ON AGING AREA II AGENCY ON AGING	PO BOX 127 PO BOX 127 PO BOX 127	ROUNDUP ROUNDUP ROUNDUP	59072-0127 \$15,910.00 59072-0127 \$116,809.00 59072-0127 \$20,799.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA II AGENCY ON AGING AREA II AGENCY ON AGING AREA II AGENCY ON AGING	PO BOX 127 PO BOX 127 PO BOX 127	ROUNDUP ROUNDUP ROUNDUP	59072-0127 \$4,372.00 59072-0127 \$75,517.00	07/01/2023 (07/01/2023 (07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA II AGENCY ON AGING AREA II AGENCY ON AGING	PO BOX 127 PO BOX 127	ROUNDUP ROUNDUP	59072-0127 \$181,830.00 59072-0127 \$79,996.00	07/01/2023 (07/01/2023 (07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA II AGENCY ON AGING AREA II AGENCY ON AGING AREA II AGENCY ON AGING	PO BOX 127 PO BOX 127 PO BOX 127	ROUNDUP ROUNDUP ROUNDUP	59072-0127 \$364,310.00 59072-0127 \$3,027.00 59072-0127 \$76,991.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA II AGENCY ON AGING AREA II AGENCY ON AGING	PO BOX 127 PO BOX 127	ROUNDUP ROUNDUP ROUNDUP	59072-0127 \$2,625.00 59072-0127 \$21,927.00	07/01/2023 (07/01/2023 (07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA II AGENCY ON AGING AREA II AGENCY ON AGING AREA II AGENCY ON AGING	PO BOX 127 PO BOX 127 PO BOX 127	ROUNDUP ROUNDUP	59072-0127 \$105,791.00 59072-0127 \$727.00 59072-0127 \$25,892.00	07/01/2023 (07/01/2023 (07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC	311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2	CONRAD CONRAD CONRAD	59425 \$1,170.00 59425 \$165,153.00 59425 \$6,262.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC	311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2	CONRAD CONRAD	59425 \$29,183.00 59425 \$6,147.00	07/01/2023 (07/01/2023 (07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC	311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2	CONRAD CONRAD CONRAD	59425 \$33,000.00 59425 \$41,856.00 59425 \$38,754.00	07/01/2023 (07/01/2023 (07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC	311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2	CONRAD CONRAD CONRAD	59425 \$10,894.00 59425 \$68,687.00 59425 \$7,884.00	07/01/2023 07/01/2023	07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC	311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2	CONRAD CONRAD	59425 \$10,917.00 59425 \$68,921.00	07/01/2023 07/01/2023	07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC	311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2	CONRAD CONRAD CONRAD	59425 \$189.00 59425 \$6,857.00 59425 \$1,454,667.00	07/01/2023 07/01/2023	07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC	311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2	CONRAD CONRAD CONRAD	59425 \$1,449.00 59425 \$6,238.00 59425 \$53,514.00	07/01/2023 07/01/2023	07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program
0 Department of Public Health and Human Services 0 Department of Public Health and Human Services	NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC	311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2	CONRAD CONRAD CONRAD	59425 \$13,979.00 59425 \$1,533.00	07/01/2023 07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC	311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2	CONRAD CONRAD CONRAD	59425 \$148,725.00 59425 \$3,214.00 59425 \$67,379.00	07/01/2023 07/01/2023	07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC	311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2	CONRAD CONRAD CONRAD	59425 \$8,311.00 59425 \$159,957.00	07/01/2023 07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC	311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2	CONRAD CONRAD	59425 \$1,657.00 59425 \$226,834.00 59425 \$139,039.00	07/01/2023 07/01/2023	07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	NORTH CENTRAL AREA AGENCY ON AGING INC NORTH CENTRAL AREA AGENCY ON AGING INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC	311 S VIRGINIA ST STE 2 311 S VIRGINIA ST STE 2 PO BOX 1717	CONRAD CONRAD HELENA	59425 \$35,288.00 59425 \$221,905.00 59624-1717 \$2,455.00	07/01/2023 07/01/2023	07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program07/01/202306/30/2025III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC	PO BOX 1717 PO BOX 1717 PO BOX 1717	HELENA HELENA HELENA	59624-1717 \$2,453.00 59624-1717 \$142,451.00 59624-1717 \$247,962.00	07/01/2023	07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program

10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC	PO BOX 1717 PO BOX 1717 PO BOX 1717	HELENA HELENA HELENA	59624-1717 \$62,040.00 59624-1717 \$84,732.00 59624-1717 \$3,530.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC	PO BOX 1717 PO BOX 1717	HELENA HELENA HELENA	59624-1717 \$14,830.00 59624-1717 \$1,447.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC	PO BOX 1717 PO BOX 1717 PO BOX 1717	HELENA HELENA HELENA	59624-1717 \$359,813.00 59624-1717 \$289,871.00 59624-1717 \$17,131.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC	PO BOX 1717 PO BOX 1717 PO BOX 1717	HELENA HELENA HELENA	59624-1717 \$82,327.00 59624-1717 \$4,416.00 59624-1717 \$1,696,548.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC	PO BOX 1717 PO BOX 1717	HELENA HELENA	59624-1717 \$17,178.00 59624-1717 \$20,453.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC	PO BOX 1717 PO BOX 1717 PO BOX 1717	HELENA HELENA HELENA	59624-1717 \$1,863.00 59624-1717 \$1,034.00 59624-1717 \$499.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program Program 07/01/2023 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program Program 07/01/2023 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 07/01/2023 07/01/2
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC	PO BOX 1717 PO BOX 1717 PO BOX 1717	HELENA HELENA	59624-1717 \$143,761.00 59624-1717 \$4,943.02 59624-1717 \$16,294.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC	PO BOX 1717 PO BOX 1717	HELENA HELENA HELENA	59624-1717 \$60,834.00 59624-1717 \$84,984.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC	PO BOX 1717 PO BOX 1717 PO BOX 1717	HELENA HELENA HELENA	59624-1717 \$60,317.00 59624-1717 \$247,487.00 59624-1717 \$376,827.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC	PO BOX 1717 PO BOX 1717	HELENA HELENA	59624-1717 \$20,578.00 59624-1717 \$61,596.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC	PO BOX 1717 PO BOX 1717 PO BOX 1717	HELENA HELENA HELENA	59624-1717 \$3,425.00 59624-1717 \$13,441.00 59624-1717 \$123,750.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
10 Department of Public Health and Human Services 10 Department of Public Health and Human Services 10 Department of Public Health and Human Services	ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC	PO BOX 1717 PO BOX 1717 PO BOX 1717	HELENA HELENA	59624-1717 \$266,272.00 59624-1717 \$16,993.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
0 Department of Public Health and Human Services 0 Department of Public Health and Human Services	ROCKY MOUNTAIN DEVELOPMENT COUNCIL INC AREA V AGENCY ON AGING	PO BOX 1717 PO BOX 459	HELENA BUTTE	59624-1717 \$501.00 59703 \$142,855.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
0 Department of Public Health and Human Services 0 Department of Public Health and Human Services 0 Department of Public Health and Human Services	AREA V AGENCY ON AGING AREA V AGENCY ON AGING AREA V AGENCY ON AGING	PO BOX 459 PO BOX 459 PO BOX 459	BUTTE BUTTE BUTTE	59703 \$22,002.00 59703 \$9,926.00 59703 \$6,631.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA V AGENCY ON AGING AREA V AGENCY ON AGING	PO BOX 459 PO BOX 459	BUTTE BUTTE	59703 \$1,100.00 59703 \$64,626.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA V AGENCY ON AGING AREA V AGENCY ON AGING AREA V AGENCY ON AGING	PO BOX 459 PO BOX 459 PO BOX 459	BUTTE BUTTE BUTTE	59703 \$7,466.00 59703 \$1,569.00 59703 \$144,902.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA V AGENCY ON AGING AREA V AGENCY ON AGING	PO BOX 459 PO BOX 459	BUTTE BUTTE	59703 \$9,762.00 59703 \$27,513.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA V AGENCY ON AGING AREA V AGENCY ON AGING AREA V AGENCY ON AGING	PO BOX 459 PO BOX 459 PO BOX 459	BUTTE BUTTE	59703 \$188,805.00 59703 \$200,074.00 59703 \$622.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA V AGENCY ON AGING AREA V AGENCY ON AGING	PO BOX 459 PO BOX 459	BUTTE BUTTE	59703 \$1,661.00 59703 \$9,855.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA V AGENCY ON AGING AREA V AGENCY ON AGING AREA V AGENCY ON AGING	PO BOX 459 PO BOX 459 PO BOX 459	BUTTE BUTTE	59703 \$70,658.00 59703 \$7,871.00 59703 \$55,661.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA V AGENCY ON AGING AREA V AGENCY ON AGING	PO BOX 459 PO BOX 459 PO BOX 459	BUTTE BUTTE	59703 \$272.00 59703 \$225.00 59703 \$126,178.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA V AGENCY ON AGING AREA V AGENCY ON AGING AREA V AGENCY ON AGING	PO BOX 459 PO BOX 459	BUTTE BUTTE	59703 \$35,571.00 59703 \$44,676.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA V AGENCY ON AGING AREA V AGENCY ON AGING AREA V AGENCY ON AGING	PO BOX 459 PO BOX 459 PO BOX 459	BUTTE BUTTE BUTTF	59703 \$5,797.00 59703 \$1,162.00 59703 \$860.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA V AGENCY ON AGING AREA V AGENCY ON AGING	PO BOX 459 PO BOX 459	BUTTE BUTTE	59703 \$16,613.00 59703 \$9,738.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA V AGENCY ON AGING AREA V AGENCY ON AGING AREA V AGENCY ON AGING	PO BOX 459 PO BOX 459 PO BOX 459	BUTTE BUTTE BUTTE	59703 \$4,253.02 59703 \$27,638.00 59703 \$65,273.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA V AGENCY ON AGING AREA V AGENCY ON AGING	PO BOX 459 PO BOX 459	BUTTE BUTTE	59703 \$39,877.00 59703 \$2,523.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA V AGENCY ON AGING AREA V AGENCY ON AGING AREA VI AGENCY ON AGING	PO BOX 459 PO BOX 459 110 MAIN ST STE 5	BUTTE BUTTE POLSON	59703 \$1,264,580.00 59703 \$127,553.00 59860 \$8,215.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING	110 MAIN ST STE 5 110 MAIN ST STE 5	POLSON POLSON	59860 \$1,713.00 59860 \$653.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING	110 MAIN ST STE 5 110 MAIN ST STE 5 110 MAIN ST STE 5	POLSON POLSON POLSON	59860 \$236,825.00 59860 \$90,161.00 59860 \$6,508.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING	110 MAIN ST STE 5 110 MAIN ST STE 5	POLSON POLSON	59860 \$23,540.00 59860 \$328.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING	110 MAIN ST STE 5 110 MAIN ST STE 5 110 MAIN ST STE 5	POLSON POLSON POLSON	59860 \$1,547.00 59860 \$13,147.00 59860 \$6,540.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING	110 MAIN ST STE 5 110 MAIN ST STE 5 110 MAIN ST STE 5	POLSON POLSON POLSON	59860 \$48,811.00 59860 \$37,101.00 59860 \$12,824.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING	110 MAIN ST STE 5 110 MAIN ST STE 5	POLSON POLSON	59860 \$9,375.00 59860 \$318.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING	110 MAIN ST STE 5 110 MAIN ST STE 5 110 MAIN ST STE 5	POLSON POLSON POLSON	59860 \$3,945.00 59860 \$37,101.00 59860 \$2,088.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING	110 MAIN ST STE 5 110 MAIN ST STE 5	POLSON POLSON	59860 \$86,826.00 59860 \$158,421.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING	110 MAIN ST STE 5 110 MAIN ST STE 5 110 MAIN ST STE 5	POLSON POLSON POLSON	59860 \$165,874.00 59860 \$ 38,988.00 59860 \$ 981.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING	110 MAIN ST STE 5 110 MAIN ST STE 5	POLSON POLSON	59860 \$ 10,470.00 59860 \$ 155,066.00 59860 \$ 241.877.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING	110 MAIN ST STE 5 110 MAIN ST STE 5 110 MAIN ST STE 5	POLSON POLSON POLSON	59860 \$ 241,877.00 59860 \$ 39,588.00 59860 \$ 54,424.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING	110 MAIN ST STE 5 110 MAIN ST STE 5 110 MAIN ST STE 5	POLSON POLSON	59860 \$ 170,891.00 59860 \$ 4,486.02 59860 \$ 9,932.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA VI AGENCY ON AGING AREA VI AGENCY ON AGING	110 MAIN ST STE 5 110 MAIN ST STE 5	POLSON POLSON	59860 \$ 56,538.00 59860 \$ 2,268.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 07/01/2023 07/01/2023 06/30/2025 07/01/2023 07/01/2023 06/30/2025 07/01/2023 07
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA VI AGENCY ON AGING MISSOULA AGING SERVICES MISSOULA AGING SERVICES	110 MAIN ST STE 5 337 STEPHENS AVE 337 STEPHENS AVE	POLSON MISSOULA MISSOULA	59860 \$ 1,215,958.00 59801-3816 \$ 2,721.00 59801-3816 \$ 281,055.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025
Department of Public Health and Human Services Department of Public Health and Human Services	MISSOULA AGING SERVICES MISSOULA AGING SERVICES	337 STEPHENS AVE 337 STEPHENS AVE	MISSOULA MISSOULA	59801-3816 \$ 63,081.00 59801-3816 \$ 1,382,649.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	MISSOULA AGING SERVICES MISSOULA AGING SERVICES MISSOULA AGING SERVICES	337 STEPHENS AVE 337 STEPHENS AVE 337 STEPHENS AVE	MISSOULA MISSOULA MISSOULA	59801-3816 \$ 1,221.00 59801-3816 \$ 2,923.59 59801-3816 \$ 174,828.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	MISSOULA AGING SERVICES MISSOULA AGING SERVICES	337 STEPHENS AVE 337 STEPHENS AVE	MISSOULA MISSOULA	59801-3816 \$ 4,682.02 59801-3816 \$ 47,924.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 06
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	MISSOULA AGING SERVICES MISSOULA AGING SERVICES MISSOULA AGING SERVICES	337 STEPHENS AVE 337 STEPHENS AVE 337 STEPHENS AVE	MISSOULA MISSOULA MISSOULA	59801-3816 \$ 13,649.00 59801-3816 \$ 43,683.00 59801-3816 \$ 48,705.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	MISSOULA AGING SERVICES MISSOULA AGING SERVICES MISSOULA AGING SERVICES	337 STEPHENS AVE 337 STEPHENS AVE 337 STEPHENS AVE	MISSOULA MISSOULA MISSOULA	59801-3816 \$ 822.00 59801-3816 \$ 396.00 59801-3816 \$ 267,939.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	MISSOULA AGING SERVICES MISSOULA AGING SERVICES	337 STEPHENS AVE 337 STEPHENS AVE	MISSOULA MISSOULA	59801-3816 \$ 173,538.00 59801-3816 \$ 206,234.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	MISSOULA AGING SERVICES MISSOULA AGING SERVICES MISSOULA AGING SERVICES	337 STEPHENS AVE 337 STEPHENS AVE 337 STEPHENS AVE	MISSOULA MISSOULA MISSOULA	59801-3816 \$ 113,183.00 59801-3816 \$ 11,208.00 59801-3816 \$ 12,710.59	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	MISSOULA AGING SERVICES MISSOULA AGING SERVICES	337 STEPHENS AVE 337 STEPHENS AVE	MISSOULA MISSOULA	59801-3816 \$ 11,611.59 59801-3816 \$ 448.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	MISSOULA AGING SERVICES MISSOULA AGING SERVICES MISSOULA AGING SERVICES	337 STEPHENS AVE 337 STEPHENS AVE 337 STEPHENS AVE	MISSOULA MISSOULA MISSOULA	59801-3816 \$ 105,539.00 59801-3816 \$ 1,408.00 59801-3816 \$ 12,946.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	MISSOULA AGING SERVICES MISSOULA AGING SERVICES	337 STEPHENS AVE 337 STEPHENS AVE	MISSOULA MISSOULA	59801-3816 \$ 69,272.00 59801-3816 \$ 2,730.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	MISSOULA AGING SERVICES MISSOULA AGING SERVICES MISSOULA AGING SERVICES	337 STEPHENS AVE 337 STEPHENS AVE 337 STEPHENS AVE	MISSOULA MISSOULA MISSOULA	59801-3816 \$ 29,409.00 59801-3816 \$ 2,793.00 59801-3816 \$ 208,243.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
repartment of Public Health and Human Services Repartment of Public Health and Human Services Repartment of Public Health and Human Services	MISSOULA AGING SERVICES MISSOULA AGING SERVICES MISSOULA AGING SERVICES	337 STEPHENS AVE 337 STEPHENS AVE 337 STEPHENS AVE	MISSOULA MISSOULA	59801-3816 \$ 15,718.00 59801-3816 \$ 65,513.00 59801-3816 \$ 15,888.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
epartment of Public Health and Human Services epartment of Public Health and Human Services	MISSOULA AGING SERVICES MISSOULA AGING SERVICES	337 STEPHENS AVE 337 STEPHENS AVE	MISSOULA MISSOULA MISSOULA	59801-3816 \$ 113,810.00 59801-3816 \$ 11,420.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
epartment of Public Health and Human Services epartment of Public Health and Human Services epartment of Public Health and Human Services	AREA VIII AGENCY ON AGING AREA VIII AGENCY ON AGING AREA VIII AGENCY ON AGING	1801 BENEFIS CT 1801 BENEFIS CT 1801 BENEFIS CT	GREAT FALLS GREAT FALLS GREAT FALLS	59405 \$ 45,227.00 59405 \$ 116,976.00 59405 \$ 27,605.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
repartment of Public Health and Human Services repartment of Public Health and Human Services	AREA VIII AGENCY ON AGING AREA VIII AGENCY ON AGING	1801 BENEFIS CT 1801 BENEFIS CT	GREAT FALLS GREAT FALLS GREAT FALLS GREAT FALLS	59405 \$ 152,808.00 59405 \$ 36,518.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
repartment of Public Health and Human Services repartment of Public Health and Human Services repartment of Public Health and Human Services	AREA VIII AGENCY ON AGING AREA VIII AGENCY ON AGING AREA VIII AGENCY ON AGING	1801 BENEFIS CT 1801 BENEFIS CT 1801 BENEFIS CT	GREAT FALLS GREAT FALLS GREAT FALLS	59405 \$ 9,016.00 59405 \$ 163,897.00 59405 \$ 64,092.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA VIII AGENCY ON AGING AREA VIII AGENCY ON AGING	1801 BENEFIS CT 1801 BENEFIS CT	GREAT FALLS GREAT FALLS	59405 \$ 87,323.00 59405 \$ 5,735.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA VIII AGENCY ON AGING AREA VIII AGENCY ON AGING AREA VIII AGENCY ON AGING	1801 BENEFIS CT 1801 BENEFIS CT 1801 BENEFIS CT	GREAT FALLS GREAT FALLS GREAT FALLS	59405 \$ 118,413.00 59405 \$ 3,173.00 59405 \$ 8,914.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA VIII AGENCY ON AGING AREA VIII AGENCY ON AGING	1801 BENEFIS CT 1801 BENEFIS CT	GREAT FALLS GREAT FALLS	59405 \$ 6,564.00 59405 \$ 222.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services Department of Public Health and Human Services	AREA VIII AGENCY ON AGING AREA VIII AGENCY ON AGING AREA VIII AGENCY ON AGING	1801 BENEFIS CT 1801 BENEFIS CT 1801 BENEFIS CT	GREAT FALLS GREAT FALLS GREAT FALLS	59405 \$ 16,436.00 59405 \$ 35,709.00 59405 \$ 37,766.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA VIII AGENCY ON AGING AREA VIII AGENCY ON AGING	1801 BENEFIS CT 1801 BENEFIS CT	GREAT FALLS GREAT FALLS	59405 \$ 88,590.00 59405 \$ 7,862.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
Department of Public Health and Human Services Department of Public Health and Human Services	AREA VIII AGENCY ON AGING AREA VIII AGENCY ON AGING	1801 BENEFIS CT 1801 BENEFIS CT	GREAT FALLS GREAT FALLS	59405 \$ 27,222.00 59405 \$ 1,568.00	07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program

69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	AREA VIII AGENCY ON AGING AREA VIII AGENCY ON AGING	1801 BENEFIS CT 1801 BENEFIS CT	GREAT FALLS GREAT FALLS	59405 \$ 59405 \$	21,528.00 07	/01/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	AREA VIII AGENCY ON AGING AREA VIII AGENCY ON AGING AREA VIII AGENCY ON AGING	1801 BENEFIS CT 1801 BENEFIS CT	GREAT FALLS GREAT FALLS GREAT FALLS	59405 \$ 59405 \$	1,090.00 07 7,457.00 07	101/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	AREA VIII AGENCY ON AGING AREA IX FLATHEAD COUNTY AGENCY ON AGING	1801 BENEFIS CT 40 11TH ST W STE 100	GREAT FALLS KALISPELL	59405 \$	768,672.00	/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	AREA IX FLATHEAD COUNTY AGENCY ON AGING AREA IX FLATHEAD COUNTY AGENCY ON AGING	40 11TH ST W STE 100 40 11TH ST W STE 100	KALISPELL KALISPELL	59901-5798 \$	10,166.00 07 34,455.00 07	/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	AREA IX FLATHEAD COUNTY AGENCY ON AGING AREA IX FLATHEAD COUNTY AGENCY ON AGING	40 11TH ST W STE 100 40 11TH ST W STE 100	KALISPELL KALISPELL	59901-5798 \$	44,211.00	/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program /01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	AREA IX FLATHEAD COUNTY AGENCY ON AGING AREA IX FLATHEAD COUNTY AGENCY ON AGING	40 11TH ST W STE 100 40 11TH ST W STE 100	KALISPELL KALISPELL	59901-5798 \$		/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program /01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	AREA IX FLATHEAD COUNTY AGENCY ON AGING AREA IX FLATHEAD COUNTY AGENCY ON AGING	40 11TH ST W STE 100 40 11TH ST W STE 100	KALISPELL KALISPELL		84,302.00 07 190,379.00 07	/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program /01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	AREA IX FLATHEAD COUNTY AGENCY ON AGING AREA IX FLATHEAD COUNTY AGENCY ON AGING AREA IX FLATHEAD COUNTY AGENCY ON AGING	40 11TH ST W STE 100 40 11TH ST W STE 100 40 11TH ST W STE 100	KALISPELL KALISPELL KALISPELL	59901-5798 \$ 59901-5798 \$ 59901-5798 \$	282.00 07 46,004.00 07 152 385 00 07	/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program /01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program /01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	AREA IX FLATHEAD COUNTY AGENCY ON AGING AREA IX FLATHEAD COUNTY AGENCY ON AGING	40 11TH ST W STE 100 40 11TH ST W STE 100 40 11TH ST W STE 100	KALISPELL KALISPELL	59901-5798 \$ 59901-5798 \$	127,012.00 07	/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 06/30
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	AREA IX FLATHEAD COUNTY AGENCY ON AGING AREA IX FLATHEAD COUNTY AGENCY ON AGING	40 11TH ST W STE 100 40 11TH ST W STE 100	KALISPELL KALISPELL	59901-5798 \$	2,027.00 07 35,696.00 07	/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program /01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	AREA IX FLATHEAD COUNTY AGENCY ON AGING AREA IX FLATHEAD COUNTY AGENCY ON AGING	40 11TH ST W STE 100 40 11TH ST W STE 100	KALISPELL KALISPELL	59901-5798 \$		/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program /01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	AREA IX FLATHEAD COUNTY AGENCY ON AGING AREA IX FLATHEAD COUNTY AGENCY ON AGING	40 11TH ST W STE 100 40 11TH ST W STE 100	KALISPELL KALISPELL	3333 . 3.33 · \$	1,384.00 07 931,051.00 07	/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program /01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	AREA IX FLATHEAD COUNTY AGENCY ON AGING AREA IX FLATHEAD COUNTY AGENCY ON AGING	40 11TH ST W STE 100 40 11TH ST W STE 100 40 11TH ST W STE 100	KALISPELL KALISPELL	59901-5798 \$	7,535.00 07	/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program /01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program /01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	AREA IX FLATHEAD COUNTY AGENCY ON AGING AREA IX FLATHEAD COUNTY AGENCY ON AGING AREA IX FLATHEAD COUNTY AGENCY ON AGING	40 11TH ST W STE 100 40 11TH ST W STE 100 40 11TH ST W STE 100	KALISPELL KALISPELL KALISPELL	σσσσ1-στσσ φ	11,585.00 07 8,470.00 07	/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program /01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program /01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	AREA IX FLATHEAD COUNTY AGENCY ON AGING AREA IX FLATHEAD COUNTY AGENCY ON AGING	40 11TH ST W STE 100 40 11TH ST W STE 100	KALISPELL KALISPELL	59901-5798 \$	8,317.00 07	/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program /01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	AREA IX FLATHEAD COUNTY AGENCY ON AGING AREA IX FLATHEAD COUNTY AGENCY ON AGING	40 11TH ST W STE 100 40 11TH ST W STE 100	KALISPELL KALISPELL	59901-5798 \$		/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	AREA IX FLATHEAD COUNTY AGENCY ON AGING AREA IX FLATHEAD COUNTY AGENCY ON AGING	40 11TH ST W STE 100 40 11TH ST W STE 100	KALISPELL KALISPELL	59901-5798 \$	2,073.00 07	/01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program /01/2023 07/01/2023 06/30/2025 III,VII,SHIP - State Health Insurance Assistance Program
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	BIG HORN COUNTY NORTHERN CHEYENNE TRIBE	PO BOX 67	HARDIN LAME DEER	59043 \$	18,021.00 10 25,000.00 10	/01/2023 10/01/2023 09/30/2024 Maternal Child Health Block Grant FY24 /01/2023 10/01/2023 09/30/2025 Public Health Emergency Preparedness
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	NORTHERN CHEYENNE TRIBE BUTTE SILVER BOW CONSOLIDATED GOV BUTTE SILVER BOW CONSOLIDATED GOV	PO BOX 67 126 WEST GRANITE	LAME DEER BUTTE	59701-9256 \$	83,000.00	/01/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	FLATHEAD COUNTY FLATHEAD COUNTY	126 WEST GRANITE 290 A N MAIN ST 290 A N MAIN ST	KALISPELL KALISPELL	59701-9256 \$ 59901 \$ 59901 \$	83,000.00 10 35,000.00 10 35,000.00 10	/01/2023 10/01/2023 09/30/2025 Public Health Emergency Preparedness /01/2023 10/01/2023 09/30/2025 Public Health Emergency Preparedness /01/2023 10/01/2023 09/30/2025 Public Health Emergency Preparedness
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	FLATHEAD COUNTY FLATHEAD COUNTY FLATHEAD COUNTY	290 A N MAIN ST 290 A N MAIN ST 290 A N MAIN ST	KALISPELL KALISPELL KALISPELL		22,500.00 10	/01/2023 10/01/2023 09/30/2025 Public Health Emergency Preparedness
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	ANACONDA DEER LODGE COUNTY ANACONDA DEER LODGE COUNTY	800 S MAIN St 800 S MAIN St	ANACONDA ANACONDA	59711 \$ 59711 \$	15,000.00 10 15,000.00 10	/01/2023 10/01/2023 09/30/2025 Public Health Emergency Preparedness /01/2023 10/01/2023 09/30/2025 Public Health Emergency Preparedness
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	COUNTY OF BEAVERHEAD COUNTY OF BEAVERHEAD	327 EAST HELENA ST 327 EAST HELENA ST	DILLON DILLON	59725 \$ 59725 \$	8,000.00 10 8,000.00 10	/01/2023 10/01/2023 09/30/2025 Public Health Emergency Preparedness /01/2023 10/01/2023 09/30/2025 Public Health Emergency Preparedness
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	ANACONDA DEER LODGE COUNTY ANACONDA DEER LODGE COUNTY	800 S MAIN St 800 S MAIN St	ANACONDA ANACONDA	59711 \$ 59711 \$	60,203.00 10 5,552.06 10	/01/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	ANACONDA DEER LODGE COUNTY ANACONDA DEER LODGE COUNTY HILL COUNTY TREASURED	800 S MAIN St 800 S MAIN St	ANACONDA ANACONDA	59711 \$	67,635.00 10 2,286.94 10	/01/2023 10/01/2023 09/30/2025 Women Infant & Children
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	HILL COUNTY TREASURER HILL COUNTY TREASURER HILL COUNTY TREASURER	302 4TH AVE 302 4TH AVE 302 4TH AVE	HAVRE HAVRE	59501 \$ 59501 \$ 59501 \$	8,223.90	/01/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	HILL COUNTY TREASURER HILL COUNTY TREASURER LAKE COUNTY HEALTH DEPARTMENT	302 4TH AVE 302 4TH AVE 802 MAIN ST STE A	HAVRE POLSON	59501 \$	4,029.72 10	/01/2023 10/01/2023 09/30/2025 Women Infant & Children FY24
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	LAKE COUNTY HEALTH DEPARTMENT LEWIS & CLARK COUNTY	802 MAIN ST STE A 316 N PARK AVE	POLSON HELENA	59860 \$ 59601-4759 \$	126,066.00 10 20,246.68 10	/01/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	LEWIS & CLARK COUNTY LEWIS & CLARK COUNTY	316 N PARK AVE 316 N PARK AVE	HELENA HELENA	59601-4759 \$ 59601-4759 \$	307,730.00	/01/2023 10/01/2023 09/30/2025 Women Infant & Children /01/2023 10/01/2023 09/30/2025 Women Infant & Children /01/2023 10/01/2023 09/30/2025 Women Infant & Children
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	LEWIS & CLARK COUNTY LEWIS & CLARK COUNTY COUNTY OF MISSOUR A	316 N PARK AVE 316 N PARK AVE	HELENA HELENA	59601-4759 \$	10,260.32 10	/01/2023 10/01/2023 09/30/2025 Women Infant & Children
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	COUNTY OF MISSOULA COUNTY OF MISSOULA COUNTY OF MISSOULA	199 WEST PINE STREE 199 WEST PINE STREE 199 WEST PINE STREE	MISSOULA MISSOULA MISSOULA	59802 \$ 59802 \$ 59802 \$	615,751.00	/01/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	COUNTY OF MISSOULA COUNTY OF MISSOULA COUNTY OF MISSOULA	199 WEST PINE STREE 199 WEST PINE STREE 199 WEST PINE STREE	MISSOULA MISSOULA MISSOULA	59802 \$	4,120.79 10	/01/2023 10/01/2023 09/30/2025 Women Infant & Children
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	RAVALLI COUNTY TREASURER RAVALLI COUNTY TREASURER	215 S 4TH ST STE A 215 S 4TH ST STE A	HAMILTON HAMILTON	59840 \$	6,383.46	/01/2023 10/01/2023 09/30/2025 Women Infant & Children FY24
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	RAVALLI COUNTY TREASURER RAVALLI COUNTY TREASURER	215 S 4TH ST STE A 215 S 4TH ST STE A	HAMILTON HAMILTON	59840 \$ 59840 \$	2,038.54 10 138,690.00 10	/01/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 60010 Department of Public Health and Human Services	RAVALLI COUNTY TREASURER SANDERS COUNTY TREASURER	215 S 4TH ST STE A PO BOX 519	HAMILTON THOMPSON FALLS	59840 \$ 59873-0519 \$	693.00 10 125.79 10	/01/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	SANDERS COUNTY TREASURER SANDERS COUNTY TREASURER SANDERS COUNTY TREASURER	PO BOX 519 PO BOX 519 PO BOX 519	THOMPSON FALLS THOMPSON FALLS THOMPSON FALLS		64,567.00	/01/2023 10/01/2023 09/30/2025 Women Infant & Children FY24 /01/2023 10/01/2023 09/30/2025 Women Infant & Children FY24 /01/2023 10/01/2023 09/30/2025 Women Infant & Children FY24
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	BUTTE SILVER BOW CONSOLIDATED GOV BUTTE SILVER BOW CONSOLIDATED GOV	126 WEST GRANITE 126 WEST GRANITE	BUTTE BUTTE	59701-9256 \$	184,038.00	/01/2023 10/01/2023 09/30/2025 Women Infant & Children / 1/24 // 01/2023 10/01/2023 09/30/2025 Women Infant & Children / 01/2023 10/01/2023 09/30/2025 Women Infant & Children / 01/2023 10/01/2023 09/30/2025 Women Infant & Children
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	BUTTE SILVER BOW CONSOLIDATED GOV BUTTE SILVER BOW CONSOLIDATED GOV	126 WEST GRANITE 126 WEST GRANITE	BUTTE BUTTE	59701-9256 \$ 59701-9256 \$	11,940.00 10 4,402.83 10	/01/2023 10/01/2023 09/30/2025 Women Infant & Children /01/2023 10/01/2023 09/30/2025 Women Infant & Children
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	COUNTY OF TETON COUNTY OF TETON	PO BOX 610 PO BOX 610	CHOTEAU CHOTEAU	59422-0610 \$	35,000.00 10 32,490.50 10	/01/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	YELLOWSTONE CITY-COUNTY HEALTH DEPT YELLOWSTONE CITY-COUNTY HEALTH DEPT	123 S 27TH ST 123 S 27TH ST	BILLINGS BILLINGS BILLINGS	59107 \$	902,945.00	/01/2023 10/01/2023 09/30/2025 Women Infant & Children
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	YELLOWSTONE CITY-COUNTY HEALTH DEPT YELLOWSTONE CITY-COUNTY HEALTH DEPT YELLOWSTONE CITY-COUNTY HEALTH DEPT	123 S 27TH ST 123 S 27TH ST 123 S 27TH ST	BILLINGS BILLINGS BILLINGS	59107 \$		/01/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	FORT PECK ASSINIBOINE & SIOUX TRIBES FORT PECK ASSINIBOINE & SIOUX TRIBES	PO BOX 1027 PO BOX 1027	POPLAR POPLAR	59255-1027 \$ 59255-1027 \$	110,707.50 10 115,300.00 10	/01/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	CONFEDERATED SALISH & KOOTENAI CONFEDERATED SALISH & KOOTENAI	PO BOX 880 PO BOX 880	SAINT IGNATIUS SAINT IGNATIUS	59865 \$ 59865 \$	93,735.50 10 95,126.00 10	/01/2023 10/01/2023 09/30/2025 Women Infant & Children /01/2023 10/01/2023 09/30/2025 Women Infant & Children
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	COUNTY OF BEAVERHEAD COUNTY OF BEAVERHEAD	327 EAST HELENA ST 327 EAST HELENA ST	DILLON DILLON	59725 \$ 59725 \$	3,547.00 10 41,229.00 10	/01/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	COUNTY OF BEAVERHEAD TOOLE COUNTY	327 EAST HELENA ST 327 EAST HELENA ST 226 1ST ST SO	DILLON DILLON SHELBY	35.25 ¥	1,527.00 10	/01/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	TOOLE COUNTY TOOLE COUNTY GLACIER COUNTY TREASURER	226 1ST ST SO 226 1ST ST SO 512 EAST MAIN	SHELBY SHELBY CUT BANK	59474 \$	31,200.00 10 30,816.00 10 35,080.00 10	/01/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	GLACIER COUNTY TREASURER RICHLAND COUNTY	512 EAST MAIN 201 W MAIN	CUT BANK SIDNEY	59427 \$ 59270 \$	37,186.00 10 63,056.00 10	/01/2023 10/01/2023 09/30/2025 Women Infant & Children FY24 /01/2023 10/01/2023 09/30/2025 Women Infant & Children FY24
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	RICHLAND COUNTY BOYS & GIRLS CLUB NORTHERN CHEYENNE	201 W MAIN PO BOX 309	SIDNEY LAME DEER	59043 \$	66,961.00 10 5,411.72 09	/01/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	BOYS & GIRLS CLUB NORTHERN CHEYENNE BOYS & GIRLS CLUB NORTHERN CHEYENNE	PO BOX 309 PO BOX 309	LAME DEER LAME DEER	59043 \$	79,985.28 09	/30/2023 09/30/2023 09/29/2024 Healthy Montana Families /30/2023 09/30/2023 09/29/2024 Healthy Montana Families
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	BOYS & GIRLS CLUB NORTHERN CHEYENNE FORT PECK ASSINIBOINE & SIOUX TRIBES FORT PECK ASSINIBOINE & SIOUX TRIBES	PO BOX 309 PO BOX 1027 PO BOX 1027	LAME DEER POPLAR POPLAR	59043 \$ 59255-1027 \$ 59255-1027 \$	58,371.05	/30/2023 09/30/2023 09/29/2024 Healthy Montana Families
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	FORT PECK ASSINIBOINE & SIOUX TRIBES FORT PECK ASSINIBOINE & SIOUX TRIBES FORT PECK ASSINIBOINE & SIOUX TRIBES	PO BOX 1027 PO BOX 1027 PO BOX 1027	POPLAR POPLAR POPLAR		23,845.10 09	/30/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	BLACKFEET TRIBE OF THE BLACKFEET INDIAN BLACKFEET TRIBE OF THE BLACKFEET INDIAN	PO BOX 850 PO BOX 850	BROWNING BROWNING	59417 \$ 59417 \$	56,996.16	/30/2023 09/30/2023 09/29/2024 Healthy Montana Families //30/2023 09/30/2023 09/29/2024 Healthy Montana Families //30/2023 09/30/2023 09/29/2024 Healthy Montana Families
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	BLACKFEET TRIBE OF THE BLACKFEET INDIAN BLACKFEET TRIBE OF THE BLACKFEET INDIAN	PO BOX 850 PO BOX 850	BROWNING BROWNING	59417 \$ 59417 \$	6,035.42 09 18,765.69 09	/30/2023 09/30/2023 09/29/2024 Healthy Montana Families /30/2023 09/30/2023 09/29/2024 Healthy Montana Families
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	Montana State University Montana State University	PO Box 172470 PO Box 172470	Bozeman Bozeman		1,139,542.00	/1/2022 10/1/2022 9/30/2023 Career Development /1/2023 10/1/2023 9/30/2024 Career Development
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	Butte 4-C's Butte 4-C's Child Care Connections	101 N Main 101 N Main 2415 W Main St Ste 1	Butte Butte	59701 \$	668,696.26	/1/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	Child Care Connections Child Care Connections Child Care Resources	2415 W Main St Ste 1 2415 W Main St Ste 1 2409 Dearborn Ave	Bozeman Bozeman Missoula	59718 \$ 1, 59718 \$ 1, 59801 \$ 1,	1,169,227.16 10 1,143,227.16 10 1,092,138.00 10	/1/2022
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	Child Care Resources Child Care Resources Child Care Resources	2409 Dearborn Ave 2409 Dearborn Ave 2409 Dearborn Ave	Missoula Missoula	59801 \$ 1, 59801 \$ 1, 59801 \$ 1,	1,233,124.49	/1/2020 10/1/2020 9/30/2024 Child Care R and R
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	Family Connections Family Connections	410 Central Avenue 410 Central Avenue	Great Falls Great Falls	59401 \$ 59401 \$	608,345.00 10 595,345.00 10	/1/2022
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	Family Connections Family Connections	410 Central Avenue 410 Central Avenue	Great Falls Great Falls	59401 \$ 1,	1,108,770.00 10 1,136,770.00 10	/1/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	HRDC District 7 HRDC District 7	7 North 31st Street 7 North 31st Street	Billings Billings	59103-1411 \$ 1,	1,750,990.00 10 1,783,490.00 10	/1/2023
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	MT Child Care Resource & Referral Networ MT Child Care Resource & Referral Networ The Nurturing Center	901 N Benton 901 N Benton 322 2nd Ave. West Ste. 2	Helena Helena Kalispell	59601 \$ 59601 \$	50,000.00 10	/1/2022
69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services 69010 Department of Public Health and Human Services	The Nurturing Center The Nurturing Center University of Montana Western	322 2nd Ave. West Ste. 2 322 2nd Ave. West Ste. 2 710 So Atlantic	Kalispell Kalispell Dillon	59901 \$	767,009.00 10	/1/2023
		710 So Atlantic 710 So Atlantic	Dillon	59725 \$	286,719.00 10	/1/2023 10/1/2023 9/30/2024 Specialized Training Programs /1/2022 10/1/2022 9/30/2023 Specialized Training Programs