

**From:** [Missouri Department of Transportation](#)  
**To:** [Ashley N. Metelski](#)  
**Subject:** Car Seat Grant Application  
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Submitted by: Visitor

Submitted values are:

**Contact Information**

Karra Dunn  
Butler County Health Department  
1619 N. Main St.  
Poplar Bluff, Missouri. 63901  
[karra.dunn@lpha.mo.gov](mailto:karra.dunn@lpha.mo.gov)  
573-785-8478

**How many convertible car seats has your agency given out from January 1- November 30?**

40

**How many high back booster car seats has your agency given out from January 1- November 30?**

10

**How many convertible car seats does your agency currently have in stock?**

2

**How many high back booster car seats does your agency currently have in stock?**

1

**Has your agency received car seats from MoDOT's Highway Safety and Traffic Office in the last 12 months? (This is different from what you're applying for right now)**

Yes

**Number of convertible car seats requested.**

25

**Number of high back booster seats requested.**

10

**List all current Child Passenger Safety Technicians at your agency.\***

Karra Dunn

**List any campaigns, car seat check events, programs, community/school events, presentations or any other outreach efforts you have participated in to promote roadway safety in your area.\***

Social Media posts, Offering seat checks at surrounding Health Departments that don't have

CPST's

**Guarantee**

Yes, I can guarantee that my organization will only allow granted car seats to be properly "installed" by a CPS Technician.