According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not 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 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data

OMB APPROVED 0579-0036

needed, and completing and reviewing the collection of information.

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year: 2009

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

Customer Number: 1115

REGISTRATION NUMBER: 93-R-0283

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include ZIP Code)

655 Ash Street Ramona, CA 92065

Telephone: (b)(6), (b)(7)(c)

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

(b)(2), (b)(7)(f)

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

FACILITY LOCATIONS (Sites) See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7023A.) Number of animals upon Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or which experiments Number of animals Number of animals teaching, research. upon which surgery, or tests were conducted involving being bred, distress to the animals and for which the use of teaching, research, appropriate anesthetic, analgesic, or TOTAL NUMBER conditioned, or held Animals Covered By experiments, or for use in teaching, The Animal accompanying pain or tranquilizing drugs would have adversely OF ANIMALS tests were affected the procedures, results, or Welfare Regulations testing, experiments, distress to the animals conducted involving (Cols. C + D + E) and for which interpretation of the teaching, research, research, or surgery no pain, distress, or experiments, surgery, or tests. (An explanation of the procedures producing pain or distress on but not yet used for appropriate anesthetic, use of pain-relieving such purposes. analgesic, or drugs. these animals and the reasons such drugs were not used must be attached to this report. tranquilizing drugs were used. 4. Dogs 5. Cats 6. Guinea Pigs 7. Hamsters 1356 1356 NONE 8 Rabbits 47 NME 9. Non-human Primates NME 0 None 0 10 Sheep 11. Pigs 12. Other Farm Animals 15 15 NOWE NONE GOATS 36 13. Other Animals ASSURANCE STATEMENTS

- Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- Each principal investigator has considered alternatives to painful procedures 2.)
- This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and 4.)

	(Chief	ERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.)) serify that the above is true, correct, and complete (7 U.S.C. Section 2143).	
SIGNA (b)(6), (b)(7)(c)		NAME AND TITLE OF C.E.O. OR I.O. (Type or Print)	DATE SIGNED
		(b)(6), (b)(7)(c)	10-05-09
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