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	ES DEPARTMENT OF A PLANT HEALTH INSPEC			1 REGISTRATION	I NO.	FURM APP OM5 NO - 05	
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3. REPORTING FACILITY (List all li sheets if necessary)	ocations where animals	were housed or used i	n actual res	earch, testing, leac	BAR HANDOW	, neldi	n additional
		FAC	CILITY LOCA	TIONS (Sites)			
600 Main Street	Bar Harbor	<u>, Me. 04609</u>					
REPORT OF ANIMALS USED BY O	R UNDER CONTROL OF	RESEARCH FACILITY	(Alfach adu	ditional sheets if ne	cessary or use APHIS FORM 7023A.)		
A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	which e teachin surgery conduc accomp distress and for anesthe	r of animals upon experiments, g, research, , or tests were ted involving sanying pain or s to the animals which appropriate alic, analgesic, or lizing drugs were	E. Number of animals upon which te experiments, research, surgery or conducted involving accompanyi to the animals and for which the anesthetic, analgesic, or tranquil have adversely affected the prociniterpretation of the teaching, resexperiments, surgery, or tests. (A the procedures producing pain or animals and the reasons such dr must be attached to this report).	r tests were ng pain or distress use of appropriate izing drugs would edures, results, or search, kn explanation of ir distress in these	F. TOTAL NO OF ANIMALS (Cols. C + D + E)
4. Dogs							
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Peromyscus	265	125		0	0		125
ASSURANCE STATEMENTS		L	1	••••••••••••••••••••••••••••••••••••••	1		l

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CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL

ype or Print)	DATE	SIGNED

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UNITED STAT	ES DEPARTMENT OF A PLANT HEALTH INSPEC	GRICULTURE		1. REGISTRATION	I NO.	ECHM APE OMB NO ()	
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3. REPORTING FACILITY (List all I sheets if necessary.)	locations where animals	were housed or used i	n actual res	earch, testing, SC	OUTH PORTLAND, ME 04106		ch additional
		FAC	LITY LOCA	TIONS (Sites)			
	Se	e attached					
DEPORT OF ANIMALS LISED BY O		RESEARCH FACILITY	(Attach adi	ditional sheets if ne	cessary or use APHIS FORM 7023A.)	•	
A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Numbe which e teachin surgery conduc accom distres: and for anesthi	er of animals upon experiments, ig, research, r, or tests were ted involving panying pain or s to the animals which appropriate etic, analgesic, or lizing drugs were	E. Number of animals upon which to experiments, research, surgery of conducted involving accompanying to the animals and for which the anesthetic, analgesic, or tranquil have adversely affected the proce- interpretation of the teaching, re experiments, surgery, or tests. A the procedures producing pain of animals and the reasons such di- must be attached to this report).	eaching, r tests were ng pain or distress use of appropriate izing drugs would edures, results, or search, An explanation of or distress in these	F. TOTAL NO OF ANIMALS (Cols. C + D + E)
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9. Non-human Primates							
10. Sheep							
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12. Other Farm Animals							
13. Other Animals							
ASSURANCE STATEMENTS							

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	CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFIC (Chief Executive Officer or Legally Responsible Institutional Official Ecertify that the above is true, correct, and complete (7.0.5.C. Section 2143)		
SIGN.		e or Print)	DATE SIGNED
APHIS FORM 7023 (AUG 91)	(Replaces VS FORM 18-23 (OCT 88), which is obsolete)		

Site: 001 Status: Active Maine Medical Center Maine General/1870 Building 22 Bramhall Street Portland, ME 04102-3175 County: Cumberland Contact Person: (b)(6), (b)(7)(c)

Site: 002 Status: Deleted Maine Med. Center Research Institute Endocrine Research Laboratory 125 John Roberts Road South Portland, ME 04106 County: Cumberland Contact Person:

(b)(6), (b)(7)(c)

result in an order to cease and	desist and to be subjec	Hereit an ording to th Cto penalties as provi	ie regulation sed for in Se	is call ection 2150	and reverse side or additional informati		en stand
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ANNUAL REPOI	RT OF RESEAF YPE OR PRINT)		,		CAPRICORN PROE 301 US ROUTE 1 SCARBOROUGH, N		
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Goats		77	. <u> </u>	7	(2	84
3. Other Animals							
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ASSURANCE STATEMENTS	· · · · · · · · · · · · · · · · · · ·						I

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13. Other Animals N/A N/A N/A N/A N/A	12. Other Farm Animals	0	1	0	0		1
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	13. Other Animals	N/A	N/A	N/A	N/A		N/A
	ASSURANCE STATEMENTS						l

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CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official) I certify that the above is true, correct, and complete (7 USC Section 2143).				
SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL	NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)	DATE SIGNED		

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APHIS FORM 7023 (Replaces VS FORM 18-23 (OCT 88), which is obsolete) (AUG 91)

UNITED STAT	ES DEPARTMENT OF A	GRICULTURE	1 REGISTRATIO	N NO	
ANIMAL AND F	PLANT HEALTH INSPEC	TION SERVICE		r - 171690 - 441	1579-00-05 0579-00-05
ANNUAL REPOR (TY	PE OR PRINT)		COLBY AREY E COLBY	COLLEGE CULLEGE CULLEGE CULLEGE VILLE, ME 04901	nt with USDA
B. REPORTING FACILITY (List all I sheets if necessary)	ocations where animals	were housed or used	in actual research, testing, tead	ching, or experimentation, or held for these purposes. Att	ach additional
		FA	CILITY LOCATIONS (Sites)		
Arey Building, F	Room 403				
EPORT OF ANIMALS USED BY O	R UNDER CONTROL OF	RESEARCH FACILITY	I. I (Attach adiditional sheets if ne	cessary or use APHIS FORM 7023A.)	
Animals Covered By The Animal Welfare Regulations	B Number of animals being bred, conditioned, or held for use in teaching, lesting, experiments, research, or surgery but not yet used for such purposes	C Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or lests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used	E. Number of animals upon which feaching, experiments, research, surgery or fests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or fests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report).	F. TOTAL NO OF ANIMAL: (Cols. C + D + E)
. Dogs	Ö	0	0	0	0
Cats	0	0	0	0	0
Guinea Pigs	0	0	0	0	0
Hamsters	0	0	0	0	0
Rabbits	0	0	0	0	0
Non-human Primates	0	0	0	0	0
0. Sheep	0	0	0	0	0
1. Pigs	O	0	0	0	0
2. Other Farm Animals	0	Ø	0	0	0
3. Other Animals	0	0	0	0	0

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	TES DEPARTMENT OF A PLANT HEALTH INSPEC			1. REGISTRATION NO. FORM API OMB NO.			
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ANNUAL REPOR	RT OF RESEAR (PE OR PRINT)				DIAMED, INC. 2 INLAND FARM DRIVE WINDHAM, ME 04062		2000
3. REPORTING FACILITY (List all sheets if necessary.)	locations where animals	were housed or used	in actual res	earch, testing, teac	hing, or experimentation, or here ion a	······	ditional
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So. 1	Vindham, Mai	ne 04062					
REPORT OF ANIMALS USED BY C	R UNDER CONTROL OF	RESEARCH FACILITY	l (Attach adie	litional sheets if ne	cessary or use APHIS FORM 7023A.)		
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4. Dogs							
5. Cats							
6. Guinea Pigs					-		
7. Hamsters							
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9. Non-human Primates							
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12. Other Farm Animals Goats	0	16		0	0		16
13. Other Animals	0	10		0	U	,	16
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ASSURANCE STATEMENTS							

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SIGNATURE OF C.E.O.

DATE SIGNED 10/17/00

APHIS FORM 7025 (AUG 91)

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	ES DEPARTMENT OF A PLANT HEALTH INSPEC			I REGISTRATION	NO R-0016	FORM APP OMB NC 0	
				2. HEADQUARTEL include Zip Cou		dress, as registered	with USDA.
					11-R-0016, Cust ld 103		
	T OF RESEAR (PE OR PRINT)	CH FACILITY			IMMUCELL CORPORATION		
(**					56 EVERGREEN DRIVE		
					PORTLAND, ME 04103		
3. REPORTING FACILITY (List all I sheets if necessary.)	ocations where animals	were housed or used i	n actual res	earch, testing, teac	ning, or experimentation, or now to		Jditional
		FAC	LITY LOCA	TIONS (Siles)			
InnuCell	orporat	ion					
Portland M	LE OHIO	53					
REPORT OF ANIMALS USED BY O	R UNDER CONTROL OF	RESEARCH FACILITY	(Attach adu	litional sheets if ne	cessary or use APHIS FORM 7023A.)		
A Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in	C Number of animals upon which teaching, research, experiments, or	which e teachin surgery	r of ammals upon xperiments, g, research, , or tests were led involving	E. Number of animals upon which te experiments, research, surgery or conducted involving accompanyi to the animals and for which the anesthetic, analgesic, or tranguili	r tests were ng pain or distress use of appropriate	F. TOTAL NO. OF ANIMALS
include incigate none	teaching, lesting, experiments,	tests were conducted	accomp	banying pain or to the animals	have adversely affected the proce interpretation of the teaching, res	search,	
	research, or surgery but not yet used for such purposes.	involving no pain, distress, or use of pain- relieving drugs.	and for anesthe	which appropriate etic, analgesic, or lizing drugs were	experiments, surgery, or tests. (A the procedures producing pain o animals and the reasons such dr must be attached to this report).	r distress in these	(Cols. C + D + E)
4. Dogs							
5. Cats					,		
6. Guinea Pigs							
7. Hamsters							
8. Rabbits		2					2
9. Non-human Primates							
10. Sheep			 			<u> </u>	
11. Pigs				4-N	<u></u>		
12. Other Farm Animals						· · · · ·	
				· · ·· ·	· · · · · · · · · · · · · · · · · · ·	<u></u>	
13. Other Animals							
		. <u></u>					
ASSURANCE STATEMENTS	1		1]

 Professionally acceptable standards governing the care, treatment, and use of animals, including approvate 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.

2). Each principal investigator has considered alternatives to painful procedures.

3). 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.

4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use

DATESIGNED

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE			1 REGISTR	ATION NO.	FORM APPROVED OM8 NO 0579-0036
			2. HEADOU	ARTERS RESEARCH FACILITY (Name and A C	J with USDA
	· .•	2	include Z		
ANNUAL REPOR	T OF RESEAR				
(TY	PE OR PRINT)			BIO PRODUCTS, INC.	
				29 TAYLOR STREET, SUITE 1 PORTLAND, ME 04102	
3. REPORTING FACILITY (List all lo	ocations where animals	were housed or used i	n actual research, testing		purposes. Attach additional
sheets if necessary.)					
		FAC	CILITY LOCATIONS (Siles)		······································
Base Lab, 637 Brunswich mE	Mere Puint	RJ			
L			(Attach adiditional sheet	s Il necessary or use APHIS FORM 7023A.)	
A.	B. Number of animals being	C Number of animals upon	 D. Number of animals u which experiments, 	experiments, research, surgery or tes	sts were
Animals Covered By The Animal	bred, conditioned, or held for use in	which teaching, research,	teaching, research, surgery, or tests wer	e conducted involving accompanying to the animals and for which the use anesthetic, analgesic, or tranguilizing	of appropriate TOTAL NO
Wellare Regulations	teaching, testing, experiments,	experiments, or tests were conducted	conducted involving accompanying pain of	have adversely affected the procedu	res, results, or
	research, or surgery but not	involving no pain, distress, or	distress to the anima and for which approp	briate experiments, surgery, or tests. (An e	xplanation of (Cols. C
	yet used for such purposes.	use of pain- relieving drugs.	anesthetic, analgesic tranquilizing drugs w used	, UI poimple and the reasons such drugs	
4. Dogs					
5. Cats					
6. Guinea Pigs	·				
7. Hamsters					
8. Rabbits					
9. Non-human Primates					
10. Sheep					
11. Pigs	NONE	NUNE	NUNE	NUNTE	NUNE
12. Other Farm Animals					
······································					
13. Other Animals					
	.				· · · · · · · · · · · · · · · · · · ·
ASSURANCE STATEMENTS	1	l	l		

Professionally acceptable standards governing the care, treatment, and use of animals, including apprortate 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. 1)

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	CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official) Legitly that the above is true, correct, and complete (7 USC Section 2143)	
SIGN4		DATE SIGNED
		10.13.00
APHI (AUG 91)		
	24F	n - Herbir terebe

This report is required by low o result in an order to cease and	CODE 1437 Family for densitiand to be subject	report according to the to penalties as provid	e regulations can led for in Section 2150	ore revese side to r additional information	OLEGA AN	
	IES DEPARTMENT OF A PLANT HEALTH INSPEC		1. REGISTRATION	i NO.	FORM APPROVED OMB NO: 0579-0036	
ANNUAL REPOR	RT OF RESEAR	CH FACILITY	2. HEADQUARTEI include Zip Coo Google Cooperations	RS RESEARCH FACILITY (Name and Add le) 11.R-0022, Cust ld 10590 UNIVERSITY OF MAINE@AUG		
Il redactions on this page 3. REPORTING FACILITY (List all sheets if necessary.)				85 TEXAS AVENUL	ouach additional	
L		FAC	CILITY LOCATIONS (Siles)			
Smell Animal	\sim					
			' (Attach adiditional sheets if ne	cessary or use APHIS FORM 7023A.)		
A Animals Covered By The Animal Welfare Regulations	B Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used	E. Number of animals upon which tead experiments, research, surgery or to conducted involving accompanying to the animals and for which the us anesthetic, analgesic, or tranquilizin have adversely affected the proced interpretation of the teaching, rese- experiments, surgery, or tests. (An the procedures producing pain or or animals and the reasons such drug must be attached to this report).	ests were pain or distress e of appropriate of drugs would ures, results, or arch, explanation of distress in these D + E	
4. Dogs	ن	0	0	Ċ	Ø	
5. Cats	C	<i>c</i>	2	0	્ર ચ	
6. Guinea Pigs	C	0	Ö	0	0	
7. Hamsters	٥	D	0	0	0	
8. Rabbits	C	0	0	0	C	
9. Non-human Primates	C	0	C	<u></u>	0	
10. Sheep	0	<i>r</i> ,	0	0	0	
11. Pigs	0	<u>C</u>	C .	<u>ن</u>	0	
12. Other Farm Animals	0	С	6	6	0	
13. Other Animals	0	0	0	<u>(;</u>	0	
ASSURANCE STATEMENTS						

 Professionally acceptable standards governing the care, treatment, and use of animals, including approriate 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.

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CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

Ecertify that the above is true, correct, and complete (7 U.S.C. Section 2143)

SIGNATURE O

DATE SIGNED

9.22.00

· Print)

APHIS FOR (AUG 91)

UNITED STAT	ES DEPARTMENT OF A			ction 2150	ade				
	PLANT HEALTH INSPEC			11-R-00		10136	FORM APPROVED OMB NO. 0579-0036		
				2. HEADOUARTER	S RESEAR	CH FACILITY (Name and A	ddress, as registered	with USDA,	
				include Zip Cod		EXX Laborator	ies, Inc.		
ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)				One IDEXX Drive					
(**					Wes	stbrook, Main	e 04092		
REPORTING FACILITY (List all I sheets if necessary)	ocations where animals	were housed or used in	n actual res	earch, lesting, leach	ning, or exp	erimentation, or held for th	hese purposes. Atta	ch additional	
5		FAC		TIONS (Sites)					
TDEVY Laborato									
IDEXX Laborato		E 06002							
ne IDEXX Drive W	estbrook, M	E 04092							
EPORT OF ANIMALS USED BY O	R UNDER CONTROL OF	RESEARCH FACILITY	(Altach adi	ditional sheets if ne	cessary or	use APHIS FORM (023A)			
,				r of animals upon experiments,		er of animals upon which t iments, research, surgery o		F.	
Animals Covered By The Animal	bred, conditioned, or	which teaching, research,	teachin	g, research,		icted involving accompany animals and for which the		TOTAL NO	
Welfare Regulations	heid for use in teaching, testing,	research, surgery, or tests were experiments, or conducted involving tests were accompanying pain or		ted involving	anesthetic, analgesic, or tranquilizing drugs have adversely affected the procedures, res		cedures, results, or	OF ANIMA	
	experiments, research, or	conducted involving no	distres	s to the animals which appropriate	exper	retation of the teaching, re iments, surgery, or tests. (An explanation of	(Cols. C	
	surgery but not yet used for such	pain, distress, or use of pain-	anesth	etic, analgesic, or lizing drugs were	anima	rocedures producing pain als and the reasons such d	rugs were not used	D + E)	
	purposes.	relieving drugs.	used.		must	be attached to this report).			
. Dogs									
. Cats									
. Guinea Pigs						******			
. Hamsters									
. Rabbits									
Non-human Primates									
0. Sheep									
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2. Other Farm Animals									
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		conducted				<u> 400 %</u>		1	
	-						44 ⁴¹⁷	<u> </u>	
SSURANCE STATEMENTS	1				L				

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CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official) I certify that the above is true, correct, and complete (7 U.S.C. Section 2143) s DATE SIGNED 12/13/00 (AUG 91)

Op