

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

|  |                             |   |
|--|-----------------------------|---|
| <b>1. REGISTRATION NO.</b><br>48-R-0002  | <b>CUSTOMER NO.</b><br>1459 | <b>FORM APPROVED</b><br>OMB NO. 0579-0036 |
| <b>2. HEADQUARTERS RESEARCH FACILITY</b> (Name and Address, as registered with USDA, include Zip Code) |                             |   |
| UNIVERSITY OF KANSAS<br>ANIMAL CARE UNIT<br>B054 MALOTT HALL<br>LAWRENCE, KS 66045                     |                             |   |

**ANNUAL REPORT OF RESEARCH FACILITY**  
(TYPE OR PRINT)

**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)

SITE1  
LAWRENCE, KS 66045

**REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY** (Attach additional sheets if necessary 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 teaching, experiments, research, surgery or tests 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 tests. (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 ANIMALS (Cols. C + D + E) |
|--|---|---|---|--|---|
| 4. Dogs  |   | 5   |   |  | 5   |
| 5. Cats  |   |   |   |  |   |
| 6. Guinea Pigs                                       |   |   |   |  |   |
| 7. Hamsters  |   |   |   |  |   |
| 8. Rabbits   |   |   | 63  |  | 63  |
| 9. Non-Human Primates                                |   |   |   |  |   |
| 10. Sheep  |   |   |   |  |   |
| 11. Pigs   |   |   | 10  |  | 10  |
| 12. Other Farm Animals                               |   |   |   |  |   |
| chickens   |   | 20  |   |  | 20  |
| 13. Other Animals                                    |   |   |   |  |   |
|  |   |   |   |  |   |
|  |   |   |   |  |   |
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**ASSURANCE STATEMENTS**

- 1) 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.
- 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 the 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.

**CERTIFICATION BY HEADQUARTERS 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)

|  |   |                    |
|--|---|--------------------|
| <b>SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL</b> | <b>NAME &amp; TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL</b> (Type or Print) | <b>DATE SIGNED</b> |
|  |   | 11/22/2005         |

**APHIS Form 7023 Additional Reported Sites**

The following additional sites have been reported by the facility. The reported sites have not been verified by APHIS and have been provided by the facility solely for completeness of the APHIS Form 7023 Annual Reporting submission.

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Registration Number: 48-R-0002  
Customer Number: 1459  
Facility: UNIVERSITY OF KANSAS  
ANIMAL CARE UNIT  
B054 MALOTT HALL  
LAWRENCE, KS 66045

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Site A Malott Hall  
Site A B054 Malott Hall  
Site A Lawrence, KS 66045  
Site B Haworth Hall  
Site B 8046 Haworth Hall  
Site B Lawrence, KS 66045  
Site C LSRL  
Site C 1501 Wakarusa  
Site C Lawrence, KS 66047  
Site D Higuchi  
Site D 2101 Constant Avenue  
Site D Lawrence, KS 66045

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**COPY**

CERTIFICATE NUMBER: 48-R-0003

CUSTOMER NUMBER: 1460

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
(TYPE OR PRINT)

University Of Ks Med Ctr  
3901 Rainbow Blvd  
1040 Wescoe Pavilion - Ms 2014  
Kansas City, KS 66160

Telephone: (913)-588-7015

**3. REPORTING FACILITY** (List all locations where animals were housed or used in actual research, testing, 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 )

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal 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 teaching, experiments, research, surgery or tests 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 tests. ( An explanation of the procedures producing pain or distress in these animals and the reason such drugs were not used must be attached to this report ) | F. TOTAL NUMBER OF ANIMALS ( COLUMNS C + D + E ) |
|--|--|---|---|--|--|
| 4. Dogs  | 0  | 0   | 0   | 0  | 0  |
| 5. Cats  | 7  | 0   | 0   | 0  | 0  |
| 6. Guinea Pigs                                       | 0  | 0   | 0   | 0  | 0  |
| 7. Hamsters  | 0  | 8   | 100   | 0  | 108  |
| 8. Rabbits   | 0  | 76  | 183   | 0  | 259  |
| 9. Non-human Primates                                | 0  | 13  | 248   | 0  | 261  |
| 10. Sheep  | 0  | 0   | 0   | 0  | 0  |
| 11. Pigs   | 0  | 0   | 89  | 0  | 89   |
| 12. Other Farm Animals                               |  |   |   |  |  |
| 13. Other Animals                                    |  |   |   |  |  |
| <i>Gerbils</i>                                       | 0  | 0   | 102   | 0  | 102  |

**ASSURANCE STATEMENTS**

- 1) 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.
- 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.

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

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

DATE SIGNED

*10-31-2005*

AF

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 48-R-0014

FORM APPROVED  
OMB NO. 0579-0036

CUSTOMER NUMBER: 1446

**COPY**

**ANNUAL REPORT OF RESEARCH FACILITY**  
( TYPE OR PRINT )

Wichita State University  
1845 Fairmount Box #26  
Wichita, KS 67260

Telephone: (316) -978-3111

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

Room 504, Hubbard Hall

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 )

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal 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 an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. ( An explanation of the procedures producing pain or distress in these animals and the reas such drugs were not used must be attached to this repor | F. TOTAL NUMBER OF ANIMALS ( COLUMNS C + D + E ) |
|--|--|---|--|---|--|
| 4. Dogs  |  |   |  |   |  |
| 5. Cats  |  |   |  |   |  |
| 6. Guinea Pigs                                       |  |   |  |   |  |
| 7. Hamsters  | 74   | 200   | 0  | 0   | 200  |
| 8. Rabbits   |  |   |  |   |  |
| 9. Non-human Primates                                |  |   |  |   |  |
| 10. Sheep  |  |   |  |   |  |
| 11. Pigs   |  |   |  |   |  |
| 12. Other Farm Animals                               |  |   |  |   |  |
| 13. Other Animals (non-regulated)                    |  |   |  |   |  |
| Mice   | 133  | 149   | 0  | 0   | 149  |
| Rats   | 8  | 8   | 0  | 0   | 8  |

ASSURANCE STATEMENTS

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- 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 app 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 in: 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.

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

DATE SIGNED

10/18/05

This report is required by law (7 USC 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.

See reverse side for additional information.

Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO. 48-R-0015  
CUSTOMER NO. 1437

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
(TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)  
EMPORIA STATE UNIVERSITY  
1200 COMMERCIAL  
EMPORIA, KS 66801

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)

SITE1  
EMPORIA, KS 66801

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary 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 teaching, experiments, research, surgery or tests 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 tests. (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 ANIMALS (Cols. C + D + E) |
|--|---|---|---|--|---|
| 4. Dogs  |   |   |   |  |   |
| 5. Cats  |   |   |   |  |   |
| 6. Guinea Pigs                                       |   |   |   |  |   |
| 7. Hamsters  |   |   |   |  |   |
| 8. Rabbits   |   |   |   |  |   |
| 9. Non-Human Primates                                |   |   |   |  |   |
| 10. Sheep  |   |   |   |  |   |
| 11. Pigs   |   |   |   |  |   |
| 12. Other Farm Animals                               |   |   |   |  |   |
| 13. Other Animals                                    |   |   |   |  |   |
| Nonregulated, mice                                   |   | 189   |   |  | 189                                       |
| Nonregulated, corn snakes                            |   | 27  |   |  | 27  |
| Nonregulated American toad                           | 5   |   |   |  |   |

ASSURANCE STATEMENTS

- 1) 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.
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- 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 the 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.

**CERTIFICATION BY HEADQUARTERS 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)

|   |  |             |
|---|--|-------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED |
|   |  | 11/03/2005  |

APHIS FORM 7023  
(AUG 91)

(Replaces VS FORM 18-23 (Oct 88), which is obsolete

PART 1 - HEADQUARTERS



UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**COPY**  
CERTIFICATE NUMBER: 48-R-0018  
CUSTOMER NUMBER: 1359

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
(TYPE OR PRINT)

Pittsburg State Univ  
1701 S Broadway  
Pittsburg, KS 66762

Telephone: (620)-235-4732

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

Site 1: 1701 S. Broadway, Heckert, Wells Hall, Pittsburg, KS 66762  
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 )

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use o 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 an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. ( An explanation of the procedures producing pain or distress in these animals and the reasc such drugs were not used must be attached to this report | F. TOTAL NUMBER OF ANIMALS ( COLUMN C + D + E ) |
|--|---|--|--|---|---|
| 4. Dogs  |   |  |  |   |   |
| 5. Cats  |   |  |  |   |   |
| 6. Guinea Pigs                                       |   |  |  |   |   |
| 7. Hamsters  |   |  |  |   |   |
| 8. Rabbits   |   |  |  |   |   |
| 9. Non-human Primates                                |   |  |  |   |   |
| 10. Sheep  |   |  |  |   |   |
| 11. Pigs   |   |  |  |   |   |
| 12. Other Farm Animals                               |   |  |  |   |   |
| 13. Other Animals                                    |   |  |  |   |   |
| Hedgehog   |   | 1  |  |   | 1   |
| Prairie Dog  |   | 1  |  |   | 1   |

**ASSURANCE STATEMENTS**

- 1) 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 rese teaching, testing, surgery, or experimentation were followed by this research facility.
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- 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.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

SIGN

DATE SIGNED

*11-22-2005*

APHIS

NOV 25 2005

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

CERTIFICATE NUMBER: 48-R-0025  
CUSTOMER NUMBER: 1424

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
( TYPE OR PRINT )

Colby Community College  
1255 S Range  
Colby, KS 67701

Telephone: (785) -462-3984

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

Stanley Carr Agricultural Center 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 )**

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use o 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 an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. ( An explanation of the procedures producing pain or distress in these animals and the reasc such drugs were not used must be attached to this report | F. TOTAL NUMBER OF ANIMALS ( COLUMN C + D + E ) |
|--|---|--|--|---|---|
| 4. Dogs  | 0   | 0  | 26   | 0   | 26  |
| 5. Cats  | 0   | 1  | 17   | 0   | 18  |
| 6. Guinea Pigs                                       | 0   | 0  | 0  | 0   | 0   |
| 7. Hamsters  | 0   | 0  | 0  | 0   | 0   |
| 8. Rabbits   | 4   | 1  | 0  | 0   | 1   |
| 9. Non-human Primates                                | 0   | 0  | 0  | 0   | 0   |
| 10. Sheep  | 0   | 0  | 0  | 0   | 0   |
| 11. Pigs   | 0   | 0  | 0  | 0   | 0   |
| 12. Other Farm Animals                               | 0   | 0  | 0  | 0   | 0   |
| 13. Other Animals                                    | 0   | 0  | 0  | 0   | 0   |

**ASSURANCE STATEMENTS**

- 1) 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 rese 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 app 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 in 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.

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

SIC

( Type or Print )

DATE SIGNED

11/29/05



UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

REGISTRATION #  
Cert # 48-R-0025 Cust # 1424

FORM APPROVED  
OMB NO. 0579-0036

CONTINUATION SHEET FOR ANNUAL REPORT  
OF RESEARCH FACILITY  
(TYPE OR PRINT)

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

Colby Community College  
1255 S. Range  
Colby, KS 67701

Phone (785)462-3984

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use this form.)

| A. Animals Covered By The Animal Welfare Regulations<br><br>12. &/OR 13. Other (List by species) | 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 teaching, experiments, research, surgery or tests 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 tests. (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 ANIMALS<br>(Cols. C + D + E) |
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ASSURANCE STATEMENTS

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

CERTIFICATION BY HEADQUARTERS 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).

|  |   |                         |
|--|---|-------------------------|
| SIGNATURE OF CEO OR INSTITUTIONAL OFFICIAL | <p style="text-align: right;">(print)</p> <p style="text-align: center;">- 2 2005</p> | DATE SIGNED<br>11/29/05 |
|--|---|-------------------------|

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**COPY**

1. CERTIFICATE NUMBER: 48-R-0029  
CUSTOMER NUMBER: 1406

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
( TYPE OR PRINT )

Parmley Education & Research Ctr  
Po Box 17  
Rose Hill, KS 67133

Telephone: (316)-776-0040

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

*110 N. Rose Hill Rd.*

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 )

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye 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 an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. ( An explanation of the procedures producing pain or distress in these animals and the reas such drugs were not used must be attached to this repor | F. TOTAL NUMBER OF ANIMALS ( COLUMN C + D + E ) |
|--|---|---|--|---|---|
| 4. Dogs  | 0   | 0   | 0  | 0   | 0   |
| 5. Cats  | 0   | 0   | 0  | 0   | 0   |
| 6. Guinea Pigs                                       | 0   | 0   | 0  | 0   | 0   |
| 7. Hamsters  | 0   | 0   | 0  | 0   | 0   |
| 8. Rabbits   | 0   | 0   | 0  | 0   | 0   |
| 9. Non-human Primates                                | 0   | 0   | 0  | 0   | 0   |
| 10. Sheep  | 0   | 0   | 0  | 0   | 0   |
| 11. Pigs   | 0   | 0   | 0  | 0   | 0   |
| 12. Other Farm Animals                               | 0   | 0   | 0  | 0   | 0   |
| 13. Other Animals                                    | 0   | 0   | 0  | 0   | 0   |

ASSURANCE STATEMENTS

- 1) 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 rese 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 apr 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 in 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.

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

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

*11-29-05*

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 48-R-0035  
CUSTOMER NUMBER: 1390

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
( TYPE OR PRINT )

Trailane Kennels  
22549 C Rd  
Soldier, KS 66540

Telephone: (785) -948-2557

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, 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 )**

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye 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 an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. ( An explanation of the procedures producing pain or distress in these animals and the reasc such drugs were not used must be attached to this report | F. TOTAL NUMBER OF ANIMALS ( COLUMNS C + D + E ) |
|--|---|---|--|---|--|
| 4. Dogs  | 49  | 20  | 0  | 0   | 20   |
| 5. Cats  |   |   |  |   |  |
| 6. Guinea Pigs                                       |   |   |  |   |  |
| 7. Hamsters  |   |   |  |   |  |
| 8. Rabbits   |   |   |  |   |  |
| 9. Non-human Primates                                |   |   |  |   |  |
| 10. Sheep  |   |   |  |   |  |
| 11. Pigs   |   |   |  |   |  |
| 12. Other Farm Animals                               |   |   |  |   |  |
| 13. Other Animals                                    |   |   |  |   |  |

**ASSURANCE STATEMENTS**

- 1) 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 rese: 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 app 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 in 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.

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

SIGNATURE OF CEO OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF CEO OR INSTITUTIONAL OFFICIAL ( Type or Print )

DATE SIGNED

11/4/05

This report is required by law (7 USC 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.

See reverse side for additional information.

Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

|                                  |                      |                                    |
|----------------------------------|----------------------|------------------------------------|
| 1. REGISTRATION NO.<br>48-R-0039 | CUSTOMER NO.<br>1420 | FORM APPROVED<br>OMB NO. 0579-0036 |
|----------------------------------|----------------------|------------------------------------|

**ANNUAL REPORT OF RESEARCH FACILITY**  
(TYPE OR PRINT)

|   |  |  |
|---|--|--|
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) |  |  |
| HILL'S PET NUTRITION CENTER<br>PO BOX 1658<br>TOPEKA, KS 66601                                  |  |  |

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)

|   |  |
|---|--|
| HILL'S PET NUTRITION CENTER<br>TOPEKA, KS 66617 |  |
|---|--|

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary 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 teaching, experiments, research, surgery or tests 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 tests. (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 ANIMALS (Cols. C + D + E) |
|--|---|---|---|--|---|
| 4. Dogs  | 14  | 481   |   |  | 481                                       |
| 5. Cats  | 25  | 489   |   |  | 489                                       |
| 6. Guinea Pigs                                       |   |   |   |  |   |
| 7. Hamsters  |   |   |   |  |   |
| 8. Rabbits   |   |   |   |  |   |
| 9. Non-Human Primates                                |   |   |   |  |   |
| 10. Sheep  |   |   |   |  |   |
| 11. Pigs   |   |   |   |  |   |
| 12. Other Farm Animals                               |   |   |   |  |   |
| 13. Other Animals                                    |   |   |   |  |   |

ASSURANCE STATEMENTS

- 1) 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.
- 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 the 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.

**CERTIFICATION BY HEADQUARTERS 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)

|   |  |             |
|---|--|-------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED |
|   |  | 11/04/2005  |

This report is required by law (7 USC 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.

See reverse side for additional information.

Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**COPY**

REGISTRATION NO. 48-R-0107  
CUSTOMER NO. 14439

FORM APPROVED  
OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY**  
(TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)  
BIOMUNE CO.  
8906 ROSEHILL RD  
LENEXA, KS 66215  
(913) 894-0230

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 APHS 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 teaching, experiments, research, surgery or tests 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 tests. (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 ANIMALS (Cols. C + D + E) |
|--|---|---|---|--|---|
| 4. Dogs  |   |   |   |  |   |
| 5. Cats  |   |   |   |  |   |
| 6. Guinea Pigs                                       | 0   | 7   | 0   | 0  | 7   |
| 7. Hamsters  |   |   |   |  |   |
| 8. Rabbits   | 0   | 167   | 0   | 0  | 167                                       |
| 9. Non-Human Primates                                |   |   |   |  |   |
| 10. Sheep  |   |   |   |  |   |
| 11. Pigs   |   |   |   |  |   |
| 12. Other Farm Animals                               |   |   |   |  |   |
| 13. Other Animals                                    |   |   |   |  |   |

ASSURANCE STATEMENTS

- 1) 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.
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**CERTIFICATION BY HEADQUARTERS 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)

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

11/8/05

(B), which is obsolete

PART 1 - HEADQUARTERS

(AUG 91)

NOV 14 2005

The following sites have been reported by the facility.

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Registration Number: 48-R-0107  
Customer Number: 14439  
Facility: BIOMUNE CO.  
8906 ROSEHILL RD  
LENEXA, KS 66215  
(913) 894-0230

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BIOMUNE CO.  
8906 ROSEHILL RD  
LENEXA, KS 66215

BIOMUNE COMPANY  
6249 Holiday Drive  
Kansas City, KS 66106

NOV 14 2005