

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|---|---------------------|------------------------------------|
| 1. REGISTRATION NO. 32-R-0002 | CUSTOMER NO. 799 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| INDIANA UNIVERSITY AT BLOOMINGTON 819 N. FORREST AVENUE BLOOMINGTON, IN 47408 (812) 855-2356 | | |

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.)

See Attached Listing FACILITY LOCATIONS(sites)

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 | 0 | | 26 | | |
| 6. Guinea Pigs | 7 | 7 | 46 | | 26 |
| 7. Hamsters | 816 | 101 | 1108 | | 53 |
| 8. Rabbits | 0 | | 28 | | 1209 |
| 9. Non-Human Primates | 61 | 1 | 8 | | 28 |
| 10. Sheep | | | | | 9 |
| 11. Pigs | | | | | |
| 12. Other Farm Animals | | | | | |
| 13. Other Animals | | | | | |
| chinchillas | 9 | 2 | 1 | | 3 |
| spiny mice | 16 | 150 | | | 150 |
| deer mice | 0 | 6 | 10 | | 16 |
| 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 | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED |
| [Redacted Signature] | [Redacted Name & Title] | 12/1/08 |

(AUG 91)

10-25 (Oct 88), which is obsolete

PART 1 - HEADQUARTERS

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|---|---------------------|------------------------------------|
| 1. REGISTRATION NO. 32-R-0007 | CUSTOMER NO. 779 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| PURDUE UNIVERSITY 410 SOUTH UNIVERSITY ST WEST LAFAYETTE, IN 47907 | | |

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)

ALL CAMPUS SITES
WEST LAFAYETTE, IN 47906-6208

IU-PU FT. WAYNE
FORT WAYNE, IN 46805

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 | | 60 | 214 | | 274 |
| 5. Cats | | 9 | 29 | | 38 |
| 6. Guinea Pigs | | 1 | 389 | | 390 |
| 7. Hamsters | | | 246 | | 246 |
| 8. Rabbits | | 26 | 54 | | 80 |
| 9. Non-Human Primates | | | | | |
| 10. Sheep | | 16 | 135 | | 151 |
| 11. Pigs | | 4 | 195 | | 199 |
| 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 |
|  |  | 11/15/2006 |

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|--|---------------------|------------------------------------|
| 1. REGISTRATION NO. 32-R-0009 | CUSTOMER NO. 782 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| METHODIST RESEARCH INSTITUTE/CLARIAN HEALTH 1-65 @ 21ST STREET, P.O. BOX 1367 INDIANAPOLIS, IN 46202 (317) 962-8558 | | |
| 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.) | | |

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

OCT 16 2006

See Attached Listing

FACILITY LOCATIONS (sites)

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 | 1 | | 134 | | 134 |
| 5. Cats | 8 | | 22 | | 22 |
| 6. Guinea Pigs | | | | | |
| 7. Hamsters | | | | | |
| 8. Rabbits | | | 39 | | 39 |
| 9. Non-Human Primates | | | | | |
| 10. Sheep | | | 26 | | 26 |
| 11. Pigs | 4 | | 218 | | 218 |
| 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 LEGALLY RESPONSIBLE INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR LEGALLY RESPONSIBLE INSTITUTIONAL OFFICIAL | DATE SIGNED |
| [Redacted Signature] | [Redacted Name & Title] | 10-9-06 |

(AUG 91)

APHIS FORM 18-23 (Oct 88), which

PART 1 - HEADQUARTERS

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|---|---------------------|------------------------------------|
| 1. REGISTRATION NO. 32-R-0010 | CUSTOMER NO. 781 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| BUTLER UNIVERSITY UNIVERSITY RESEARCH PROGRAMS 4600 SUNSET AVENUE INDIANAPOLIS, IN 46208 | | |

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.)

ALL CAMPUS SITES
INDIANAPOLIS, IN 46208

FACILITY LOCATIONS (sites)

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 | | | | | |

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 |
| | | 11/22/2006 |

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO. 32-R-0011 CUSTOMER NO. 780

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)

BALL STATE UNIVERSITY
ACADEMIC RESEARCH & SPON. PRO.
2000 UNIVERSITY AVENUE
MUNCIE, IN 47306
(765) 285-1600

NOV 30 2006

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.)

See Attached Listing

FACILITY LOCATIONS (sites)

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 | 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 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)

INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL

DATE SIGNED

11/21/06

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|--|---------------------|------------------------------------|
| 1. REGISTRATION NO. 32-R-0012 | CUSTOMER NO. 790 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| INDIANA UNIVERSITY KOKOMO 2300 S. WASHINGTON STREET P. O. BOX 9003 KOKOMO, IN 46904 (765) 455-9371 | | |

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.)

See Attached Listing

FACILITY LOCATIONS (sites)

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 | 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 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)

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL

DATE SIGNED

10/1/06

88), wh

HEADQUARTERS

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.

guc

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. 32-R-0015 | CUSTOMER NO. 788 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| INDIANA UNIV -PURDUE UNIV-INDIANAPOLIS SCHOOL OF SCIENCE, 402 N BLACKFORD ST, LD222 INDIANAPOLIS, IN 46202 (317) 274-0625 | | |

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

For the period *October 1, 2005 to September 30, 2006*

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.)

See Attached Listing FACILITY LOCATIONS(sites)

Department of Biology

DEC 0 1 2006

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 | 0- | | | | 0- |
| 5. Cats | 0- | | | | 0- |
| 6. Guinea Pigs | 0- | | | | 0- |
| 7. Hamsters | 0- | | | | 0- |
| 8. Rabbits | 0- | | | | 0- |
| 9. Non-Human Primates | 0- | | | | 0- |
| 10. Sheep | 0- | | | | 0- |
| 11. Pigs | 0- | | | | 0- |
| 12. Other Farm Animals | 0- | | | | 0- |
| 13. Other Animals | 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 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)

STITUTIONAL OFFICIAL

NAME & TITLE OF OFFICIAL

Type or Print)

DATE SIGNED

11/20/06

Replaces VS FORM 18-23 (Oct 88),

PART 1 - HEADQUARTERS

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

1. REGISTRATION NO. 32-R-0016 CUSTOMER NO. 776 FORM APPROVED OMB NO. 0519-0036

2. HEADQUARTERS RESEARCH FACILITY Name and Address as registered with USDA (include Zip Code) **University of Notre Dame
Graduate Studies & Research
500 Administration
Notre Dame, IN
(574) 631-6085**

RECEIVED
NOV 27 2006

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 needed.)

See Attached Listing FACILITY LOCATIONS (if any)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7020A)

| A. Species (Specify Taxonomic Classification, where appropriate) | 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) |
|--|--|--|--|--|---|
| 1. Dog | 0 | 0 | 0 | 0 | 0 |
| 2. Rat | 0 | 0 | 0 | 0 | 0 |
| 3. Guinea Pig | 0 | 0 | 31 | 0 | 31 |
| 4. Hamster | 0 | 0 | 0 | 0 | 0 |
| 5. Rabbit | 0 | 29 | 0 | 0 | 29 |
| 6. Non Human Primate | 0 | 3 | 0 | 0 | 3 |
| 7. Sheep | 0 | 0 | 0 | 0 | 0 |
| 8. Pig | 0 | 0 | 0 | 0 | 0 |
| 9. Other Farm Animals | 0 | 0 | 0 | 0 | 0 |
| 10. Other Animals | | | | | |
| Snowshoe hare | | 1 | | | 1 |
| Southern vole | | 22 | 3 | | 25 |
| Deer mouse | | 176 | 10 | | 186 |
| ASSURANCE STATEMENTS | | | | | 186 |

- 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 certifying 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 components 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 HEADQUARTERS RESEARCH FACILITY OFFICIAL: [Redacted]

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

DATE SIGNED: 11/17/06

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|---|---------------------|------------------------------------|
| 1. REGISTRATION NO. 32-R-0018 | CUSTOMER NO. 789 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| INDIANA UNIVERSITY SCHOOL OF DENTISTRY 1121 W MICHIGAN STREET DS S-502 INDIANAPOLIS, IN 46202 (317) 274-5414 | | |

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT) NOV 28 2006

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)

| 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 | | | 29 | | 29 |
| 5. Cats | | | 32 | | 32 |
| 6. Guinea Pigs | | | 0 | | 0 |
| 7. Hamsters | | | 0 | | 0 |
| 8. Rabbits | | | 11 | | 11 |
| 9. Non-Human Primates | | | 0 | | 0 |
| 10. Sheep | | | 0 | | 0 |
| 11. Pigs | | | 0 | | 0 |
| 12. Other Farm Animals | | | 0 | | 0 |
| 13. Other Animals | | | 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 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 |
| [Redacted Signature] | [Redacted Name & Title] | 11/21/06 |

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|---|----------------------------|------------------------------------|
| 1. REGISTRATION NO. 32-R-0019 | CUSTOMER NO. 778 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) INDIANA STATE UNIVERSITY DEPT OF ECOLOGY AND ORANISMAL BIOLOGY 600 CHESTNUT STREET TERRE HAUTE, IN 47809 | | |

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)

INDIANA STATE UNIVERSITY
TERRE HAUTE, IN 47809

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 | 2 | | 11 | | 11 |
| 9. Non-Human Primates | | | | | |
| 10. Sheep | | | | | |
| 11. Pigs | | | | | |
| 12. Other Farm Animals | | | | | |
| 13. Other Animals | | | | | |
| smoky shrew | | 2 | | | 2 |
| southeastern shrew | | 5 | | | 5 |
| western harvest mouse | | 11 | | | 11 |

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 [Redacted] | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) [Redacted] | DATE SIGNED 12/13/2006 |
|--|---|--------------------------------------|

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|---|---------------------|------------------------------------|
| 1. REGISTRATION NO. 32-R-0020 | CUSTOMER NO. 784 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| BIOANALYTICAL SYSTEMS INC 10424 MIDDLE MT. VERNON RD MOUNT VERNON, IN 47620 (812) 985-5900 | | |

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 |
|--------------------------|
| 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 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 | 56 | 300 | 40 | 0 | 340 |
| 5. Cats | | | | | |
| 6. Guinea Pigs | 5 | 75 | 0 | 0 | 75 |
| 7. Hamsters | | | | | |
| 8. Rabbits | 23 | 103 | 62 | 0 | 165 |
| 9. Non-Human Primates | 42 | 152 | 48 | 0 | 200 |
| 10. Sheep | | | | | |
| 11. Pigs | 3 | 54 | 4 | 0 | 58 |
| 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 |
| [Redacted Signature] | [Redacted Name & Title] | 11 Oct 06 |

(AUG 91)

PART 1 - HEADQUARTERS

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|---|---------------------|------------------------------------|
| 1. REGISTRATION NO. 32-R-0023 | CUSTOMER NO. 785 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| SCHERING-PLOUGH ANIMAL HEALTH CORP. P O BOX 445 FARMERSBURG, IN 47850 (908) 629-3393 | | |

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)

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 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 | 33 | 181 | 0 | 0 | 181 |
| 5. Cats | 10 | 62 | 21 | 0 | 83 |
| 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.

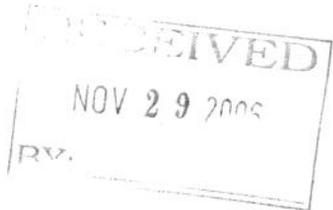
CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional official)

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

| | | |
|-------------------------------------|--|-------------|
| SIGNATURE OF INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED |
| [Redacted Signature] | [Redacted Name & Title] | 11/28/08 |

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

PART 1 - HEADQUARTERS



NOV 29 2006

result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

additional information.

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UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|---|---------------------|------------------------------------|
| 1. REGISTRATION NO. 32-R-0025 | CUSTOMER NO. 798 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| INDIANA UNIVERSITY SCHOOL OF MEDICINE 1120 S. DRIVE, FH-302 INDIANAPOLIS, IN 46202 | | |

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

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 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 | 1 | 51 | 55 | | 106 |
| 5. Cats | | | | | |
| 6. Guinea Pigs | | | 60 | | 60 |
| 7. Hamsters | | | | | |
| 8. Rabbits | | 36 | 93 | | 129 |
| 9. Non-Human Primates | | | 7 | | 7 |
| 10. Sheep | | | 41 | | 41 |
| 11. Pigs | | 2 | 283 | | 285 |
| 12. Other Farm Animals | | | | | |
| 13. Other Animals | | | | | |
| Gerbil | | | 13 | | 13 |

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)

| | | | | |
|------|----------|---------------------|-----------|-------------------------|
| SIGN | OFFICIAL | NAME & TITLE Dea | or Print) | DATE SIGNED 11/21/06 |
|------|----------|---------------------|-----------|-------------------------|

APHIS FORM 7023
(AUG 19)

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

PART 1 - HEADQUARTERS

only

See reverse side for additional information.

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|---|--------------------|------------------------------------|
| 1. REGISTRATION NO. 32-R-0029 | CUSTOMER NO. 25 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| BAYER CORPORATION 1884 MILES AVENUE ELKHART, IN 46514 (574) 264-8769 | | |

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)
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 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 | | | 8 | | 8 |
| 5. Cats | | | | | |
| 6. Guinea Pigs | | | | | |
| 7. Hamsters | | | | | |
| 8. Rabbits | | 13 | | | 13 |
| 9. Non-Human Primates | | | | | |
| 10. Sheep | | 3 | | | 3 |
| 11. Pigs | | | | | |
| 12. Other Farm Animals | | | | | |
| Goats | | 40 | | | 40 |
| 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)

| | |
|--|--------------|
| NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL | DATE SIGNED |
| [Redacted] | Nov 27, 2006 |

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|--|---------------------|------------------------------------|
| 1. REGISTRATION NO. 32-R-0035 | CUSTOMER NO. 765 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| HARLAN BIOPRODUCTS FOR SCIENCE INC P.O. BOX 29176 INDIANAPOLIS, IN 46229 (317) 894-7521 | | |

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

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 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 | 121 | | 2,426 | | 2,426 |
| 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)

SIGNATURE

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

10/18/06

APHIS FO
(AUG 9

PART 1 - HEADQUARTERS

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|---|----------------------|------------------------------------|
| 1. REGISTRATION NO. 32-R-0038 | CUSTOMER NO. 1694 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| THE VETERINARIANS BLOOD BANK INC 3849 S. STATE ROAD 135 VALLONIA, IN 47281 | | |

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

NOV 30 2006

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)

| 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 | 176 | | | | |
| 5. Cats | 98 | | | | |
| 6. Guinea Pigs | | | | | |
| 7. Hamsters | | | | | |
| 8. Rabbits | | | | | |
| 9. Non-Human Primates | | | | | |
| 10. Sheep | | | | | |
| 11. Pigs | | | | | |
| 12. Other Farm Animals | | | | | |
| 13. Other Animals HORSES | 21 | | | | |

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)

[Redacted Signature]

DATE SIGNED

11-29-06

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 018C-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|--|-----------------------|------------------------------------|
| 1. REGISTRATION NO. 32-R-0039 | CUSTOMER NO. 12271 | FORM APPROVED CMB NO. 0579-0038 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) ROSE-HULMAN INSTITUTE OF TECHNOLOGY 5500 WABASH AVE TERRE HAUTE, IN 47803 (812) 872-6033 | | |

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)

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 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 | 0 | | | | |
| 5. Cats | 0 | | | | |
| 6. Guinea Pigs | 0 | | | | |
| 7. Hamsters | 0 | | | | |
| 8. Rabbits | 0 | | | | |
| 9. Non-Human Primates | 0 | | | | |
| 10. Sheep | 0 | | | | |
| 11. Pigs | 0 | | | | |
| 12. Other Farm Animals | 0 | | | | |
| 13. Other Animals | 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 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)

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

DATE SIGNED

11/29/06

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|--|-----------------------|------------------------------------|
| 1. REGISTRATION NO. 32-R-0040 | CUSTOMER NO. 15073 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| EVANSVILLE CENTER FOR MEDICAL EDUCATION 8600 UNIVERSITY BOULEVARD EVANSVILLE, IN 47712 (812) 464-1831 | | |

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)

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 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 | 0 | 0 | 0 | 0 | 0 |
| 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 (Print) | DATE SIGNED |
| [Redacted Signature] | [Redacted Name & Title] | 10/2/2006 |

(AUG 91)

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

PART 1 - HEADQUARTERS

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|---|------------------------------|---|
| 1. REGISTRATION NO. 32-R-0039 | CUSTOMER NO. 12271 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) ROSE-HULMAN INSTITUTE OF TECHNOLOGY 5500 WABASH AVE TERRE HAUTE, IN 47803 | | |

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)

ROSE-HULMAN INSTITUTE OF TECHNOLOGY
TERRE HAUTE, IN 47803

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 | | | | | |
| | | | | | |
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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)

| | | |
|--|---|--------------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED |
| [Redacted Signature] | [Redacted Name & Title] | 12/08/2006 |

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|---|-----------------------|------------------------------------|
| 1. REGISTRATION NO. 32-R-0041 | CUSTOMER NO. 17782 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| NORTHWEST CENTER FOR MEDICAL EDUCATION 3400 BROADWAY GARY, IN 46408 (219) 980-6500 | | |

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)

See Attached Listing
IU School of Medicine--Northwest
Suite 3029

NOV 27 2006

BY:

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 | | | | | 0 |
| 5. Cats | | | | | 0 |
| 6. Guinea Pigs | | | | | 0 |
| 7. Hamsters | | | | | 0 |
| 8. Rabbits | 0 | 24 | 0 | 0 | 24 |
| 9. Non-Human Primates | | | | | 0 |
| 10. Sheep | | | | | 0 |
| 11. Pigs | | | | | 0 |
| 12. Other Farm Animals | | | | | 0 |
| 13. Other Animals | | | | | 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 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)

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

DATE SIGNED

11-20-06

PART 1 - HEADQUARTERS

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. 32-R-0042 | CUSTOMER NO. 12190 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| INDIANA UNIVERSITY SCHOOL OF MEDICINE SOUTH BEND RACKLIN-CARMICHAEL HALL 1234 NOTRE DAME AVE SOUTH BEND, IN 46617 (574) 631-5574 | | |

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.)

| | |
|----------------------|----------------------------|
| See Attached Listing | FACILITY LOCATIONS (sites) |
|----------------------|----------------------------|

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 | NO Regulated animals used in the past calendar year. | | | | |
| 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 information provided 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

10/29/06

(AUG 91)

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

PART 1 - HEADQUARTERS

SEP 20 2006

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. 32-R-0043 | CUSTOMER NO. 29811 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| BIONANALYTICAL SYSTEMS INC 2701 KENT AVE WEST LAFAYETTE, IN 47906 (765) 497-5805 | | |

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.)

See Attached Listing
West Lafayette

FACILITY LOCATIONS(sites)

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 | 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 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)

| | |
|--|-------------|
| NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED |
| [Redacted] | 9/18/06 |

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|---|-----------------------|------------------------------------|
| 1. REGISTRATION NO. 32-R-0044 | CUSTOMER NO. 35550 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| VET TECH INSTITUTE AT 5699 COVENTRY LANE FORT WAYNE, IN 46804 | | |

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)

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 | 10 | | | 10 |
| 5. Cats | 15 | 8 | | | 8 |
| 6. Guinea Pigs | | 2 | | | 2 |
| 7. Hamsters | | | | | |
| 8. Rabbits | | 2 | | | 2 |
| 9. Non-Human Primates | | | | | |
| 10. Sheep | | | | | |
| 11. Pigs | | | | | |
| 12. Other Farm Animals | | | | | |
| 13. Other Animals | | | | | |
| Hamsters | | 2 | | | 2 |

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 |
| | | 11/07/2006 |

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

| | | |
|---|---------------------|------------------------------------|
| 1. REGISTRATION NO. 32-V-0001 | CUSTOMER NO. 791 | FORM APPROVED OMB NO. 0579-0036 |
| 2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) | | |
| VA MEDICAL CENTER (583) 1481 WEST 10TH STREET (151) INDIANAPOLIS, IN 46202 | | |

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)

See Attached Listing

NOV 24 2006

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 | | | | | |
| Mice | 53 | 1225 | 279 | 0 | 1557 |
| Rats | 2517 | 8 | 61 | 0 | 2586 |

- 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.
 - 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.
 - 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 | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED |
| [Redacted] | [Redacted] | 11/22/06 |

APHIS FORM 7023 (AUG 91) (Replaces VS FORM 18-23 (Oct 88), which

PART I - HEADQUARTERS