# Annual Report of Research Facility

## Type or Print

**1. 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

**2. Headquarter Research Facility (Name and Address, as registered with USDA, include Zip Code)**

**UNIVERSITY OF NEW MEXICO-MAINCAMPUS**  
**SCHOLES HALL, ROOM 227-A**  
**ALBUQUERQUE, NM 87131**  
**(505) 277-8128**

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**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.)

### REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

<table>
<thead>
<tr>
<th>A. Animals Covered by The Animal Welfare Regulations</th>
<th>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</th>
<th>C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs</th>
<th>D. Number of animals upon which teaching, research, surgery, or tests were conducted involving no pain, distress, or use of pain-relieving drugs</th>
<th>E. Number of animals upon which teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which use of appropriate anesthetic, analgesic, or tranquilizing drugs were used</th>
<th>F. TOTAL NO. OF ANIMALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Dogs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Cats</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Guinea Pigs</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Hamsters</td>
<td>72</td>
<td>70</td>
<td>-0-</td>
<td>-0-</td>
<td>70</td>
</tr>
<tr>
<td>8. Rabbits</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Non-Human Primates</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Sheep</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>11. Pigs</td>
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<td></td>
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<tr>
<td>12. Other Farm Animals</td>
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</tr>
<tr>
<td>13. Other Animals</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Wild Rodents</td>
<td>502</td>
<td>74</td>
<td>53</td>
<td>-0-</td>
<td>127</td>
</tr>
</tbody>
</table>

### Assurance Statements

1. Professionally acceptable standards governing the care, treatment, and use of animals, including approved 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 considered alternatives to painful procedures.

3. This facility is adhering to the standards and regulations under the Act, and it has received all exceptions to the standards and regulations as specified and explained by the Principal Investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all 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 frequency of other aspects of animal care and use.

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**Certification by Headquarters Research Facility Official**  
(Chief Executive Officer or Legally Responsible Institutional official)

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

**Signature of CEO or Institutional Official**  
**DATE SIGNED**  
**Headquarters**
The following sites have been reported by the facility.

Registration Number: 85-R-0002
Customer Number: 1071
Facility: UNIVERSITY OF NEW MEXICO-MAINCAMPUS
SCHOLES HALL, ROOM 227-A
ALBUQUERQUE, NM 87131
(505) 277-6128

UNIV.OF NEW MEXICO-MAINCAMPUS
DEPT. OF BIOLOGY, CASTETTER HALL
ALBUQUERQUE, NM 87131

Department of Psychology ((505) 277-4121
Logan Hall
Albuquerque, NM 87131

Sevilleta Research Site
Sevilleta National Wildlife Refuge
Socorro, NM
# Annual Report of Research Facility

## Type or Print

### 1. Registration No.

**85-R-0003**

### 2. Customer No.

**1072**

### 3. Reporting Facility

**LOVELACE RESPIRATORY RESEARCH INSTITUTE**

**P.O. BOX 4999 2425 RIDGEVIEW DR. SE**

**ALBUQUERQUE, NM 87103**

### 4. Headquarter Research Facility

**NAME AND ADDRESS, AS REGISTERED WITH USDA, INCLUDE ZIP CODE**

### 5. Reporting Facility Location(s)/Site(s)

See Attached Listing

### 6. Report of Animals Used by or Under Control of Research Facility

(Append additional sheet if necessary or use APHIS Form 7023A)

#### A. Animals Covered

<table>
<thead>
<tr>
<th>Animals</th>
<th>By The Animal Welfare Regulations</th>
<th>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</th>
<th>C. Number of Animals Upon Which Teaching, Research, Experiments, or Tests Were Conducted Involving No Pain, Distress, or Use of Pain-Relieving Drugs</th>
<th>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</th>
<th>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 Appropriate Anesthetic, Analgesic, or Tranquilizing Drugs Were Used</th>
<th>F. Total No. of Animals (Cols. C + D + E)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Dogs</td>
<td>62</td>
<td>42</td>
<td>106</td>
<td>0</td>
<td>148</td>
<td></td>
</tr>
<tr>
<td>5. Cats</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>6. Guinea Pigs</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>32</td>
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<td>8. Rabbits</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>9. Non-Human Primates</td>
<td>36</td>
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<td>0</td>
<td>0</td>
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<td></td>
</tr>
<tr>
<td>10. Sheep</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<td>18</td>
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<td>13. Other Animals</td>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

### 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)

**Date Signed:**

**Nov 23, 2001**

**- HEADQUARTERS**

(AUG 91)
The following sites have been reported by the facility.

Registration Number: 85-R-0003
Customer Number: 1072
Facility: LOVELACE RESPIRATORY RESEARCH INSTITUTE
P.O. BOX 5090
2425 RIDCECREST DR. SE
ALBUQUERQUE, NM 87108
(505) 844-8568 348-9400

LOVELACE RESPIRATORY RESEARCH INSTITUTE
INHALATION TOXICOLOGY LABORATORY
AREA Y, KIRTLAND AFB EAST
ALBUQUERQUE, NM 87115
**ANNUAL REPORT OF RESEARCH FACILITY**

**TYPE OR PRINT**

<table>
<thead>
<tr>
<th>A. Animals Covered by The Animal Welfare Regulations</th>
<th>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</th>
<th>C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs</th>
<th>D. Number of animals upon which 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</th>
<th>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)</th>
<th>F. TOTAL NO. OF ANIMALS (Cols. C + D + E)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Dogs</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>5. Cats</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>6. Guinea Pigs</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>7. Hamsters</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>8. Rabbits</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>9. Non-human Primates</td>
<td>0</td>
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<td>0</td>
<td>0</td>
</tr>
<tr>
<td>10. Sheep</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>11. Pigs</td>
<td>0</td>
<td>0</td>
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<td>0</td>
<td>0</td>
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<tr>
<td>13. Other Animals</td>
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<td>0</td>
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<td>0</td>
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</tr>
</tbody>
</table>

**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)

**DATE SIGNED**

[Signature]

APR 91

(HEADQUARTERS)

(UNDER CONTROL OF RESEARCH FACILITY)
The following sites have been reported by the facility.

Registration Number: 85-R-0009
Customer Number: 1073
Facility: NEW MEXICO STATE UNIVERSITY
P. O. BOX 30001 BOX 3RES
LAS CRUCES, NM 88003
(505) 646-3241

ANIMAL CARE FACILITY
ANIMAL CARE FACILITY
DEPT. 3ACF CORNER OF WELL & RESEARCH
LAS CRUCES, NM 88003
ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

APHIS FORM 7023 (Replaces APHIS FORM 7023A, dated Oct 88)
(Replaces VS FORM 18-23 (Oct 88), which is obsolete)

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.

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

1. REGISTRATION NO.
85-R-0011
2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)
COULSTON FOUNDATION
1300 LAVELLE ROAD
ALAMOGORDO, NM 88310

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)

<table>
<thead>
<tr>
<th>FACILITY LOCATIONS/sites</th>
</tr>
</thead>
<tbody>
<tr>
<td>COULSTON FOUNDATION</td>
</tr>
<tr>
<td>ALAMOGORDO, NM 88330</td>
</tr>
</tbody>
</table>

4. REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7023A)

<table>
<thead>
<tr>
<th>A. Animals Covered By The Animal Welfare Regulations</th>
<th>B. Number of animals upon which experiments, research, surgery, or tests were conducted involving no pain, distress, or use of pain-relieving drugs</th>
<th>C. Number of animals upon which experiments, research, surgery, or tests were conducted involving no pain, distress, or use of pain-relieving drugs</th>
<th>D. Number of animals upon which experiments, research, surgery, or tests were conducted involving no pain, distress, or use of pain-relieving drugs</th>
<th>E. Number of animals upon which experiments, research, surgery, or tests were conducted involving no pain, distress, or use of pain-relieving drugs</th>
<th>F. TOTAL NO. OF ANIMALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dogs</td>
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<td>300</td>
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<td>9</td>
<td>57</td>
</tr>
<tr>
<td>Cats</td>
<td>5 cats</td>
<td>6 guinea pigs</td>
<td>7 hamsters</td>
<td>8 rabbits</td>
<td></td>
</tr>
<tr>
<td>Guinea Pigs</td>
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<td></td>
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<tr>
<td>Hamsters</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Rabbits</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Human Primates</td>
<td>9 non-human primates</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sheep</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Pigs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Farm Animals</td>
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<td></td>
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</tr>
<tr>
<td>Other Animals</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

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 10/22/2001

PART 1 - HEADQUARTERS

AUG 91
The following additional sites have been reported by the facility. The reported sites have not been verified by APHIS and have been provided by the facility solely for completeness of the APHIS Form 7023 Annual Reporting submission.

<table>
<thead>
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<th>Registration Number:</th>
<th>85-R-0011</th>
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<tbody>
<tr>
<td>Customer Number:</td>
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</table>
| Facility:            | COULSTON FOUNDATION  
1300 LAVELLE ROAD  
ALAMOGORDO, NM 88310 |

Coulston Foundation  
Building 1264  
Holloman AFB, NM 88330
### ANNUAL REPORT OF RESEARCH FACILITY

**TYPE OR PRINT**

#### REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY

**TYPE OR PRINT**

<table>
<thead>
<tr>
<th>A. Animals Covered By The Animal Welfare Regulations</th>
<th>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</th>
<th>C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs</th>
<th>D. Number of animals upon which 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</th>
<th>E. Number of animals upon which teaching, 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)</th>
<th>F. TOTAL NO. OF ANIMALS (Cols. C + D + E)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Dogs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Cats</td>
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<td>6. Guinea Pigs</td>
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<td>8. Rabbits</td>
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<tr>
<td>9. Non-Human Primates</td>
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</tr>
<tr>
<td>10. Sheep</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Pigs</td>
<td>20</td>
<td>14</td>
<td></td>
<td>34</td>
<td></td>
</tr>
<tr>
<td>12. Other Farm Animals</td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Goats</td>
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<td>15</td>
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<tr>
<td>13. Other Animals</td>
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<td></td>
</tr>
<tr>
<td>Gerbils</td>
<td>28</td>
<td>12</td>
<td></td>
<td>40</td>
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</tr>
</tbody>
</table>

#### 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.

**SIGNATURE**

APHIS FORM 7023 (Replaces VS FORM 18-23 (Oct 88), which is obsolete)

(AUG 91) PART 1 - HEADQUARTERS
The following sites have been reported by the facility.

<table>
<thead>
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<th>Registration Number:</th>
<th>85-R-0014</th>
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<tbody>
<tr>
<td>Customer Number:</td>
<td>1076</td>
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<tr>
<td>Facility:</td>
<td>UNIVERSITY OF NEW MEXICO HEALTH SCIENCE CENTER ALBUQUERQUE, NM 87131 (505) 272-3936</td>
</tr>
</tbody>
</table>

UNIVERSITY OF NEW MEXICO
COLLEGE OF PHARMACY
NURSING/PHARMACY BUILDING
ALBUQUERQUE, NM 87131
# ANNUAL REPORT OF RESEARCH FACILITY

**TYPE OR PRINT**

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## 1. REGISTRATION NO.
65-R-0019

## 2. CUSTOMER NO.
1547

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## 2. HEADQUARTERS RESEARCH FACILITY
RAISED BY WOLVES, INC.
HC 62 BOX 3127
THOREAU, NM 87323
(505) 862-7547

---

## 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

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### REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY

#### (Attach additional sheets if necessary or use APHIS FORM 7023A)

<table>
<thead>
<tr>
<th>A. Animals Covered By The Animal Welfare Regulations</th>
<th>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</th>
<th>C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs</th>
<th>D. Number of animals upon which 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</th>
<th>E. Number of animals upon which teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which 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)</th>
<th>F. TOTAL NO. OF ANIMALS (Cols. C + D)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Dogs (wolf hybrids)</td>
<td>19</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The following sites have been reported by the facility.

Registration Number: 85-R-0019
Customer Number: 1337
Facility: RAISED BY WOLVES, INC.
        HC 62 BOX 3127
        THOREAU, NM 87323
        (505) 862-7547

RAISED BY WOLVES, INC.
44 JOHNSON DRIVE
THOREAU, NM 87323
ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY

1. 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

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 70234)

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 the use of 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 appropriate anesthetic, analgesic, or tranquilizing drugs were used

F. TOTAL NO. OF ANIMALS

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

Rock Squirrels

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)

[Signature]

DATE SIGNED
11/14/2001

APHIS FORM 7023
(AUG 91)

(REPLACES VS FORM 18-23 (OCT 88), WHICH IS OBSOLETE)

PART 1 - HEADQUARTERS

[Stamp]
The following sites have been reported by the facility.

Registration Number: 85-R-0020
Customer Number: 11111
Facility:
4108 PONDEROSA NE
ALBUQUERQUE, NM 87110
(505) 873-6613

MONTESSA LAB/3600 LOS PICAROS RD. SE
ALBUQUERQUE, NM 87105
ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NO. 85-R-0021
   CUSTOMER NO. 10053
   FORM APPROVED OMB NO. 0579-0026

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)
   ALBUQUERQUE ANIMAL CLINIC
   P.O. BOX 30
   ALBUQUERQUE, NM 87114
   (505) 897-8200

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)

   LOCATION(SITE(S))

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7023A)

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ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer or Legally Responsible Institutional official)

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

DATE SIGNED

10/15/01

HEADQUARTERS
The following sites have been reported by the facility.

Registration Number: 85-R-0021
Customer Number: 10053
Facility: ALBUQUERQUE AVIAN, EXO., & SMALL ANIMAL CLINIC P.C.
8414 FOURTH ST. NW
ALBUQUERQUE, NM 87114
(505) 897-8200

ALBUQUERQUE AVIAN CLINIC
8414 FOURTH ST. NW
ALBUQUERQUE, NM 87114