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. 83-R-0001 CUSTOMER NO. 16 FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)
 UNIVERSITY OF WYOMING

1000 EAST UNIVERSITY AVENUE, DEPT. 3355 LARAMIE, WY 82071-3355

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)

UNIVERSITY OF WYOMING LARAMIE, WY 82071-3355

| A | B. Number of animals being | C. Number of animals upon | D. Number of animals upon which experiments, | E. Number of animals upon which teaching, experiments, research, surgery or tests were | F. |
|---|---|--|---|---|----------------------------------|
| Animals Covered By The Animal Welfare Regulations | bred, conditioned, or held for use in teaching, testing, experiments, | which teaching, research, experiments, or tests were conducted | teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals | 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, | TOTAL NO. OF ANIMALS (Cols. C + |
| | research, or surgery but not yet used for such purposes. | involving no pain, distress, or use of pain- relieving drugs. | and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | 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) | D + E) |
| 4. Dogs | | | | | .0 |
| 5. Cats | | | | | |
| 6. Guinea Pigs | 5 | | | | |
| 7. Hamsters | | | | | |
| 3. Rabbits | | 14 | | | 14 |
| 9. Non-Human Primates | | | | | |
| 10. Sheep | | 38 | 43 | | 81 |
| 11. Pigs | | | | | |
| 12. Other Farm Animals | | | | | |
| Cow | | 13 | | | 13 |
| 13. Other Animals | | | | | |
| Bison | | | 14 | | 14 |
| Deer | | 17 | 4 | | 21 |
| Goat | | 1 | | | 1 |

- 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 HEAD | QUARTERS | RESEARCH | FACILITY | OFFICIAL |
|--------------------------|---------------|---------------|-----------------|-----------------|
| (Chief Executive Officer | or Legally Re | esponsible In | stitutional | 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

11/16/2004

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. 83-R-0001 CUSTOMER NO. 16

FORM APPROVED OMB NO. 0579-0036

CONTINUATION SHEET FOR ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

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

UNIVERSITY OF WYOMING 1000 EAST UNIVERSITY AVENUE, DEPT. 3355 LARAMIE, WY 82071-3355

| 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. | (Attach additional sheets if necession 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 (Cois. C+ D+E) |
|---|---|---|--|--|--|
| Pony | | 8 | | | 8 |
| White-tailed Prairie Dog | 34 | | | | |
| Black-tailed Prairie Dog | | | 10 | | 10 |
| Pallid Bat | 36 | | 55 | | 55 |
| Flying Squirrels | 11 | | | | |
| Coyotes | 12 | 17 | | | 17 |
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- 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

| aspecto of arminal ease and ever | | |
|---|--|------------|
| (Chief Executive | I BY HEADQUARTERS RESEARCH FACILITY OFFICIAL ve Officer or Legally Responsible Institutional official) e 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) | 11/16/2004 |

APHIS Form 7023 Additional Reported Sites

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

Registration Number:

83-R-0001

Customer Number:

16

Facility:

UNIVERSITY OF WYOMING

1000 EAST UNIVERSITY AVENUE, DEPT. 3355

LARAMIE, WY 82071-3355

Agriculture Building
1000 E. University Avenue, Department 3354
Laramie, WY 82071
Animal Science/Molecular Biology Building
1000 E. University Avenue, Department 3944
Laramie, WY 82071
Pharmacy Building
1000 E. University Avenue, Department 3375
Laramie, WY 82071
Red Buttes Environmental Biology laboratory
990 South Highway 287
Laramie, WY 82070
Wyoming State Veterinary Laboratory
1174 Snowy Range Road
Laramie, WY 82070

| See attached form for | 1 | Interagency Report Control N |
|-------------------------|----|------------------------------|
| additional information. | 10 | 9 |

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 83-R-0004

CUSTOMER NUMBER:

FORM APPROVED

OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Eastern Wyoming College 3200 West C Torrington, WY 82240

Telephone: (307) -532-8200

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

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A) | | | | | |
|---|---|---|--|---|--|
| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for whithe use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, resor interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasc such drugs were not used must be attached to this report.) | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
| 4. Dogs | | | 17 | | 17 |
| 5. Cats | | | 14 | | 14 |
| 6. Guinea Pigs | | 9 | • | | 9 |
| 7. Hamsters | | 28 | | | 28 |
| 8. Rabbits | | 4 | | | 4 |
| 9. Non-human Primates | | | | · | 0 |
| 10. Sheep | | | | | 0 |
| 11. Pigs | | | | | 0 |
| 12. Other Farm Animals | | | | | |
| CATTLE | | | 7 | | 7 |
| 13. Other Animals | | | | | |
| HORSES | | | 3 | | 3 |
| GERBILS | | 64 | | | 64 |
| | | | | | |

ASSURANCE STATEMENTS

(AUG 91)

- Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, 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.
- 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 approximately approxim Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary in brief explanation of the exceptions, as well as the species and number of animals affected.

| 4) The attending vet | ennanan for this research facility has appropriate author | only to ensure the provision of abequate versionary date and to extend the end of the en | |
|----------------------|---|--|-------------|
| · | | N BY HEADQUARTERS RESEARCH FACILITY OFFICIAL tive Officer or Legally Responsible Institutional Official) | |
| SIGNATURE OF C.E.O. | OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED |
| | | | 11/21/04 |
| AFRIO FURM 1040 | (Nepiaces vo i Olivi 10-20 (OO) 00), which is ob- | (e.) | |

See attached form for additional information.

Interagency Report Control No...

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 83-R-0005

CUSTOMER NUMBER: 1666

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Wyoming Game & Fish Dept. 2362 Highway 34 Wheatland, WY 82201

Telephone: (307) -322-2571

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

FACILITY LOCATIONS (Sites) - See Atached Listing

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report. | OF ANIMALS (COLUMNS C + D + E) |
|---|---|---|--|---|------------------------------------|
| 4Dogs | | | | · | |
| 5. Cats | | | | | |
| 6. Guinea Pigs | | | | | |
| 7. Hamsters | | | | | |
| 8. Rabbits | | | | | |
| 9. Non-human Primates | | | | | |
| 10. Sheep | | | | | |
| 11. Pigs | | | | | |
| 12. Other Farm Animals | | | | | |
| CATTLE | | 10 | | | 10 |
| 13. Other Animals | | | | | |
| ELK | 5 | 65 | | | 65 |
| MOOSE | | 2 | | | 12 |
| Mule Deck | 3 | 1 | | | |
| ASSURANCE STATEMENT | | | of animals, including appropriate use | | : |

- 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 appropriate investigator and specified and appropriate investigator and specified and explained by the principal investigator and appropriate investigator an 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 6 f Executive Officer or Legally Responsible Institutional Official) | |
|------|--|-------------|
| SIGN | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED |
| | | 10/5/04 |
| ADU | ch is charlete) | |

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.

FORM APPROVED OMB NO. 0579-0036

HEADOUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA include Zip Code)

CONTINUATION SHEET FOR ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

| [| | | | | |
|---|---|--|---|---|---|
| REPORT OF ANIMALS USED BY O | | | (Attach adiditional sheets if ne | cessary or use this form.) | |
| A. Animals Covered By The Animal Welfare Regulations 12. &/OR 13. Other (List by species) | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. | C Number of animals upon which teaching, research, experiments, or lests were conducted involving no pain, distress, or use of pain-refleving 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). | TOTAL NO. OF ANIMALS (Cols. C + D + E) |
| White-TAILED DER | | 11 | | | 11 |
| Paughoen | 4 | * | | | |
| RIBON | 4 | | | | |
| BIGHERN Sheep | 3 | | | | · · · · · · · · · · · · · · · · · · · |
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| ASSURANCE STATEMENTS | | | | | |

- 1). Professionally acceptable standards governing the care, treatment, and use of animals, including approriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research lacility.
- 2). 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 such exceptions is attached to this annual report. In
 addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4). The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL |
|--|
| (Chief Executive Officer or Legally Responsible Institutional Official) |
| the contract of the contract o |

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

OCT - 5 2004

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

DATE SIGNED

PART 1 - HEADQUARTERS