

**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  
P. O. BOX 3355  
LARAMIE, WY 82071-3355

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

## **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)

I certify that the above is true, correct, and complete (7 U.S.C. Section 271c)		
SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL	NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) 088107111112110103116040074046033073104118115050039094114099102034083 118106121112108110110117034105115119038089109124101098116102108	DATE SIGNED 12/01/2003

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.

11-6-03  
Interagency Report Control No  
0180-DOA-AN  
Laris

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

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

1. REGISTRATION NO. 83-R-0004	CUSTOMER NO. 17	FORM APPROVED OMB NO. 0579-0036
2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) EASTERN WYOMING COLLEGE 3200 WEST C TORRINGTON, WY 82240 (307) 532-8200		

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.)

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.	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 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)	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			25		25
5. Cats			21		21
6. Guinea Pigs		3			3
7. Hamsters		22			22
8. Rabbits		0			0
9. Non-Human Primates					
10. Sheep			0		0
11. Pigs					
12. Other Farm Animals					
CATTLE			8		8
13. Other Animals					
HORSES			3		3
GERBILS		78			78

ASSURANCE STATEMENTS

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(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

11/20/03

, which is obsolete

PART 1 - HEADQUARTERS

**APHIS Form 7023 Site List**

The following sites have been reported by the facility.

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Registration Number: 83-R-0004  
Customer Number: 17  
Facility: EASTERN WYOMING COLLEGE  
3200 WEST C  
TORRINGTON, WY 82240  
(307) 532-8200

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EASTERN WYOMING COLLEGE  
3200 WEST C  
TORRINGTON, WY 82240

UNITED STATES DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO. CUSTOMER NO.  
83-R-0005 1666

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)  
WYOMING GAME & FISH DEPT.  
2362 HIGHWAY 34  
WHEATLAND, WY 82201  
(307) 322-2571

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

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5. Cats					
6. Guinea Pigs					
7. Hamsters					
8. Rabbits					
9. Non-Human Primates					
10. Sheep					
11. Pigs					
12. Other Farm Animals					100
CATTLE		10			10
ELK	2	48			48
MOOSE		4			4
BISON	4				

**ASSURANCE STATEMENTS**

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(Chief Executive Officer or Legally Responsible Institutional official)**

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

DATE SIGNED

9/29/03

13 (Oct 88), which is obsolete

PART 1 - HEADQUARTERS

