According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information number for this information collection is 0579-0036. The time required to complete this information number of the data sources, gathering and maintaining the data here the sources of the data sourc							
	ions can result in an order to cease	e and desist	Interagency Report Control No. 0180-DOA-AN	Fiscal Year 2014			
UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE				1. REGISTRATION NUMBER 23-R-0061			
				 HEADQUARTERS RESEARCH FACILITY (Name, address, and telephone number as registered with USDA, include ZIP Code) 			
ANNUAL REPORT OF RESEARCH FACILITY				MILLENNIUM BIORESEARCH INC 1765 WENTZ ROAD			
(TYPE OR PRINT)			P.O. BOX 1	P.O. BOX 178			
3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, test				SPINNERSTOWN, PA 18967 esting, 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.	B.	C.	D. Number of animals upon	E. Number of	of animals upon which teaching,	F.	
Animals Covered By The Animal Welfare Regulations	Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	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.	conducte distress t approprie tranquiliz affected t interpreta experime of the pro these and	ents, research, surgery, or tests were di involving accompanying pain or to the animals and for which the use ate anesthetic, analgesic, or ing drugs would have adversely the procedures, results, or ation of the teaching, research, ents, surgery, or tests. (An explanat ocedures producing pain or distress imals and the reasons such drugs used must be attached to this repo	e of TOTAL NUMBER OF ANIMALS (Cols. C + D + E)	
4. Dogs	0	0	0		0	0	
5. Cats	0	0	0		0	0	
6. Guinea Pigs	4	280	20		132	432	
7. Hamsters	0	0	0	0		0	
8. Rabbits	17	463	3	320		786	
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					_		
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 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 provisions 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 (C.E.O.) or Legally Responsible Institutional Official (I.O.)) I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

> DATE SIGNED 06-FEB-2015