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 of the provided pr									
This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result and to be subject to penalties as provided for in Section 2150.				t in an order to ceas	e and desist	Interagency Report Control No. 0180-DOA-AN	Fiscal Year 2013		
UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE				1. REGISTRATION NUMBER 74-R-0046					
ANIMAL AND FLANT HEALTH INSPECTION SERVICE			2. HEADQUARTERS RESEARCH FACILITY (Name, address, and telephone number as						
			registered with USDA, include ZIP Code) Texas Christian University						
ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)				T C U BOX 297024					
3 REPORTING FACILITY /	FORT WORTH, TX 76129 asting teaching or even interaction or held for these numbers. Attach additional sheets if								
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)									
(b)(7)(F)									
REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets, if necessary, or use APHIS FORM 7023A.)									
Α.	В.	C. Number of animals	which e	er of animals upon experiments,	experime	of animals upon which teaching, ents, research, surgery, or tests were	F.)		
	Number of animals being bred,	upon which teaching, research,	surgery	ng, research, y, or tests were	distress t	d involving accompanying pain or the animals and for which the use o			
Animals Covered By The Animal	conditioned, or held for use in teaching,	experiments, or tests were	accom	ted involving panying pain or	tranguiliz	ate anesthetic, analgesic, or ing drugs would have adversely	TOTAL NUMBER OF ANIMALS		
Welfare Regulations	testing, experiments, research, or surgery	conducted involving no pain, distress, or	and for		interpreta	the procedures, results, or ation of the teaching, research,	(Cols. C + D + E)		
	but not yet used for such purposes.	use of pain-relieving drugs.	analge		of the pro	ents, surgery, or tests. (An explanation ocedures producing pain or distress of			
a	e	<b>-</b>	used.	lizing drugs were		imals and the reasons such drugs used must be attached to this report.)	1		
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	15								
13. Other Animals	×								
			1						

## ASSURANCE STATEMENTS

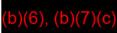
1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

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.

Y 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).							
NAME AND TITLE OF C.E.O. OR I.O. (Type or Print)	DATE SIGNED						
	er (C.E.O.) or Legally Responsible Institutional Official (I.O.)) the above is true, correct, and complete (7 U.S.C. Section 2143).						



18-NOV-2013

JUL 2013

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