According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a per it displays a valid OMB control number. The valid OMB control number for this information collection i collection is estimated to average 2 hours per response, including the time for reviewing instructions, s needed, and completing and reviewing the collection of information.	OMB APPROVED 0579-0036 Exp.: 10/31/2018				
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.	Interagency Report Control No. 0180-DOA-AN	Fiscal Year 2010			
UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE	1. REGISTRATION NUMBER 32-R-0019				
	 HEADQUARTERS RESEARCH FACILITY (Name, address, and telephone number as registered with USDA, include ZIP Code) 				
ANNUAL REPORT OF RESEARCH FACILITY					
(TYPE OR PRINT)	OFFICE OF SPONSORED PROGRAMS HOLMSTEDT HALL. ROOM 272				
	TERRE HAUTE, IN 47809				
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					

FACILITY LOCATIONS (Sites)

(b)(7)(F)

	-		-	-	-
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 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 on these animals and the reasons such drugs were not used must be attached to this report.)	F. 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	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	10	0	0	10
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	0	322	259	0	581

ASSURANCE STATEMENTS

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 1.) 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 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. 3.)

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).

(b)(6), (b)(7)(c)

SIGNATURE OF C.E.O. OR I.O.

NAME AND TITLE OF C.E.O. OR I.O. (Type or Print)

DATE SIGNED

APHIS FORM 7023 JUL 2013

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 collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.						OMB APPROVED 0579-0036	
This report is required by law (7 U.S.C. 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. Interagency Report Control No. 0180-DOA-AN						Fiscal Year 2010	
	ATES DEPARTMENT D PLANT HEALTH IN	OF AGRICULTURE		1. REGISTRATIO 32-R-0019)		
CONTINUATION SHEET FOR ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)				2. HEADQUARTERS RESEARCH FACILITY (Name, address, and telephone number as registered with USDA, include ZIP Code) INDIANA STATE UNIVERSITY OFFICE OF SPONSORED PROGRAMS HOLMSTEDT HALL, ROOM 272 TERRE HAUTE, IN 47809			
REPORT OF ANIMALS USE	D BY OR UNDER CONTRO		(Attach additio	onal sheets if necess	ary or use	e this form.)	
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.	which e teachin surgery conduc accom or distr animal which a anesth	r of animals upon experiments, gr, research, r, or tests were ted involving poanying pain eess to the s and for appropriate etic, analgesic, or lizing drugs were	exp wei pai whi ana adv or i exp of t	mber of animals upon which teaching, periments, research, surgery, or tests re conducted involving accompanying n or distress to the animals and for ch the use of appropriate anesthetic, algesic, or tranquilizing drugs would haw ersely affected the procedures, results, nterpretation of the teaching, research, beirments, surgery, or tests. (An explana he procedures producing pain or distres these animals and the reasons such dru re not used must be attached to this rep	(Cols. C + D + E s gs
BIG BROWN BAT	0	102		0		0	102
DEER MOUSE	0	0	60		0	60	
EASTERN PIPISTRELLE	BAT 0	30		0		0	30
EASTERN RED BAT	0	55		0		0	55
EVENING BAT	0	10		0		0	10
INDIANA BAT	0	12		0		0	12
LITTLE BROWN BAT	0	26		24		0	50
MEADOW JUMPING MC	USE 0	0		24		0	24
MEADOW VOLE	0	0		49		0	49
NORTHERN LONG EAR	ED BAT 0	87		0		0	87
NORTHERN SHORT TA	LED SHREOV	0		17		0	17
PLAIN POCKET GOPHE	R 0	0		1		0	1
PRAIRIE VOLE	0	0		59		0	59
SOUTHERN BOG LEMN	IING 0	0		2		0	2
WESTERN HARVEST N	OUSE 0	0		12		0	12
WHITE FOOTED MOUS	E 0	0		11		0	11
ASSURANCE STATEMENT	<u> </u>						

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.

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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).

(b)(6), (b)(7)(c)