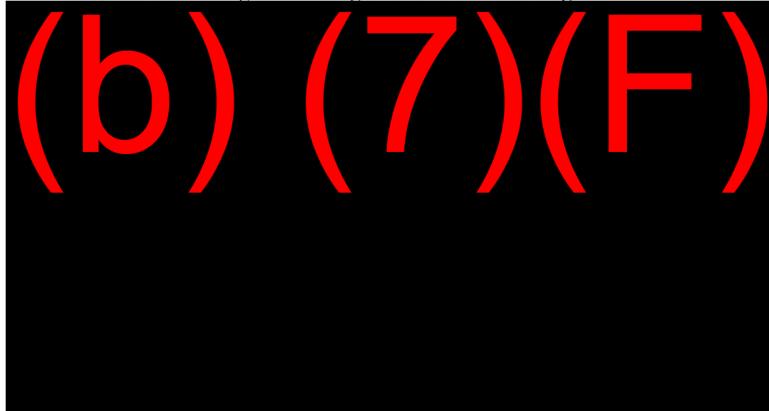
Every research facility, exhibitor, carrier, and intermediate handler not required to be licensed under Section 3 of the Animal Welfare Act, shall register with the USDA (7 USC 2136). This application provides information for such registration. U.S. DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE APPLICATION FOR REGISTRATION (TYPE OR PRINT) REGISTRATION UPDATE			FORM APPROVED
		Applicant should send completed form to this address. USDA APHIS ANIMAL CARE EASTERN 2150 Centre Ave. Building B, Mailstop #3W11 Fort Collins, CO 80526-8117 (970) 494-7478	
1. REGISTRANT (Name and permanent mailing address, including Zip Code)	1	2. LOCATION (S) OF BUSINESS, EXHIBITION SITE	E(s), OR RESEARCH FACILITIES
University Of Memphis Animal Care Facility 309 Administration Bldg Memphis, TN 38152 3370		(Use additional sheets if necessary) (b) (7)(F)	
county: Shelby Telephone (901) 678 - 2359 3. (A) PREVIOUS USDA REGISTRATION NUMBER (IF ANY)		4. (B) ACTIVE USDA CERTIFICATE NUMBER(S) I	N WHICH YOU HAVE AN INTEREST:
5. ARE YOU USING FEDERAL FUNDS TO CARRY OUT	6. TYPE OF REG	GISTRATION:	
RESEARCH, TESTS, OR EXPERIMENTS	♦ Class E – Exhibitor ♦ Class H – Intermediate Handler		
☑ Yes □ No			
7. FEDERAL FUND TYPES: ♦ Award ♦ Contract ♦ Grant ♦ Loan 9. IF INDIVIDUAL IDENTIFY EACH OWNER, IF PARTNERSHIP	8. TYPE OF ORG	hip	dividual
OFFICERS FOR RESEARCH FACILITIES INCLUDE THE INSTITU	UTIONAL OFFICIAL	. (Use separate sheet if needed) C. ADDRESS (full address, inc.)	
A. NAME B. TIT)(C)
I hereby register as a Research Facility, Exhibitor, Carrier, or Intermediate Handler	CERTIFIC under the Animal W	offers Act 7 LLS C 2131 et sen and I certify that the infor	mation provided herein is true and corre
I hereby register as a Research Facility, Exhibitor, Carner, or Intermediate handler to the best of my knowledge. I hereby acknowledge receipt of and agree to comply 18 years of age of older.	with all the regulation	ns and standards contained in 9 CFR, Subpart A, parts 1, 2	2 and 3. I certify that all listed persons ar
(b) (6), (b) (7)(C)			12. DATE SIGNED

APHIS FORM 7011 (FEB 2009) To: USDA reviewers
(b) (6), (b) (7)(C)

Date: 01-10-20

Re: Changes in APHIS Form 7011

Block 1: Please change the mailing address to the following:



Thank you for your attention to these changes.