According to the Paperwork Reduction Act of 1995, no persons are 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 .25 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and	FORM APPROVED OMB NO.: 0579-0036 No license may be issued unless a completed application has been received (7 U.S.C. 2132-2143), and the applicant is in compliance with the standards and regulations Section 2133.											
maintaining the date needed, and completing and reviewing the collection of information. U.S. DEPARTMENTOF AGRICULTURE	and the	DO NOT USE THIS SPACE- OFFICIALUSE ONLY										
ANIMAL AND PLANT HEALTH INSPECTION SERVICE	SEND T	SEND THE COMPLETED FORM TO:										
APPLICATION FOR LICENSE	100000000000000000000000000000000000000	USDA APHIS ANIMAL CARE EASTERN										
(TYPE OR PRINT)	920 M	ain Cam	pus Drive	e								
V BENEWAL		h, NC 2	7606-521	0							1	- 19
X RENEWAL	Raleigh, NC 27606-5210 (919) 855-7100				Der	_ 10						
	51-A-0	E NO./CL	IST NO		WAL DA -2019	TE	AMOU	NT	FEE		RECEIV	VED
NAME(S) OF OWNER(S)AND MAILING ADDRESS	81	March 10. 5		- 1,01.00	10.755.005.754		-	Ta.		2000000	(International	PS NOTE:
The Johns Hopkins University (b) (6), (b) (7)(C) COUNTY: (b) (6), (b) (7)(C)	accepta (b) ((7)(C)		JNS, AN		ELEPHOI)	.s (r. c	, Box III	
3. IF PREVIOUSLY LICENSED – NAME AND ADDRESS			DDRESS C			NESS(S) HANDL	ING AN	IMALS IN	WHIC	н	
	APPLIC	ANT/LICI	ENSEE HA	S AN IN	TEREST							
PREVIOUS LICENSE NO.: 5. TYPE OF LICENSE	6. DAT	E OF LAS	T BUSINE	SS YEA	R							
◆ A -Dealer (Breeder) ◇ B - Dealer ◇ C - Exhibitor			FROM	1					т)		
7. NATURE OF BUSINESS (Check item that describes nature of your business)	N	0	DA	Y	YE	AR	М	0	DA	Y	YE	AR
\square A – Zoo \square B - Aquariums \square C – Auction										12		
D - Breeder	0	1	0	1	1	8	0	1	0	1	1	9
☐ G - Circus ☐ H - Animal Acts ☐ I - Carnival	400,000	8. TYPE OF ORGANIZATION ◇ Partnership ★ Corporation ◇ Individual										
☐ J – Drive thru ☐ K – Pet Store ☐ L - Broker			ecify) _				_					-
Zoo								X5-1				
9. LIST OWNER:	S, PARTNERS	, AND O	FICERS									
NAME AND TITLE		ADDRESS										
Ronald J. Daniels JD Pierident Sunnil Kumar MA: Prost & UP for Acad Affai Don's Wirtz PhD Uke Provost for FISCAL I J	7) (6), ((b) (7)(C)								
10. DEALER ONLY CLASS A (BREEDER) – LINE 'D' = ½ OF LINE 'C' CLASS B (DEALER) – LINE 'D' = LINE 'C' LESS THE AMOUNT PAID FOR THE ANIMAL(S) (Sections 2.6)			ONLY (No.	of anima	als holdin	g now o	or held du	ring the	last busii	ness ye	ar, which	never
A: TOTAL NO. OF ANIMALS PURCHASED IN THE LAST BUSINESS YEAR	DOGS						RAI	вытѕ				
B: TOTAL NO. OF ANIMALS SOLD IN THE LAST BUSINESS YEAR	CATS	CATS NONHUMAN PRIMATES			TES							
C: TOTAL GROSS DOLLAR AMOUNT DERIVED FROM, REGULATED ACTIVITIES (SALES, BOOKING FEES, COMMISSIONS, ETC.)	GUINE	GUINEA PIGS MARINE MAMMALS										
D: DOLLAR AMOUNT OF WHICH FEE IS BASED	HAMST	ERS						D OR E				
(Sections 2.6 and 2.7)	OTHER	(i.e., farı	n animals)	(List						7		
	200000000000000000000000000000000000000	s and No.)									
I hereby make application for a license under the Animal Welfare Act 7 U.S best of my knowledge. I hereby acknowledge receipt of and certify to the bushpart A, Parts 1, 2, and 3. I dertify that I am over 18 years of age.	ERTIFICATI i.C. 2131 et : best of my k	seq. I ce	ertify that ge I am ir	the inf	formation liance v	on pro with all	vided h I regula	erein i tions a	s true a and star	nd co	rrect to in 9 C	the FR,
12. SIGNATURE (b) (6), (b) (7)(C)	13. NA		EN EN			177	13	000	100	4. DAT	17/1	7/16
APHIS FORM 7003		- 1	LN	101	NIT	1)0	2 VT	10)	Carry	1	16/1	0' 1
(JAN 1995)									DEC	0040		

ANIMAL AND PLANT HEALTH INSPECTION SERVICE SEND THE COMPLETED FORM TO: SEND THE COMPLETED FORM TO:	Section 2 133.						
U.S. DEPARTMENTOF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE SEND THE COMPLETED FORM TO: SEND THE COMPLETED FORM TO:	ONLY						
SEND THE COMPLETED FORM TO:	DO NOT USE THIS SPACE- OFFICIALUSE ONLY						
APPLICATION FOR LICENSE (TYPE OR PRINT) X RENEWAL USDA APPLIS ANIMAL CARE EASTERN 920 Main Campus Drive Suite 200 Raleigh, NC 27606-5210 (919) 855-7100	SEND THE COMPLETED FORM TO: USDA APHIS ANIMAL CARE EASTERN 920 Main Campus Drive Suite 200 Raleigh, NC 27606-5210						
LICENSE NO / CUST NO RENEWAL DATE 4-Jan-2018 4-Jan-2018 1 5 5 5 5	P DATE RECEIVED						
1. NAME(S) OF OWNER(S)AND MAILING ADDRESS The Johns Honkins University (b) (6), (b) (7)(C) 2. ALL BUSINESS NAME, LOCATIONS, AND ALL SITES HOUSIN acceptable) (b) (6), (b) (7)(C) TELEPHONE ()						
3. IF PREVIOUSLY LICENSED – NAME AND ADDRESS 4. NAME AND ADDRESS OF OTHER BUSINESS(S) HANDLING A APPLICANT/LICENSEE HAS AN INTEREST	NIMALS IN WHICH						
PREVIOUS LICENSE NO.: 6. DATE OF LAST BUSINESS YEAR							
5. TYPE OF LICENSE	то						
◆ A -Dealer (Breeder) ◇ B - Dealer ○ C - Exhibitor 7. NATURE OF BUSINESS (Check item that describes nature of your business)	DAY YEAR						
□ A – Zoo □ B - Aquariums □ C – Auction 0 1 0 1 1 7 0 1 □ D – Breeder □ □ E – Pets □ F – Roadside	0 1 1 8						
Zoo G - Circus H - Animal Acts I - Carnival V - Pet Store L - Broker Zoo 8. TYPE OF ORGANIZATION Other (Specify)	Individual						
9. LIST OWNERS, PARTNERS, AND OFFICERS							
NAME AND TITLE ADDRESS	ADDRESS						
Romald J. Daniels JD. President Sunil Kumar har Proposity for Acad Affan Denis Wirtz PhD via Propositor Rued							
10. DEALER ONLY CLASS A (BREEDER) – LINE 'D' = ½ OF LINE 'C' CLASS B (DEALER) – LINE 'D' = LINE 'C' LESS THE AMOUNT PAID FOR THE ANIMAL(S) (Sections 2.6) (Sections 2.6)							
A: TOTAL NO. OF ANIMALS PURCHASED IN THE (b) (4) DOGS RABBIT	S						
BUSINESS YEAR	JMAN PRIMATES						
REGULATED ACTIVITIES (SALES, BOOKING FEES,	E MAMMALS DR EXOTIC						
D: DOLLAR AMOUNT OF WHICH FEE IS BASED (Sections 2.6 and 2.7) HAMSTERS OTHER (i.e., farm animals) (List Species and No.)							
CERTIFICATION I hereby make application for a license under the Animal Welfare Act 7 U.S.C. 2131 et seq. I certify that the information provided here best of my knowledge. I hereby acknowledge receipt of and certify to the best of my knowledge I am in compliance with all regulation Subpart A, P. (6), (6), (7) (7) that I am over 18 years of age. 13. NAME AND TITLE (Type or Print)	ein is true and correct to the ons and standards in 9 CFR,						
12. SIGNATOR	Forle						

				0 / 11	15		
Every research facility, exhibitor, carrier, and intermediat Section 3 of the Animal Welfare Act, shall register with the provides information for such registration.					OMB No. 0579-0036 FORM APPROVED		
U.S. DEPARTMENT OF	AGRICULTURE		USDA USE ONLY				
APPLICATION FOR REGISTRATION (TYPE OR PRINT)				cant should s APHIS ANI ERN lain Campus 200 gh, NC 27606 855-7100	end complete MAL CARE Drive		
REGISTRATIO	N UPDATE						
					NO./CUST	T NO:	RENEWAL DATE
			51-R-	0006			10-Aug-2017
			81				
							2LS 10 Aug 22
1. REGISTRANT (Name and permanent mailing addr	ess, including Zip Code)					ITION SITE	(s), OR RESEARCH FACILITIES
The Johns Hopkins University				Iditional sheets			
(b) (6), (b) (7)(C)			(D) (C	5), (b) (/)(C)		
3. (A) PREVIOUS USDA REGISTRATION NUMBER (I	F ANY)		4. (B)	ACTIVE USDA	CERTIFICATE NUI	MBER(S) IN	WHICH YOU HAVE AN INTEREST:

5. ARE YOU USING FEDERAL FUNDS TO CARRY O	UT	6. TYPE OF REGIS	STRATION	:			
RESEARCH, TESTS, OR EXPERIMENTS		♦ Class E – E	xhibito	r.c	♦ Class H	- Interm	ediate Handler
✓ Yes □ No 7. FEDERAL FUND TYPES:		♦ Class R – R			◇ Class T	- Carrier	
		6. TIPE OF OROM	MEATION				
◇ Award ◇ Contract ※ Grant ◇	Loan	◇ Partnershi	p		ration	♦ Ind	ividual
		Other (Spe					
IF INDIVIDUAL IDENTIFY EACH OV OFFICERS FOR RESEARCH FACILIT						NTIFY PRIN	ICIPAL
A. NAME	B. TITI	LE		C.	ADDRESS (full		
Ronald J. Daniels JD	President			John	3 Hopk	ıhš	University
Sunil Kumar PhD	Propert 28.	up tent	index		b) (7)(C)		
	Main						
Daviel G- Envis MSA	Zrupter &	nance & Ad	mi~	_			
Dens Worts Pho	Voer hovor	fresen	4	8)			
	a Institu	In link	Tel				
		OF DETERMINE	TION:				
I hereby register as a Research Facility, Exhibitor, Carri to the best of my knowledge. I hereby acknowledge fec 18 years of age or older.			are Act, 7 t				
10. SIGNATURE (b) (6), (b) (7)		11. N	NAME AND	TITLE (Type or	Print)	Mos	12. DATE SIGNED
APHIS FORM 7011	ACKNOWLEDGEMEN	NT OF RECEIPT OF F	REGULATI	ONS AND STAN	IDARDS R	elen d	12:

2016082568105904 Insp_id

Inspection Report

The Johns Hopkins University

(b) (6), (b) (7)(C)

Customer ID: 81

Certificate: 51-R-0006

Site: 003

JOHNS HOPKINS UNIVERSITY, THE

Type: ROUTINE INSPECTION

Date: 14-FEB-2017

No non-compliant items identified during this inspection.

This inspection and exit interview were conducted with various Johns Hopkins University personnel.

Additional Inspectors

Maginnis Gwendalyn, Veterinary Medical Officer Cohen Kimberley, Veterinary Medical Officer

Prepared By:			
	HAMMEL KURT, D V M	USDA, APHIS, Animal Care	Date: 16-FEB-2017

Title: SUPERVISORY ANIMAL CARE SPECIALIST 1023

ROBERT ADAMS

Received By:

Obtained by Rise for Animals. Uploaded 07/05/2020

Date:

Title: DIRECTOR OF RESEARCH ANIMAL RESOURCES 16-FEB-2017



United States Department of Agriculture Customer:

Animal and Plant Health Inspection Service Inspection Date: 14-FEB-17

81

Cust No	Cert No	Site	Site Name	Inspection
81	51-R-0006	003	THE JOHNS HOPKINS UNIVERSITY	14-FEB-17
Count	Species			
000005	BONNET MACAQU	JE		
000005	RHESUS MACAQL	JE		
000006	NIGHT MONKEY			
800000	PIG-TAILED MACA	QUE		
000010	DOMESTIC FERRE	ĒΤ		
000011	EGYPTIAN FRUIT	BAT		
000015	PIG-TAILED MACA	QUE *MA	LE	
000018	DOMESTIC PIG / F	OTBELL	/ PIG / MICRO PIG	
000020	CHINCHILLA (DOM	MESTICAT	ED)	
000033	DEER MOUSE			
000036	HAMADRYAS BAB	OON		
000055	RHESUS MACAQU	JE *MALE		
000064	SEBA'S SHORT-TA	AILED BA	Т	
000078	DOMESTIC GUINE	A PIG		
000125	DOMESTIC RABBI	T / EURO	PEAN RABBIT	
000133	BIG BROWN BAT			
000136	COMMON MARMO	SET		
000758	Total			

2016082568104567 Insp_id

Inspection Report

The Johns Hopkins University

(b) (6), (b) (7)(C)

Customer ID: 81

Certificate: 51-A-0030

Site: 001

THE JOHNS HOPKINS UNIVERSITY

Type: ROUTINE INSPECTION

Date: 15-FEB-2017

3.75(c)(1) CRITICAL

HOUSING FACILITIES, GENERAL.

On January 26, 2016 a young female macaque was found dead in the outdoor portion of her enclosure. This animal had its head entrapped in a ball which was used for enrichment in the animal's enclosure. The ball was described by the facility as having a hole chewed into it sufficient to allow the entire head of the animal to become entrapped with only the mandible of the jaw exposed. This animal died at some time between the PM and AM animal checks. The necropsy of the animal was not conclusive and the facility determined that the likely cause of death was prolonged exposure to the cold in combination with the stress of not being able to remove her head from the ball.

At the time of the inspection today the inspectors noted a few badly worn enrichment items. A couple of these items had holes in them. One enrichment item in particular known as a "pill" had a hole in it large enough for a juvenile macaque to stick its head into. This enrichment item has worn to the point that it is potentially hazardous to animals in the enclosure in which it is being used. Furniture type fixtures or objects must be sturdily constructed and strong enough to provide for the safe activity and welfare of the animals in the enclosure. When excessively worn these items must be removed from the enclosure in order to minimize the risk of head or other limb entrapment.

Corrected at the time of the inspection.

This inspection and exit interview were conducted with various Johns Hopkins University personnel.

Additional Inspectors

Maginnis Gwendalyn, Veterinary Medical Officer Cohen Kimberley, Veterinary Medical Officer

Prepared By:			
	HAMMEL KURT, D V M	USDA, APHIS, Animal Care	Date: 16-FEB-2017
Title:	SUPERVISORY ANIMAL (CARE SPECIALIST 1023	

Tiue.

Received By:

Obtained by Rise for Animals. Uploaded 07/05/2020

ROBERT ADAMS

Date:

Title: DIRECTOR OF RESEARCH ANIMAL RESOURCES 16-FEB-2017



United States Department of Agriculture Customer:

Animal and Plant Health Inspection Service Inspection Date: 15-FEB-17

81

Cust No	Cert No	Site	Site Name	Inspection		
81	51-A-0030	001	THE JOHNS HOPKINS UNIVERSITY	15-FEB-17		
Count	Species					
000049	RHESUS MACAQU	JE *MALE				
000060	PIG-TAILED MACAQUE *MALE					
000163	PIG-TAILED MACA	AQUE				
000178	RHESUS MACAQU	JE				
000450	Total					



Photographer: HAMMEL Date and Time: 15-FEB-17

Inspection No: 2016082568104567

Description:An enrichment item for the macaque monkeys known as a "pill". This one had a hole in it.

UNIVERSITY

Certificate: 51-A-0030

Legal Name:



Photographer: HAMMEL Date and Time: 15-FEB-17

Inspection No: 2016082568104567

Description:An enrichment item for the macaque monkeys known as a "pill". This one had a hole in it.

UNIVERSITY

Certificate: 51-A-0030

Legal Name:



Photographer: HAMMEL Date and Time: 15-FEB-17 Certificate: 51-A-0030

Inspection No: 2016082568104567 Legal Name:

Description:An enrichment item for the macaque monkeys known as a "pill". This one had a hole in it.

UNIVERSITY



Teachable Moments

Legal Name:	THE JOHNS HOPKINS UNIVERSITY						
Customer Num	ber: <u>81</u>	Certificate Number:	51-A-0030				
Inspection Date	:15-FEB-17	Site Number:	001				
Inspector:	(b) (6), (b) (7)(C)						
Section:							

3.75(a) HOUSING FACILITIES, GENERAL.

Housing facilities for nonhuman primates must be kept in good repair, protect the animal from injury and contain the animals securely.

2016082568982264 Insp_id

Inspection Report

The Johns Hopkins University

(b) (6), (b) (7)(C)

Customer ID: 81

Certificate: 51-R-0006

Site: 003

JOHNS HOPKINS UNIVERSITY, THE

Type: ROUTINE INSPECTION

Date: 27-NOV-2017

No non-compliant items identified during this inspection.

This inspection and exit interview were conducted with Johns Hopkins University personnel.

Prepared By:			
	HAMMEL KURT, D V M	USDA, APHIS, Animal Care	Date: 30-NOV-2017
Title.	VETERINARY MEDICAL	OFFICER 1023	

Title: VETERINARY MEDICAL OFFICER 102

Received By:

Obtained by Rise for Animals. Uploaded 07/05/2020

Date: 30-NOV-2017

Page 1 of 1



000102

000167

000174

000182

001003

BIG BROWN BAT

DEER MOUSE

Total

COMMON MARMOSET

DOMESTIC RABBIT / EUROPEAN RABBIT

United States Department of Agriculture Customer:

Animal and Plant Health Inspection Service Inspection Date:

81

27-NOV-17

Cust No	Cert No	Site	Site Name	Inspection			
81	51-R-0006	003	JOHNS HOPKINS UNIVERSITY, THE	27-NOV-17			
Count	Species						
000005	BONNET MACAQU	JE					
000005	SYRIAN / GOLDEN	N HAMSTI	ER (COMMON PET/RESEARCH TYPE)				
800000	DOG ADULT	DOG ADULT					
000012	NANCY MA'S NIGI	HT MONK	EY				
000013	EGYPTIAN FRUIT	BAT					
000014	DOMESTIC FERR	ET					
000018	CAT ADULT						
000022	DOMESTIC PIG / F	POTBELL	Y PIG / MICRO PIG				
000026	PIG-TAILED MACA	AQUE					
000028	HAMADRYAS BAE	BOON					
000033	CHINCHILLA (DON	MESTICA ⁻	ΓED)				
000055	RHESUS MACAQI	JE					
000065	PALLAS'S LONG-1	TONGUE	BAT				
000074	DOMESTIC GUINE	EA PIG					

2016082568982235 Insp_id

Inspection Report

The Johns Hopkins University

(b) (6), (b) (7)(C)

Customer ID: 81

Certificate: 51-A-0030

Site: 001

THE JOHNS HOPKINS UNIVERSITY

Type: ROUTINE INSPECTION

Date: 28-NOV-2017

No non-compliant items identified during this inspection.

This inspection and exit interview were conducted with Johns Hopkins University personnel.

Prepared By:

HAMMEL KURT, D V M USDA, APHIS, Animal Care

Date:
30-NOV-2017

Title: VETERINARY MEDICAL OFFICER 1023

b) (6), (b) (7)(C)

Received By:

Obtained by Rise for Animals. Uploaded 07/05/2020

Date:

30-NOV-2017



United States Department of Agriculture Customer:

Animal and Plant Health Inspection Service Inspection Date: 28-NOV-17

81

Cust No	Cert No	Site	Site Name	Inspection
81	51-A-0030	001	THE JOHNS HOPKINS UNIVERSITY	28-NOV-17
Count	Species			
000221	PIG-TAILED MACA	AQUE		
000282	RHESUS MACAQU	JE		
000503	Total			



Legal Name:	THE JOHNS HOPKINS UNIVERSITY							
Customer Numb	per: <u>81</u>	Certificate Number:	51-R-0006					
Inspection Date	:	Site Number:	003					
Inspector:	(b) (6), (b) (7)(C)							
Section:								

2.31(d)(1)(iv)(A) INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE (IACUC).

Two protocols did not contain written scientific justification for not using analgesics for procedures described in the protocol. According to records provided no animals had yet been subjected to these procedures.



2016082569399008 Insp_id

Inspection Report

The Johns Hopkins University
(b) (6), (b) (7)(C)

Customer ID: 81

Certificate: 51-A-0030

Site: 001

THE JOHNS HOPKINS UNIVERSITY

Type: ROUTINE INSPECTION

Date: 12-MAR-2019

NO NON-COMPLIANT ITEMS WERE IDENTIFIED DURING THIS INSPECTION.

This inspection and exit interview were conducted with the facility manager, attending veterinarian, and animal behaviorist.

Prepared By:

MCFADDEN GLORIA, D V M USDA, APHIS, Animal Care

Date: 14-MAR-2019

Title: VETERINARY MEDICAL OFFICER 1048

o) (6), (b) (7)(C)

Received By:

Obtained by Rise for Animals. Uploaded 07/05/2020

Date:

14-MAR-2019

Title:

Page 1 of 1



Customer: 81
Inspection Date: 12-MAR-19

Species Inspected

Cust No	Cert No	Site	Site Name	Inspection
81	51-A-0030	001	THE JOHNS HOPKINS UNIVERSITY	12-MAR-19

CountScientific NameCommon Name000257Macaca mulattaRHESUS MACAQUE000227Macaca nemestrinaPIG-TAILED MACAQUE000484Total

McFadden, Gloria S - APHIS

From: (b) (6), (b) (7)(0

Sent:Friday, March 15, 2019 11:53 AMTo:McFadden, Gloria S - APHISCc:Eric Hutchinson; Sara Flemming

Subject: Re: USDA Inspection Report dated 12MAR2019 The Johns Hopkins University

Received it,

Thanks you



From: McFadden, Gloria S - APHIS < Gloria.S.McFadden@aphis.usda.gov>

Sent: Friday, March 15, 2019 11:09:04 AM

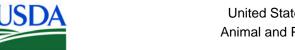
To: (b) (6), (b)

Subject: USDA Inspection Report dated 12MAR2019 The Johns Hopkins University

Dear (b) (6), (b)

Attached is the inspection report for the inspection conducted on March 12, 2019. Please reply to this e-mail, with history, indicating that you have received the inspection report. Include your name and facility name if your e-mail address does not identify you. Do not include any other information or questions. This e-mail will serve as a signature receipt and becomes a part of your official file and will therefore be available to the public through FOIA (Freedom of Information Act). Please make sure you open and can read the file before responding. Thank you.

Gloria S. McFadden, VMO USDA, APHIS, AC 920 Main Campus Dive Suite 200 301-330-1537 (office) (b) (6), (b) (7)(C) This electronic message contains information generated by the USDA solely for the intended recipients. Any unauthorized interception of this message or the use or disclosure of the information it contains may violate the law and subject the violator to civil or criminal penalties. If you believe you have received this message in error, please notify the sender and delete the email immediately.



2016082569507133 Insp_id

Inspection Report

The Johns Hopkins University

(b) (6), (b) (7)(C)

Customer ID: 81

Certificate: 51-R-0006

Site: 003

JOHNS HOPKINS UNIVERSITY, THE

Type: FOCUSED INSPECTION

Date: 18-APR-2019

NO NO-COMPLIANT ITEMS WERE IDENTIFIED DURING THIS INSPECTION.

The inspection and exit interview were conducted with the facility representatives.

Prepared By:

MCFADDEN GLORIA, D V M USDA, APHIS, Animal Care

Date: 06-JUN-2019

Title: VETERINARY MEDICAL OFFICER 1048

) (6), (b) (7)(C)

Received By:

Obtained by Rise for Animals. Uploaded 07/05/2020

Date:

06-JUN-2019

Title:

Page 1 of 1



Customer: 81
Inspection Date: 18-APR-19

Species Inspected

Cust No	Cert No	Site	Site Name	Inspection
81	51-R-0006	003	JOHNS HOPKINS UNIVERSITY, THE	18-APR-19

No Animals were Inspected.

 Count
 Scientific Name
 Common Name

 000000
 NONE
 NONE

000000 Total

From: (b) (6), (b)

To: McFadden, Gloria S - APHIS

Subject: Fw: the signed report from Johns Hopkins **Date:** Friday, April 26, 2019 1:36:03 PM

Attachments: [Untitled].pdf

Dear Dr. McFadden--Thank you for sending the final Inspection Report for the focused inspection you carried out recently. I have signed it and attached a scan of the report to this email.

Best regards,

