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 and 9 C.F.R. § 2.36). Failure to report according to the regulations can result in an order to cease and desist.

Interagency Report Control No. 0180-DOA-AN

Fiscal Year:

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. REGISTRATION NUMBER: 93-R-0521

Customer Number: 43509

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include ZIP Code)

ProSci Inc. 12170 Flint Place Poway, CA 92064

Poway, CA 92064 Telephone: (858) 513-2638

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) See Attached Listing REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7023A.) Number of animals upon Number of animals upon which teaching, which experiments. experiments, research, surgery, or tests were Number of animals Number of animals teaching, research, conducted involving accompanying pain or upon which being bred, surgery, or tests were distress to the animals and for which the use of teaching, research, conditioned, or held conducted involving TOTAL NUMBER Animals Covered By appropriate anesthetic, analgesic, or experiments, or for use in teaching. OF ANIMALS tranquilizing drugs would have adversely The Animal accompanying pain or tests were testing, experiments, distress to the animals affected the procedures, results, or Welfare Regulations conducted involving research, or surgery (Cols. C + D + E) interpretation of the teaching, research, and for which no pain, distress, or but not yet used for appropriate anesthetic, experiments, surgery, or tests. (An explanation use of pain-relieving such purposes. of the procedures producing pain or distress on analgesic, or drugs. tranquilizing drugs were these animals and the reasons such drugs were not used must be attached to this report.) used. 4. Dogs 5. Cats 6. Guinea Pigs 7. Hamsters 247 2 249 323 8. Rabbits 9. Non-human Primates 10. Sheep 11. Pigs 12. Other Farm Animals Goats Ø 2 13. Other Animals 3 Llamas

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).

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

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

DATE SIGNED

10-5-20

JUL 2020

04 NOV 2020

APHIS Form 7023 Site Addendum for FY:

Registration Number:	93-R-0521	
Customer ID Number:	43309	
Facility Business Addre	s Information:	
ProSci In 12170 Flir Poway, CA Telephone: (858) 5	+ Place	
Facilities Site(s) Addres	s Information:	
Site Codes:		

21-04449_000202

Obtained by Rise for Animals. Uploaded to Animal Research Laboratory Overview (ARLO) on 07/21/2021