Assurance No. A3519-01, p. 15

Appendix II MEMBERSHIP OF INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE Date: 03/31/2014

Institution Name: Barrow Neurological Institute of St. Joseph's Hospital and Medical Center Assurance Number: A3519-01

Chairperson Name, Title, an Degree/Credentials	d Bus	Business Address, Phone, Fax, and Email of Chairperson					
Name: Thomas M. Hamm Title: Professor Degree/Credentials: Ph.D.	Add	Address: Division of Neurobiology 350 W. Thomas Rd. St. Joseph's Hospital and Medical Center Phoenix, AZ 85013					
	Pho	ne:	^{(b) (6)} Fax:	(b) (6)	Email: thomas.hamm@dignityhealth.org		
Member Name	Degrees/Credential	s Po	sition Title		PHS Policy Membership Requirements		
				(b) (6)	Scientist		
Timothy A. Martin	D.V.M., M.B.A.	Directo	or, Lab. Animal Care		Veterinarian		
				(b) (6)	Non-affiliated Member		
					Nonscientist		
					Scientist		
					Scientist		
					Veterinarian		
					Scientist		

Assurance No. A3519-01, p. 16

(b) (6)	Alternate VA Member
	Member

Assurance No. A3519-01, p. 17

Appendix III FACILITY AND SPECIES INVENTORY

Date: 03/31/14

Institution Name: Barrow Neurological Institute of St. Joseph's Hospital and Medical Center Assurance Number: A3519-01

Laboratory, Unit or Building	Gross Square Feet	Species Housed in Unit	Approx. Average Daily Inventory
(b) (4)	4240		······
		Cats	5
		Dogs	0
		Frogs (Xenopus)	5
		Guinea Pigs	6
		Mice	2300
		Rabbit	2
		Rats	85
		Swine	2
	525	Mice	15
		Rats	18