

Accuro Farms
ANIMAL WELFARE ASSURANCE
in accordance with the PHS Policy for
Humane Care and Use of Laboratory Animals

I, Stephen T. Cornell as named Institutional Official for animal care and use at Accuro Farms Inc., hereinafter referred to as Institution, by means of this document, provide assurance that this Institution will comply with the Public Health Service Policy on Humane Care and Use of Laboratory Animals, hereinafter referred to as PHS Policy.

I. APPLICABILITY OF ASSURANCE

This Assurance applies whenever this Institution conducts the following activities: all research, research training, experimentation, biological testing, and related activities involving live vertebrate animals supported by the PHS, HHS, and/or NSF. This Assurance covers only those facilities and components listed below.

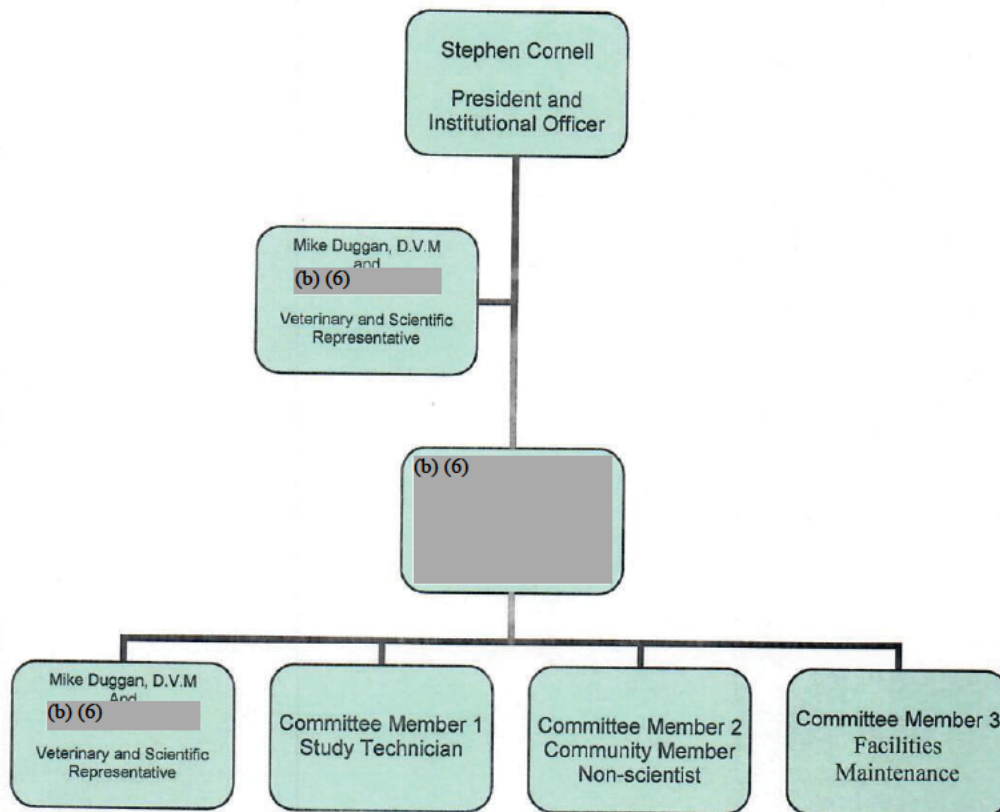
"Institution" includes the only (one) branch Accuro Farms Inc., a stand-alone entity.

II. INSTITUTIONAL COMMITMENT

- A. This Institution will comply with all applicable provisions of the Animal Welfare Act and other Federal statutes and regulations relating to animals.
- B. This Institution is guided by the "U.S. Government Principles for the Utilization and Care of Vertebrate Animals Used in Testing, Research, and Training."
- C. This Institution acknowledges and accepts responsibility for the care and use of animals involved in activities covered by this Assurance. As partial fulfillment of this responsibility, this Institution will ensure that all individuals involved in the care and use of laboratory animals understand their individual and collective responsibilities for compliance with this Assurance, as well as all other applicable laws and regulations pertaining to animal care and use.
- D. This Institution has established and will maintain a program for activities involving animals in accordance with the "Guide for the Care and Use of Laboratory Animals" ("Guide").
- E. This Institution agrees to ensure that all performance sites engaged in activities involving live vertebrate animals under consortium (subaward) or subcontract agreements have an Animal Welfare Assurance and that the activities have Institutional Animal Care and Use Committee (IACUC) approval.

III. INSTITUTIONAL PROGRAM FOR ANIMAL CARE AND USE

- A. The lines of authority and responsibility for administering the program and ensuring compliance with this Policy are as follows:



- B. The qualifications, authority, and percent of time contributed by the veterinarian(s) who will participate in the program are as follows:

Name: Mike Duggan, D.V.M

Qualifications and Degrees: Michael Duggan, D.V.M, graduated from Tufts Veterinary School in 1996, completed a large animal surgical internship in 1997 and has been involved in biomedical research since 2000. He currently holds a faculty appointment (Physiologist) in the Division of Trauma and Surgical Critical Care/Dept. of Surgery at Massachusetts General Hospital (MGH) and Instructor of Surgery, Harvard Medical School.

Training and/or experience in laboratory animal medicine: Michael Duggan, D.V.M, has 18 years of laboratory animal experience, including five years as clinical veterinarian at Center for Comparative Medicine, MGH, during which he also served on this institutions IACUC. He has extensive experience working with the following species: nonhuman primates, swine, sheep, dogs, rabbits, horses, mice and rats. As Attending Veterinarian, Dr Duggan oversees all aspects of animal care associated with the daily operations of

Accuro Farms. In his position as Attending Veterinarian, Dr Duggan has direct access to the Institutional Official and has direct program responsibility to implement PHS Policy and the recommendations of the Guide.

Authority: Dr. Duggan has direct program authority and responsibility for the Institution's animal care and use program including access to all animals.

Time Contributed to Program: Dr. Duggan is physically on site for a minimum of eight hours every other week and is available on an on-call basis at all other times for animal related issues. During these visits, Dr. Duggan works with the Vivarium Manager and visits all animals on site to assess overall health status. Dr Duggan also serves on the IACUC and as such reviews all protocols to assure that the animal welfare requirements are upheld. Approximately 25% of Dr Duggan's time is devoted to the animal care and use program.

(b) (6)



C. The Institutional Animal Care and Use Committee (IACUC) at this Institution is properly appointed in accordance with the PHS Policy IV.A.3.a and is qualified through the experience and expertise of its members to oversee the Institution's animal care and use program and facilities. The IACUC consists of at least five members, and its membership meets the composition requirements set forth in the PHS Policy, Section

IV.A.3.b. Attached is a list of the chairperson and members of the IACUC and their names, degrees, profession, titles or specialties, and institutional affiliations.

D. The IACUC:

1. Reviews the Institution's program for humane care and use of animals at least once every six months, using the "Guide" as a basis for evaluation. The IACUC procedures for conducting semiannual program reviews are as follows: At a convened meeting a quorum of IACUC members utilize the OLAW checklist to ensure a thorough review of all components of the program. All IACUC members may participate in the semiannual program review process. The review will include programs such as: veterinary care, animal health monitoring, IACUC operation, disaster management, vermin control and employee training that are in place for the facility. Documentation including, but not limited to, standard operating procedures, policies, training records, facility records, transport records, receipt records are reviewed. The veterinary care program is reviewed with the Attending Veterinarian. The semiannual facility inspection is conducted prior to the program review and the report and facility plan are also reviewed with the committee as part of the program review. Additionally, any animal welfare or health and safety concerns are reviewed. All findings are included at the end of the program review checklist and include a plan for resolution as needed.

2. Inspect at least once every six months all of the Institution's animal facilities, including satellite facilities, using the "Guide" as a basis for evaluation. The IACUC procedures for conducting semiannual facility inspections are as follows:

A subcommittee of at least two IACUC members conducts a semiannual facility inspection of all animal facilities, support facilities, feed and bedding storage, drug storage and transport vehicles. All IACUC members may participate in the semiannual facility inspection process. A checklist is utilized to ensure all requirements are reviewed. A report that details each specific area is developed and contains all findings noted by the IACUC, with a designation for minor deficiencies and significant deficiencies. The facility develops an action plan for any deficiencies noted including a time line for completion. The completed facility inspection report is added to the semiannual program review report and a summary is developed by the IACUC chair. All members have an opportunity to review the report and any minority review are included. Once signed the IACUC chair submits the completed report to the Institutional Official.

3. Prepare reports of the IACUC evaluations as set forth in the PHS Policy IV.B.3 and submit the reports to the Institutional Official. The IACUC procedures for developing reports and submitting them to the Institutional Official are as follows:

The IACUC chairperson prepares an inspection report or a report update for approval by the full IACUC. These reports will be issued as final draft to the IO after the completion of each inspection. The report will contain a description of the nature and extent of the facility's adherence to the AWA, PHS Policy and the Guide for the Care and Use of Laboratory Animals (Guide) and will identify any departures from the provisions of the Act, PHS Policy or the Guide and include the reason for the IACUC approved departure. Major (significant) and minor deficiencies, as determined by their

potential to be a threat to the health and/or safety of animals, will be distinguished. It is the responsibility of the facility to develop the action plan including target dates to address cited deficiencies.

The IACUC report plus the facility response shall be reviewed and signed (approved) by a majority of the IACUC members. It will include any minority comments.

4. Review concerns involving the care and use of animals at the Institution. The IACUC procedures for reviewing concerns are as follows:

Accuro Farms has an established relationship with (b) (4) offers a confidential, anonymous, and secure third-party service that the employees can use to report any kind of inappropriate/illegal behavior, including employee theft, unethical conduct, fraud, or dangerous activity. Matters that pertain to animal welfare would be reported back by (b) (4) to the IACUC chair who will then evaluate the steps forward for further investigation. All other matters would be reported to the President of Accuro Farms.

Animal welfare concerns may be investigated by the Animal Welfare Review Team (AWRT). The AWRT members include the IACUC Chairperson, Attending Veterinarian, Vivarium Manager and any other individual appointed by local management. The AWRT reports to the IACUC. All concerns and investigations of concerns are reviewed in the IACUC meetings and deliberations are recorded. All concerns are brought to the attention of the Institutional Official by the IACUC chair once the investigation is complete. Annual animal welfare training is conducted with the staff and includes the process for reporting any animal welfare concerns. A poster noting the process for reporting animal welfare concerns is prominently displayed in the technician office, including information on how concerns may be reported anonymously.

5. Make written recommendations to the Institutional Official regarding any aspect of the Institution's animal program, facilities, or personnel training. The procedures for making recommendations to the Institutional Official are as follows:

Reports are issued from the IACUC to the IO after each semi-annual program review. The report will contain a description of the nature and extent of the facility's adherence to the AWA, PHS Policy and the Guide and will identify any departures from the provisions of the Act, PHS Policy or the Guide. Major (significant) and minor deficiencies, as determined by their potential to be a threat to the health and/or safety of animals, will be distinguished. Additionally, the report will contain a reasonable and specific plan and schedule with dates for correcting cited deficiencies. It is the responsibility of the facility to develop the action plan including target dates to address cited deficiencies.

6. In accord with the PHS Policy IV.C.1-3, the IACUC shall review and approve, require modifications in (to secure approval), or withhold approval of PHS-supported activities related to the care and use of animals. The IACUC procedures for protocol review are as follows:

The IACUC is charged by the facility to review and approve activities (protocols) before animals can be used, review and approve amendments to activities that involve the care and use of animals and approve annual updates of activities. Under this authority, no activity involving the care or use of animals may be conducted at this facility without IACUC approval. The IACUC uses both a full committee review (FCR) and a designated member review (DMR) process. New protocols undergo FCR at a convened meeting with a quorum of the IACUC. Based on the protocol review of a quorum of the IACUC at a convened meeting outcome may include: approval, requiring modifications to secure approval or withholding approval. All outcomes are determined by a majority vote of the convened quorum. -If additional time is required to achieve modifications to secure approval a follow up meeting of a quorum of the IACUC will be held to determine the outcome of protocol review.

Outcomes include: approval, requires modifications to secure approval or withhold approval. The committee (a quorum of the IACUC) may approve the protocol at the initial FCR. If modifications are required to secure approval questions are posed to the Investigator in writing and then a follow up meeting is convened of a quorum of the IACUC to deliberate following the answers to questions asked. If approval is granted it is by formal vote of the convened quorum.

Designated member review is utilized after the IACUC is provided the protocol information or access to the protocol and has had the opportunity to call for full committee review; the decision of members approving DMR is documented in the IACUC file. No response by the end of the protocol review period called by the IACUC chair is considered assent to DMR.

If no member call for FCR then the IACUC chair appoints one member, qualified to conduct the review as the DMR. Outcomes of the DMR include: approval, requiring modifications to secure approval or referral to FCR. DMR may not result in the withholding of approval.

If no member calls for FCR, then IACUC Chair appoints one member, qualified to conduct the review, as the DMR. Possible outcomes of DMR include: approval, requires modifications to secure approval or call to FCR. If the application requires modifications to secure approval or approval is withheld, the Investigator is provided with the reasons for the decisions in writing, and the opportunity to respond to the feedback.

In the event any of the IACUC members will be actively involved with the conduct of the study, that member will recuses themselves from the protocol review.

7. Review and approve, require modifications in (to secure approval), or withhold approval of proposed significant changes regarding the use of animals in ongoing activities as set forth in the PHS Policy IV.C. The IACUC procedures for reviewing proposed significant changes in ongoing research projects are as follows:

Significant changes to a protocol are managed by review of an amendment to the study protocol. Amendments are submitted for IACUC review by the IACUC chair and are shared with the entire committee for review. Once all members have had an opportunity to call for full committee review, DMR is assigned by the IACUC chair and

conducted as described in Part III.D.6. If FCR is called, a quorum of the IACUC will be convened and after deliberation a formal vote will be held to approve, seek additional information (to secure approval) or withhold approval as described in Part III.D.6.

8. Notify investigators and the Institution in writing of its decision to approve or withhold approval of those activities related to the care and use of animals, or of modifications required to secure IACUC approval as set forth in the PHS Policy IV.C.4. The IACUC procedures to notify investigators and the Institution of its decisions regarding protocol review are as follows:

Following protocol review IACUC members are convened to deliberate the protocol. If available, the investigator may come to the first part of the meeting to address any questions the committee may have. Otherwise, if questions emerge during deliberations, they are shared with the investigator in writing via email for additional follow-up. The committee may grant approval during the convened meeting, require modifications to secure approval or withhold approval. If protocol approval is withheld pending additional information the PI may either respond to questions/comments respond in writing or may attend to the follow-up convened meeting to address questions. All IACUC decision are communicated in writing and kept in the IACUC file. Protocol outcomes are shared with the IO by the IACUC chair at the conclusion of deliberations. The investigator is notified via email of the outcome of deliberations.

9. Conduct continuing review of each previously approved, ongoing activity covered by PHS Policy at appropriate intervals as determined by the IACUC, including a complete review in accordance with the PHS Policy IV.C.1-4 at least once every three years. The IACUC procedures for conducting continuing reviews are as follows:

All studies that are on-going for more than one year are reviewed by the IACUC to assure that study conduct is compliant with previous approvals and that justification for continued work is provided. All studies that have been on-going for more than three years must be submitted to the IACUC for a de novo review prior to the expiration date. This protocol review would occur by FCR at a convened meeting of a quorum of the IACUC as described in Part III.D.6. Outcomes of this review may include approval, requiring modifications to secure approval or withholding approval.

Post approval monitoring occurs as part of the program review process.

10. Be authorized to suspend an activity involving animals as set forth in the PHS Policy IV.C.6. The IACUC procedures for suspending an ongoing activity are as follows:

Suspension of a protocol occurs by a convened meeting of a quorum of the IACUC with a majority vote of the quorum present to suspend. Should the IACUC become aware of any animal activity that is outside the approved procedures a full committee review would be convened. If the concern has or cannot be rectified to the satisfaction of the IACUC the protocol may be suspended by a vote of a

majority of the convened quorum, The Investigator would be notified to suspend activity until a plan addresses the issue relating to suspension. This could include seeking amendments to the protocol that would require IACUC approval to proceed or it could result in termination of the study. The IACUC will include in the communication of any suspension of activity and the Institutional Official will promptly provide OLAW with a full explanation of the circumstances and actions taken.

E. The occupational health and safety program for personnel working in laboratory animal facilities or have frequent contact with animals is as follows:

Accuro Farms has an existing relationship with (b) (4) an occupational health organization based in (b) (4) (b) (4) assessed our organization upon the inception of the relationship and determined the requirements for the program based upon the type of work that is being performed and the species that we work on. This included the type of Personnel Protective Equipment to be worn, work environment requirements (lifting, standing etc.) and the bio hazard potential. Through this, the group created a pre-employment physical that would be used to evaluate the candidate prior to being hired. The emphasis is on any preexisting allergies, their current health status and any issues that may prevent them from performing their duties. All perspective employees will also have a TB test and a Tetanus booster given should they not be able to show proof of a recent booster. On an annual basis, the management of Accuro Farms meet with (b) (4) to discuss the current environment with emphasis on any changes to the program. Based on the discussions (b) (4) will determine if there are any changes required to ensure personnel safety. The vivarium manager has the responsibility of daily oversight of the occupational health and safety program and monitors the ongoing activities to and ensure that they are compliant with the procedures established in the occupational health program. (b) (4) will also present to all employees on an annual basis a questionnaire to determine if there have been any changes to the employee's health status. Based on the responses, (b) (4) may recommend changes/ limitations to the employees' involvement in the program.

Once hired each employee will have an orientation meeting, to be documented in the employee's training file, with the Attending Veterinarian during which they will review the potential bio-hazards that the individual may be exposed to and the corrective action needed to be taken in the event of an exposure. During this discussion the Veterinarian will review the potential bio-hazards, with emphasis on any zoonotic diseases and allergens the individual may be exposed to and the conditions in which they should notify management of their inability to perform their duties. This may include, but not be limited to, suspected pregnancy, an injury outside of the office or any change in health status that would be believed to place the individual into an immunocompromised position. This information can be communicated directly to Accuro Farms Management or to the (b) (4) group directly whom in turn will determine the course of action to be taken. Once identified, job modifications would be implemented based on physicians' orders or through discussions with the Occupational Health group. It is incumbent of all employees to notify their supervisor immediately following any accidental exposure or work-related accident so that corrective action can be taken immediately. This may include a washing/ scrubbing procedure for needle sticks through to being brought to the local Occupational Health Center/ Emergency Room as the need dictates. The accident will be documented and reviewed by the Supervisor

and will be investigated for possible failures within the procedure to preclude the reoccurrence of the incident.

All employees are provided and are expected to wear appropriate Personal Protective Equipment (PPE) when working with the animals. PPE includes scrubs, dedicated foot wear, latex gloves and safety glasses. As these items become soiled it is expected that each shall be exchanged for clean items as needed. In the event that any employee feels that further protection may be required they are directed to make their Supervisor aware and the Supervisor determines further resolution. All employees are required to wash their hands following the removal of the soiled PPE prior to going to their next activity. It is also forbidden to either eat or drink within the vivarium and not place any food that is for human consumption in refrigerators labels for vivarium use

All non Accuro Farms personnel (vendors, Sponsors) entering the facility will be asked to read a brief memo outlining Accuro Farms Animal Welfare policies as well as the potential hazards contained within the facility. A visitor may opt not to enter the facility based on the current health status. If they wish to enter, they will be asked to sign the Memo indicating that they understand the potential risks they are entering in to. No further questions will be asked to those not wishing to enter however they will be offered the opportunity to discuss their concern further with a Health Care Professional at

(b) (4)

- F. The total gross number of square feet in each animal facility (including each satellite facility), the species of animals housed therein and the average daily inventory of animals, by species, in each facility is provided in the attached Facility and Species Inventory table.

The table is included as an Attachment.

- G. The training or instruction available to scientists, animal technicians, and other personnel involved in animal care, treatment, or use is as follows:

The training or instruction available to scientists, animal technicians, and other personnel involved in animal care, treatment, or use is performed by both the Vivarium Manager and/ or the Attending Veterinarian ("trainers"). Training includes both the theory behind the technique in addition to hands on practical demonstration of techniques in the presence of the trainer. Attention will be paid to effective animal handling and animal welfare. Prior to any employee performing any animal related activities, that individual will be trained to the Standard Operating Procedure by the trainers and the training of such will be documented. These documents will become part of the employee's personnel file. Once the trainer feels that the employee is effectively trained in the procedure, the training document will be signed by both the trainer and employee. The employee's technique may be from time to time reviewed by the trainer to ensure that the appropriate procedures are being followed.

Annual training is held for employees to review animal welfare practice and procedures. The process for identifying and reporting animal welfare concerns is reviewed with all members of the staff.

Ongoing professional development is encouraged. At this time two members of the team are AALAS certified, one at the LAT level and one at the ALAT level.

New IACUC members are provided copies of the PHS Policy, the Guide for the Care and Use of Laboratory Animals and are trained to conduct protocol review, facility inspection and semi-annual program review. The Attending Veterinarian periodically provides overview information regarding the minimization of animal numbers used to obtain valid results and the minimization of pain and distress during convened meetings of the IACUC.

Once approved, the OLAW assurance will be shared with all members of the IACUC and reviewed annually by the committee.

IV. INSTITUTIONAL PROGRAM EVALUATION AND ACCREDITATION

All of this Institution's programs and facilities (including satellite facilities) for activities involving animals have been evaluated by the IACUC within the past six months and will be re-evaluated by the IACUC at least once every six months thereafter, in accord with the PHS Policy IV.B.1-2. Reports have been and will continue to be prepared in accord with the PHS Policy IV.B.3. All IACUC semiannual reports will include a description of the nature and extent of this Institution's adherence to the "Guide." Any departures from the "Guide" will be identified specifically and reasons for each departure will be stated. Reports will distinguish significant deficiencies from minor deficiencies. Where program or facility deficiencies are noted, reports will contain a reasonable and specific plan and schedule for correcting each deficiency. Semiannual reports of the IACUC's evaluations will be submitted to the Institutional Official. Semiannual reports of IACUC evaluations will be maintained by this Institution and made available to the OLAW upon request.

This Institution is not accredited by the Association for Assessment and Accreditation of Laboratory Animal Care, International (AAALAC). As noted above, reports of the IACUC's semiannual evaluations (program reviews and facility inspections) will be made available upon request. The report of the most recent evaluations (program review and facility inspection) is attached.

V. RECORDKEEPING REQUIREMENTS

- A. This Institution will maintain for at least three years:
1. A copy of this Assurance and any modifications thereto, as approved by the PHS.
 2. Minutes of IACUC meetings, including records of attendance, activities of the committee, and committee deliberations.
 3. Records of applications, proposals, and proposed significant changes in the care and use of animals and whether IACUC approval was given or withheld.
 4. Records of semiannual IACUC reports and recommendations (including minority views) as forwarded to the Institutional Official, Stephen T Cornell
 5. Records of accrediting body determinations.
- B. This Institution will maintain records that relate directly to applications, proposals, and proposed changes in ongoing activities reviewed and approved by the IACUC for the duration of the activity and for an additional three years after completion of the activity.
- C. All records shall be accessible for inspection and copying by authorized OLAW or other PHS representatives at reasonable times and in a reasonable manner.

VI. REPORTING REQUIREMENTS

- A. This Institution's reporting period is *January 1 – December 31*. The IACUC, through the Institutional Official, will submit an annual report to OLAW on *January 31* of each year. The report will include:
1. Any change in the accreditation status of the Institution (e.g. if the Institution obtains accreditation by AAALAC or AAALAC accreditation is revoked), any change in the description of the Institution's program for animal care and use as described in this Assurance, or any change in the IACUC membership. If there are no changes to report, this Institution will provide written notification that there are no changes.
 2. Notification of the dates that the IACUC conducted its semiannual evaluations of the Institution's program and facilities (including satellite facilities) and submitted the evaluations to the Institutional Official, Stephen T Cornell.
- B. The IACUC, through the Institutional Official, will promptly provide OLAW with a full explanation of the circumstances and actions taken with respect to:
1. Any serious or continuing noncompliance with the PHS Policy.
 2. Any serious deviations from the provisions of the "Guide."
 3. Any suspension of an activity by the IACUC.
- C. Reports filed under sections VI.A. and VI.B. of this document shall include any minority views filed by members of the IACUC.

VII. INSTITUTIONAL ENDORSEMENT AND PHS APPROVAL

A. Authorized Institutional Official

Name: Stephen T Cornell

Title: President

Name of Institution: Accuro Farms Inc.

Address: 346 Blackmer Road
Southbridge, MA
01550

Phone: 508-667-3752

Fax: NA

E-mail: Stephen.cornell@accurofarms.com

Signature

Date: 2/5/19

B. PHS Approving Official

Doreen H. Bartlett

Senior Assurance Officer, Division of Assurances

Office of Laboratory Animal Welfare (OLAW)

National Institutes of Health

6700B Rockledge Drive Suite 2500 MSC 6910

Bethesda, MD 20892

bartletd@od.nih.gov

301-496-7163

Signature: Doreen H. Bartlett -S

Digitally signed by Doreen H. Bartlett -S
Date: 2019.02.06 15:21:42 -05'00'

Date: February 6, 2019

C. Effective Date of Assurance: February 4, 2019

D. Expiration Date of Assurance: February 28, 2023

Assurance Number: D19-01051

MEMBERSHIP OF THE INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE

DATE: October 26, 2009

NAME OF INSTITUTION: Accuro Farms

ASSURANCE NUMBER:

Chairperson Name, Title, and Degree/Credentials	Business Address, Phone, Fax, and Email of Chairperson
Name*: Melissa Puliafico, Chairperson	Address*: 346 Blackmer Road Southbridge, MA 01550
Title*: Director, Educational Affairs, UMMS	

Degree/credentials*: MBA (Melissa Puliafico)	Phone*: (b) (6)	Fax*: NA	Email*: melissa.puliafico@gmail.com

Name of Member/Code**	Degree/Credentials	Position Title	PHS Policy Requirements***
Dr Michael Duggan	D.V.M	Attending Veterinarian and Scientific representative	V, S
(b) (6)		Study Technician	(b) (6)
		Project Coordinator	
		Maintenance Person	
		Back up Attending Veterinarian and Scientific representative	

1 - This member is employed by a another institution in a non-animal related position

The PHS Policy IV.A.3.b.(4) describes the nonaffiliated member as "one individual who is not affiliated with the institution in any way other than as a member of the IACUC, and is not a member of the immediate family of a person who is affiliated with the institution." The nonaffiliated member represents the general community interests in the proper care and use of animals. The nonaffiliated member is (1) not a laboratory animal user or former user, (2) not affiliated with the institution, or (3) not an immediate family member of an individual affiliated with the institution. Immediate family includes parent, spouse, child, and sibling.

*In evaluating the qualifications of an individual to serve as a nonaffiliated member, the Chief Executive Officer should confirm the appointee has no discernible ties or ongoing affiliation with the institution. Regarding service of former employees or students as nonaffiliated members, the appointing official must be assured that the person is not in any way obligated to the institution. Real or perceived conflicts of interest must be avoided to ensure the IACUC's and the institution's integrity. Appointment of an individual who is unambiguously unaffiliated is the most effective way to fulfill the intent of the Policy. Public member is another term for nonaffiliated member. (See NOT-OD-15-109) **Does Committee #2 meet the criteria of a non-affiliated member?***

FACILITY AND SPECIES INVENTORY

DATE: October 20, 2018

NAME OF INSTITUTION: Accuro Farms Inc.

ASSURANCE NUMBER:

[illegible]

*Institutions may identify animal areas in any manner, e.g., initials, ID number, etc. However, the name and location must be provided to OLAW upon request.