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 0579-0036 US 0							
This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an and to be subject to penalties as provided for in Section 2150.				in an order to cease	e and desist	Interagency Report Control No. 0180-DOA-AN	Fiscal Year 2016
UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE			1. REGISTRATION NUMBER 21-R-0024				
			<ol> <li>HEADQUARTERS RESEARCH FACILITY (Name, address, and telephone number as registered with USDA, include ZIP Code)</li> </ol>				
ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)				STATE UNIVERSITY OF NEW YORK COLLEGE OF ENVIRONMENTAL SCIENCE AND FORESTRY 1 FORESTRY DRIVE SYRACUSE, NY 13210			
<ol> <li>REPORTING FACILITY (Interesting)</li> </ol>	List all locations where animal	s were housed or used in act	ual research, t	esting, teaching, or	experimentation	, or held for these purposes. Attach	additional sheets, if
		F	ACILITY LOC	ATIONS (Sites)			
REPORT OF ANIMALS USE			(Attach additio	nal shoota if name	and or upo API		
Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	-		E. Number of experime conducte distress t appropria tranquiliz affected t interpreta experime of the pro these and	of arimals upon which teaching, of animals upon which teaching, nts, research, surgery, or tests were d involving accompanying pain or o the animals and for which the use ite anesthetic, analgesic, or ing drugs would have adversely he procedures, results, or tition of the teaching, research, nts, surgery, or tests. (An explanatio credures producing pain or distress imals and the reasons such drugs used must be attached to this report	of OF ANIMALS (Cols. C + D + E)
4. Dogs	0	0	0			0	0
5. Cats	0	0	0			0	0
6. Guinea Pigs	0	0	0			0	0
7. Hamsters	0	0	0			0	0
8. Rabbits	0	0	0			0	0
9. Non-human Primates	0	0	0			0	0
10. Sheep	0	0	0			0	0
11. Pigs	0	0	0			0	0

## ASSURANCE STATEMENTS

12. Other Farm Animals

13. Other Animals

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.

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2.) Each principal investigator has considered alternatives to painful procedures.

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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).

DATE SIGNED 06-DEC-2016

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The applicate sequelably law (7) S15.2.1140, Tables to proport according to the regulations activate and reduction according to the regulations can evalual an a order to create and reduction. (SIGLOGAN)         Fiscal Year 2016           UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE CONTINUATION SHEET FOR ANNUAL REPORT OF RESEARCH FACILITY (IYPE OR PRINT)         - REGISTRATION NUMBER 2149.0024         - REGIST	unless it displays a valid OM collection is estimated to ave needed, and completing and	IB control number. The valid ( rage 2 hours per response, ir reviewing the collection of inf	cluding the time for reviewing ormation.	formation coll instructions, s	ection is 0579-0036. searching existing da	The time required at a sources, gat	ed to complete this information hering and maintaining the data	OMB APPROVED 0579-0036	
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SMOKEY SHREW     0     3     0     0     3	SHREWS	0	8		0		0	8	
	CINEREUS SHREW	0	1		0		0	1	
	SMOKEY SHREW	0	3		0		0	3	
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).							
	DATE SIGNED						