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 of 0579-0036 because of the end of										
This report is required by law and to be subject to penalties			ons can result in an order to cease	e and desist Interagency Report Control No. 0180-DOA-AN	Fiscal Year 2017					
	ATES DEPARTMENT D PLANT HEALTH IN			1. REGISTRATION NUMBER						
				<ol> <li>HEADQUARTERS RESEARCH FACILITY (Name, address, and telephone number as registered with USDA, include ZIP Code)</li> </ol>						
ANNUAL RE	PORT OF RES		LITY GEORGIA S BOX 8005	GEORGIA SOUTHERN UNIVERSITY BOX 8005						
				STATESBORO, GA 30460						
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.)										
		F	ACILITY LOCATIONS (Sites)							
			(Attach additional sheets, if neces	sary, or use APHIS FORM 7023A.)						
A. 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.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery, or tests wern conducted involving accompanying pain or distress to the animals and for which the use appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanati of the procedures producing pain or distress these animals and the reasons such drugs were not used must be attached to this repo	of TOTAL NUMBER 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					
12. Other Farm Animals										
13. Other Animals	205	0	0	0	0					
ASSURANCE STATEMENTS	s									

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 02-NOV-2017

unless it displays a valid OM collection is estimated to ave	IB control number. The valid C	OMB control number for this in cluding the time for reviewing	sor, and a person is not required t formation collection is 0579-0036 instructions, searching existing da	. The time require	d to complete this information	OMB APPROVED 0579-0036
This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150. No. 0180-DOA-A						Fiscal Year 2017
UNITED ST ANIMAL AN	57 D 010	1. REGISTRATION NUMBER 57-R-0121				
CONTINU REPOR	L with USDA, inc GEORGIA BOX 8005	<ul> <li>PEADQUARTERS RESEARCH FACILITY (Name, address, and telephone number as registered with USDA, include ZIP Code)</li> <li>GEORGIA SOUTHERN UNIVERSITY</li> <li>BOX 8005</li> <li>STATESBORO, GA 30460</li> </ul>				
			(Attach additional sheets if neces	-	,	
A. 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.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	experimen were cond pain or dis which the analgesic, adversely or interpre experimen of the proc on these a	animals upon which teaching, ts, research, surgery, or tests lucted involving accompanying stress to the animals and for use of appropriate anesthetic, or tranquilizing drugs would have affected the procedures, results, tation of the teaching, research, its, surgery, or tests. (An explanat sedures producing pain or distress animals and the reasons such drug used must be attached to this repo	(Cols. C + D + E)
GOLDEN MOUSE	1	0	0		0	0
BEACH MOUSE	29	0	0		0	0
BEACH MOUSE	111	0	0		0	0
EASTERN HARVEST M	OUSE 36	0	0		0	0
COTTON RAT	27	0	0		0	0
SHREW	1	0	0		0	0
ASSURANCE STATEMENT	S	-				·

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							