it displays a valid OMB contro collection is estimated to ave	ol number. The valid OMB con	ntrol number for this informati cluding the time for reviewing	sor, and a person is not required on collection is 0579-0036. The t instructions, searching existing d	time required to c	omplete this information	OMB APPROVED 0579-0036 Exp.: 10/31/2018	
This report is required by law and to be subject to penalties	ions can result in an order to ceas	se and desist	desist Interagency Report Control No. 0180-DOA-AN Fiscal Year 201				
UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE				1. REGISTRATION NUMBER 35-R-0127			
				TERS RESEARC h USDA, include	H FACILITY (Name, address, and tele ZIP Code)	phone number as	
ANNUAL REPORT OF RESEARCH FACILITY				SPF NORTH AMERICA INC 428 S WASHINGTON STREET			
	420 5 WA						
3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, to				MONDOVI, WI 54755			
necessary.)	List all locations where animal			rexperimentation	, or new for these purposes. Attach a	uuuonai sneets, n	
		F	ACILITY LOCATIONS (Sites)				
		OF RESEARCH FACILITY	(Attach additional sheets, if nece	-	,	F.	
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.	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.	experime conducte distress t appropria tranquiliz affected t interpreta experime of the pro these and	of animals upon which teaching, nts, research, surgery, or tests were d involving accompanying pain or o the animals and for which the use of the anesthetic, analgesic, or ing drugs would have adversely he procedures, results, or tion of the teaching, research, nts, surgery, or tests. (An explanation ocedures producing pain or distress or imals and the reasons such drugs used must be attached to this report.)	TOTAL NUMBER OF ANIMALS (Cols. C + D + E)	
4. Dogs	0	0	0		0	0	
5. Cats	6	82	0		0	82	
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							
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 02-NOV-2016