it displays a vali collection is esti	e Paperwork Reduction Act of 1995, an agency may not con lid OMB control number. The valid OMB control number for timated to average 2 hours per response, including the time f ompleting and reviewing the collection of information.	this information collection	n is 0579-0036. The tim	ne required to c	complete this information	OMB APPROVED 0579-0036 Exp. 10/31/2018		
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.					Interagency Report Control No. 0180-DOA-AN	Fiscal Year 2013		
U	INITED STATES DEPARTMENT OF AGRICUN	N NUMBER	MBER					
			SEARCH FACILITY (Name, address, and telephone number as include ZIP Code)					
ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)			VERMONT TECHNICAL COLLEGE P O BOX 500					
			RANDOLPH	CENTER, V	T 05061			
3. REPORTING necessary.)	G FACILITY (List all locations where animals were housed o	or used in actual researc	h, testing, teaching, or e	experimentation	, or held for these purposes. Attacl	h additional sheets, if		
		FACILITY LC	OCATIONS (Sites)					
(b)(7)(F								
DESORT OF A				10				
A.	INIMALS USED BY OR UNDER CONTROL OF RESEARCH B. C.	D. Num		E. Number of	HIS FORM 7023A.) of animals upon which teaching, ents, research, surgery, or tests wer	F.		

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.	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.	experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)	TOTAL NUMBER OF ANIMALS (Cols. C + D + E)
0	0	33	0	33
0	0	8	0	8
0	0	0	0	0
0	0	0	0	0
0	4	0	0	4
0	0	0	0	0
0	0	0	0	0
0	0	0	0	0
0	2	0	0	2
0	3	0	0	3
	being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.0002	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.teaching, research, surgery, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.teaching, research, surgery, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.teaching, research, surgery, or tests were conducted involving napropriate anesthetic, analgesic, or tranquilizing drugs were used.00330080020	Number of animals being bred, conditioned, or held for use in teaching, research, experiments, or such purposes.Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.teaching, research, experiments, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.conducted involving distress to the animals accompanying pain or distress to the animals accompanying pain or distress to the animals accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were 

## 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).

SIGNATURE OF C.E.O. OR I.O.

(b)(7)(c)

NAME AND TITLE OF C.E.O. OR I.O. (Type or Print)

DATE SIGNED 12-DEC-2013

APHIS FORM 7023 JUL 2013

	B control number. The valid C rage 2 hours per response, in	OMB control number for this in cluding the time for reviewing	formation colle	ection is 0579-0036.	The time requir	collection of information red to complete this information hering and maintaining the data		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. Interagency Report Control No. 0180-DOA-AN								Fiscal Year 2013		
	ATES DEPARTMENT D PLANT HEALTH IN			1. REGISTRATIO 13-R-0009						
CONTINUATION SHEET FOR ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)				<ul> <li>2. HEADQUARTERS RESEARCH FACILITY (Name, address, and telephone number as registered with USDA, include ZIP Code)</li> <li>VERMONT TECHNICAL COLLEGE</li> <li>P O BOX 500</li> <li>RANDOLPH CENTER, VT 05061</li> </ul>						
REPORT OF ANIMALS USE	D BY OR UNDER CONTROL	OF RESEARCH FACILITY			-	,				
A. Animals Covered By The Animal Welfare Regulations	Animals Covered By The Animal Number of animals		which e teaching surgery conduct accomp or distre animals which a anesthe	r of animals upon xperiments, g, research, or tests were ted involving anying pain syst to the and for ppropriate tic, analgesic, or zing drugs were	E. Number of animals upon which teaching, experiments, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress on these animals and the reasons such drugs were not used must be attached to this report.)		e ation ss ugs	F. TOTAL NUMBER OF ANIMALS (Cols. C + D + E)		
HORSES	0	3		0	0 0			3		
ASSURANCE STATEMENT										
ASSURANCE STATEMENTS	J									

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(6), (b)(7)(c)				DATE SIGNED					