

VETERINARY BIOLOGICS PRODUCTION AND TEST REPORT

		1. Page 1 OF 2	2. LICENSE OR PERMIT 188
		4. FILL DATE Jun 12, 2025	5. PRODUCT CODE NUMBER 1011.00
		6. EXPIRATION DATE Jul 02, 2028	7. SERIAL OR SUBSERIAL 517

3. NAME AND ADDRESS OF LICENSEE OR PERMITTEE
Colorado Serum Company
4950 York Street; P.O. Box 16428, Denver, CO 80216-0428

8. TRUE NAME OF PRODUCT
Anthrax Spore Vaccine, Nonencapsulated Live Culture

9. TEST DATA (for test data see additional pages)

10. INVENTORY FOR RELEASE			11. REMARKS
NUMBER OF CONTAINERS (A)	CONTAINER SIZE (DOSES, ML, OR UNITS) (B)	TOTAL DOSES, ML, OR UNITS (C)	
3,732	50	186,600 ML	
TOTAL		TOTAL	
3,732		186,600	

12. DISPOSITION BY FIRM:

Eligible for Release

13. AUTHORIZED FIRM REPRESENTATIVE

Mr Jeffrey T Perkins

14. TITLE

Vice President, Regulatory Affairs & Quc

15. DATE

July 16, 2025

16. DISPOSITION BY APHIS:

Not to be Tested

17. AUTHORIZED APHIS REPRESENTATIVE Traci Krueger	18. TITLE Biologics Specialist	19. DATE July 25, 2025
--	-----------------------------------	---------------------------

This report is equivalent to an APHIS Form 2008 signed by an Authorized APHIS Representative and is appropriate for marketing authorizations. See Veterinary Services Memorandum 800.53, Release of Biological Products, for more information.

For Official Use Only

NAME, LICENSE NO., AND MAILING ADDRESS OF LICENSEE

4950 York St.
P.O. Box 16428
Denver, CO 80216

FILL DATE	PRODUCT CODE NO.
12 JUN 2025	1011.00
EXPIRATION DATE	SERIAL OR SUBSERIAL NO.
02 JUL 2028	517

10

[illegible]