which clarification never occurred, this criteria must therefore be read as requiring that **all** the measured T metabolite $\delta^{13}C$-values must show significant differences. Such a reading is also consistent with the 2006 interpretation of the WADA Technical Document by the WADA-accredited laboratory in Lausanne (See Baume, supra).

In this case, it is clear that the Landis sample does not meet this positivity criteria, as only one of four metabolites tested clearly exceeds the 3‰ example provided by WADA (a second metabolite, measured at -3.51‰ ±0.8‰ on the "B" sample, cannot be said to exceed this threshold). For these reasons, the CIR results do not support a finding of exogenous testosterone use, and must be considered as negative.

B. THE MEASUREMENT VALUE THAT IS THE BEST INDICATOR OF EXOGENOUS TESTOSTERONE USAGE IN URINE PROVES THAT FLOYD LANDIS DID NOT USE TESTOSTERONE

Additional findings from the CIR results further undermine the erroneous conclusion that those results support a finding of exogenous testosterone use. Published research by WADA-accredited laboratories shows that the measurement 5βAdiol - 5βPdiol is a better indicator of exogenous testosterone usage than other metabolite measurements, and should allow for longer detection periods of exogenous testosterone than the other metabolites.

See Maitre, Urinary Analysis of Four Testosterone Metabolites and Pregandiol by Gas Chromotography-Combustion-Isotope Ratio Mass Spectrometry After Oral Administration of Testosterone, 28 Journal of Analytical Toxicology (Sept. 2004) [attached hereto as Exhibit 1]:

> "This paper describes the time courses of isotopic ratio values in urine of androsterone (Andro), etiocholanolone (Etio), 5α-androstanediol (5αA), 5β-