Exhibit 1 – Telephone Contact Questionnaire

Instructions: Complete this questionnaire as per the program objectives and procedures for Enclosure 2.

Name and title of Interviewer: Bill C. Lin Signature of Interviewer	
Date of this Interview: 05/12/2011 Date of Previous Interview: 3/19/2004	
QUESTIONS	ANSWERS
Licensee Name, Address, and URL	Marshall Lab Services 913 N. Odell Marshall, MO 65340
Licensee's Point of Contact (Name, Address, Phone and FAX Numbers, and URL)	Lisa Wade 660-886-9688 Ldwade61@yahoo.com
License Number Docket Number	24-20003-01 030-17631
1. Name and Title of person responsible for radiation safety program:	Lisa Wade Radiation Protection Officer
2. Describe how you prevent: (a) use by unauthorized personnel and (b) loss or theft.	GCs are locked in laboratory. Only authorized personnel have access to the laboratory.
3. Describe how you maintain shielding, restrict access, and control contamination from unsealed material to prevent individuals from becoming exposed to radiation.	GC's are locked and secured in laboratory. Only the authorized users have access and ensure that the GC's don't overheat.
4. Describe how you determine radiation doses to workers and members of the public from licensed activities. What was the maximum dose received since the last NRC telephone contact or inspection?	N/A
5. Describe radiation area surveys around licensed activities. What survey instrument (SI) was used? SI's last calibration date? What were the typical radiation levels and at what distance?	N/A

QUESTIONS	ANSWERS
6. Describe leak testing of the sealed source(s). How often and who analyzed the leak test samples? What were the most recent results?	Swipe test is performed every 6 months. Nuclear Scanning Services analyzed the results. All samples passed
7. Describe physical inventory of all byproduct material and NMMSS-reportable materials in your possession. When was the last inventory completed? Were all the sources located?	The GC that is in daily used is inventoried daily. The GC that is in storage is inventory monthly.
8. Describe your provisions for repair and maintenance of your device or source holder.	Maintenance is performed by the manufacture.
9. Describe any unusual events involving the byproduct material or the device(s) in which it is used (i.e., fire, explosion, natural disaster.)	No unusual events.