

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: 06/14/2011 Date of Previous Interview:	
QUESTIONS	ANSWERS
Licensee Name, Address, and URL	Ralston Purina Company Checkerboard Square St. Louis, MO 63164
Licensee's Point of Contact (Name, Address, Phone and FAX Numbers, and URL)	Kathryn S. Phillips (T) 314-982-2806 Checkerboard Square St. Louis, MO 63164
License Number Docket Number	24-08334-02 030-05105
1. Name and Title of person responsible for radiation safety program:	Kathryn S. Phillips Radiation Safety 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. All visitors will be escorted by authorized personnel.
3. Describe how you maintain shielding, restrict access, and control contamination from unsealed material to prevent individuals from becoming exposed to radiation.	Sources within the GC's. GC's are locked and secured in laboratory.
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?	Wipe test performed every 6 months. R.M. Wester analyzed the results. All wipe test passed the analysis.
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 inventory of the GCs is taking every 6 months when performing the wipe test. All the sources were account for.
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.