**Monthly Contact Questions**

1. **Have you drank alcohol with this person?**Never/Almost Never Occasionally Almost Always/Always
2. **What is their drinking status?**    
   Drinker NonDrinker Dont Know
3. **Would you expect them to drink in your presence?**   
   Yes Uncertain No
4. **Are they currently in recovery from alcohol/other substances**? Yes No Dont Know
5. **Do they know about your recovery goals and if so are they supportive?**   
   Supportive Unsupportive Mixed Neutral Dont Know
6. **Are your experiences with this person typically…**Pleasant Unpleasant Mixed Neutral

**Monthly Location Questions**

1. **Location emotion**

Pleasant Unpleasant Mixed Neutral

1. **Location risk**

High Medium Low No