

VIRGINIA:

SHENANDOAH COUNTY JUVENILE AND DOMESTIC RELATIONS DISTRICT COURT  
COMMONWEALTH OF VIRGINIA

v.

Docket Number: A-6389-04

DUSTIN STANLEY

**BATTERER INTERVENTION PROGRAM**

This matter came this day to be heard upon a warrant charging assault and battery or a similar offense involving domestic violence; upon the appearance of the Commonwealth's Attorney, and of the Defendant, ☐ With Counsel or ☒ Who waived his/her right to Counsel.

It is hereby ORDERED that the Defendant complete the 25-week Batterer Intervention Program (BIP) and:

1. Within five days you must contact Judith G. Weaver, Ed.S., at telephone number 540.743.7101 or 540.433.1291. Classes are held at the Old Dominion Alcohol Safety Action Program office at 109 North Main Street in Woodstock, Virginia (nearby "The Gym").
2. You must pay any fees associated with this program, including \$20.00 for each group and the intake session. Not having the money is not an acceptable excuse for not attending.
3. You must appear for both court dates listed below, failing to appear on those dates may result in further legal action against you and/or a final finding of guilt.

It is further Ordered that defendant shall:

1. Remain of good behavior and keep the peace.
2. Keep the Court and BIP advised of your current address until successfully completing the program and paying, in full, any fines and costs due the Court.
3. **Appear in Court on MAY 5, 2005 at 9:00 a.m.** to review your completion of the program.
4. **Appear in Court on SEPTEMBER 7, 2006 at 9:00 a.m.** for final disposition.

Upon successful completion of the BIP,

✓ The charge will be dismissed at the end of the 24 month probationary period.

       You will be convicted of the charge, but your sentence will be suspended.

Failure to complete any of the requirements of the program may result in the issuance of a Show Cause or a Capias for your arrest. You could be sentenced to a maximum of one year in jail and a fine of \$2,500.00.

2 Sept 04  
Ddt

Paul D. Rogers  
Judge

Copy received:

Dustin Stanley  
Signature of Defendant

cc: Defendant  
BIP with copy of Warrant & Criminal Complaint  
Commonwealth's Attorney  
Defendant's Attorney

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cc: BIP, MIA, A-200, etc

Ms. Weaver, 1/21/11

Hello,

I wanted to let you know I received all the information we spoke of from the courts.

I was wondering if you would have been called to testify at my trial what statements would you have provided on your opinion if Dustin Stanley posed a future danger to other women and what would you base your opinion on?

I received a wealth of information. Dustin Stanley was arrested 11 times between late 2003 and 2007, several for simple assault and assault and battery on numerous women and juveniles. My jury should have been allowed to hear this evidence to understand my fear and to know I spoke truthfully about the abuse I suffered at his hands.

I appreciate all your help,

Sincerely,

Anna Hoffman

this is too much work for a hypothetical question

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## FACILITATOR'S ASSESSMENT

Client: Dustin Stanley

Rate client attitude:

1

2

3

4

5

takes full responsibility  
for his behavior

knows violence is wrong;  
doesn't want program

completely  
blames  
partner

Rate dangerousness / risk / lethality:

1

2

3

4

5

low

high

Explain / list risk factors:

stated he'd rather fight than make love to a woman. Appears to have something to prove. States he experiences rage / blackouts sometimes. Minimizes the severity and is afraid someone will hurt him.

Other Comments:

Disposition:

☒ accepted into BIP, Court or referral advised

☐ rejected. Why?

☐ additional referral: \_\_\_\_\_

Intake Facilitator: [Signature]

Date: 9-23-04

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Program Director: [Signature]

Date: 9-27-04



Judith G. Weaver, Ed.S., LPC  
BATTERER INTERVENTION PROGRAM

PO Box 604  
Luray, VA 22835  
540 743 7101  
Fax 743 3788

320 S. Main Street  
Harrisonburg, VA  
22801  
540 433 1291

what you don't have:  
(BIP info submitted to Shen Co JDR)  
Monthly reports: 12-28-04 (w/ comments)  
10-08-04 "  
01-27-05 (NO comments written)  
02-24-05 "  
03-24-05 "

There is also a Shen Co Sheriff's Office  
Condensed Report dated 4-22-04 describing  
the assault of Megan Whittington on 4/14/04.

J. Weaver

# Self-Test: Are You Behaving in an Abusive Manner?

About Men For Families

This questionnaire is designed to help you decide if you are presently in an abusive situation. There are different forms of abuse to be aware of. Please answer these questions honestly, then total the points. This will give you some indication as to whether or not violence is a component of your relationship. It hopefully will provide an instrument for dialogue with your spouse/partner/girlfriend.

## Questions #1-13

3-Frequently 2-Sometimes 1-Rarely 0-Never

0 1. Do you continually monitor your spouse's/partner's/girlfriend's time and make her account for every minute (when she runs errands, visits friends, commutes to work, etc.)?

2 2. Do you ever accuse her of having affairs with other men or act suspicious of her?

1 3. Are you ever rude to her friends?

0 4. Do you ever discourage her from starting friendships with other women and/or men?

1 5. Are you ever critical of things such as her cooking, her clothes, or her appearance?

3 6. Do you demand a strict account of how she spends money?

2 7. Do your moods change radically, from very calm to very angry, or vice versa?

0 8. Are you disturbed by her working or the thought of her working?

0 9. Do you become angry more easily when you drink?

0 10. Do you pressure her for sex more often than she likes?

0 11. Do you become angry if she does not want to go along with your requests for sex?

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3 ~~13~~ 13. Do you quarrel much about having children or raising them?

14

6-Frequently 5-Sometimes 4-Rarely 0-  
Never

→ 4 ~~14~~ 14. Do you ever strike her with your hands or feet (slap, punch, kick, etc.)

→ 0 15. Do you ever strike her with an object?

→ 0 16. Do you ever threaten her with an object or weapon?

0 17. Have you ever threaten to kill either her or yourself?

→ 4 ~~18~~ 18. Do you ever give her visible injuries (such as welts, bruise, cuts, etc.)?

0 19. Has she ever had to treat any injuries from your violence with first aid?

0 20. Has she ever had to seek professional aid for any injury at a medical clinic, doctor's office or hospital emergency room?

0 21. Do you ever hurt her sexually or make her have intercourse against her will?

0 22. Are you ever violent toward children?

→ 6 ~~23~~ 23. Are you ever violent toward other people outside home and family?

→ 5 24. Do you ever throw objects or break things when you are angry?

→ 5 25. Have you ever been in trouble with the police?

14  
24  
→ 38 26. Has she ever called the police or tried to call them because she felt she was in danger?

38 TOTAL

Add up the points for each question. Compare your score with the following chart:

120-92 Dangerously abusive

91-35 Seriously abusive

34-13 Moderately abusive

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# BATTERER INTERVENTION PROGRAM

Serving the Counties of Page, Shenandoah, and Warren

7 Berrey Blvd.  
Luray, VA 22835

540-743-7101  
540-433-1291

fax: 540-743-3788  
jwalpc@aol.com

## MONTHLY PROGRESS REPORT / REVIEW

Defendant: Dustin Stanley  
Return Date: 5-5-05  
Case Number: A-6389-04  
Date: 10-8-04

Documentation of any concerns, assessment of progress:

4/4 number of groups completed this reporting period

21 remaining number to complete BIP

0 number of absences to date (3 are excused)

0 fees owed to BIP

RECEIVED

OCT 15 2004

SHEN CO COMBINED COURTS

Level of participation:      minimal ✓ average      active

Grasp of concepts / taking responsibility      yes      no ✓ needs work

Progress:      none      little/limited ✓ some ✓ continued

Has the abusive behavior stopped? it appears so

Specific concerns to victim / children: ✓ yes      no Explain: potential for

page / outbursts remain

Action taken: cont. education

     I AM REQUESTING A SHOW CAUSE HEARING FOR NONCOMPLIANCE

Other concerns or POSITIVE COMMENTS:

Dustin, it appears, made a major break through last week when he admitted his blame

Provider signature: [Signature]

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## MONTHLY PROGRESS REPORT / REVIEW

Defendant: Dustin Stanley  
Return Date: 5.5.05  
Case Number: A-6389-04  
Date: 11-11-04

Documentation of any concerns, assessment of progress:

2/4 number of groups completed this reporting period

19 remaining number to complete BIP

2 number of absences to date (3 are excused)

0 fees owed to BIP

RECEIVED

NOV 18 2004

SHEN CO COMBINED COURTS

Level of participation: ☒ minimal ☐ average ☐ active

Grasp of concepts / taking responsibility ☐ yes ☐ no ☒ needs work

Progress: ☐ none ☒ little/limited ☐ some ☐ continued

Has the abusive behavior stopped? I don't think so

Specific concerns to victim / children: ☒ yes ☐ no Explain: he has an

exploded type of personality, very defensive nature

Action taken: cont. c.d.

I AM REQUESTING A SHOW CAUSE HEARING FOR NONCOMPLIANCE

Other concerns or POSITIVE COMMENTS:

Provider signature: J. Keller

cc ACA

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12-7



# BATTERER INTERVENTION PROGRAM

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jwalpc@aol.com

## MONTHLY PROGRESS REPORT / REVIEW

Defendant: Dustin Stanley  
Return Date: 5-5-05  
Case Number: A-6389-04  
Date: 12-3-04

Documentation of any concerns, assessment of progress:

4/4 number of groups completed this reporting period

15 remaining number to complete BIP

2 number of absences to date (3 are excused)

0 fees owed to BIP

Level of participation: minimal ☒ average ☐ active ☐

Grasp of concepts / taking responsibility yes ☐ no ☒ needs work

Progress: none ☒ little/limited ☐ some ☐ continued ☐

Has the abusive behavior stopped? verbal abuse appears to cont.

Specific concerns to victim / children: ☒ yes ☐ no Explain: potential for cont. violence remains - depression is apparent

Action taken: cont. ed. have suggested private counseling  
I AM REQUESTING A SHOW CAUSE HEARING FOR NONCOMPLIANCE

Other concerns or POSITIVE COMMENTS:

Provider signature: [Signature]

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## MONTHLY PROGRESS REPORT / REVIEW

Defendant: Dustin Stanley  
Return Date: 5-5-05  
Case Number: AG389-04  
Date: 12-28-04

Documentation of any concerns, assessment of progress:

3/4<sup>2</sup> number of groups completed this reporting period

12 remaining number to complete BIP

3 number of absences to date (3 are excused)

0 fees owed to BIP

RECEIVED

JAN 05 2005

SHEN CO COMBINED COURTS

Level of participation: ☒ minimal ☐ average ☐ active

Grasp of concepts / taking responsibility ☐ yes ☐ no ☒ needs work

Progress: ☐ none ☒ little/limited ☐ some ☐ continued

Has the abusive behavior stopped? no

Specific concerns to victim / children: ☒ yes ☐ no Explain: Rege and outbursts  
continue

Action taken: cont ed...

☐ I AM REQUESTING A SHOW CAUSE HEARING FOR NONCOMPLIANCE

Other concerns or POSITIVE COMMENTS:

some improvement noted

Provider signature: A Koller

cc ACA

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3-1-

RISK AND LETHALITY INDICATORS

- |   |  |
|---|--|
| <input type="checkbox"/> Threats of homicide or suicide (or fantasies of)                                     | <input type="checkbox"/> Cultural influences   |
| <input checked="" type="checkbox"/> *Previous episodes of violence in this relationship, or any past assaults | <input type="checkbox"/> Non-biological children living in the home  |
| <input checked="" type="checkbox"/> Escalation in frequency or severity                                       | <input type="checkbox"/> Exposure to DV as a child   |
| <input type="checkbox"/> Past attempts to choke her   | <input checked="" type="checkbox"/> Abuser's lack of respect for the law, has violated a Prot. Order, or probation               |
| <input checked="" type="checkbox"/> Verbal threats  |  |
| <input checked="" type="checkbox"/> Rage  |  |
| <input checked="" type="checkbox"/> Separation, especially female-initiated or recent relationship problems   |  |
| <input checked="" type="checkbox"/> recent employment problems  |  |
| <input type="checkbox"/> Public display of violence toward victim   | <input checked="" type="checkbox"/> Obsessive-possessive, excessive jealousy AND depression, suicidality                         |
| <input checked="" type="checkbox"/> Fear of losing the partner  | <input checked="" type="checkbox"/> Demographic variables (younger, male, raised in a violent family & <u>low SES</u> )          |
| <input type="checkbox"/> Drug or alcohol consumption or <u>history of abuse</u>                               | <input type="checkbox"/> Psychiatric diagnosis/acute mental health problems: psychotic symptoms, schizo, dementia, brain injury) |
| <input checked="" type="checkbox"/> Prior calls to the police, 911  | <input checked="" type="checkbox"/> Clinical variables (depression, substance abuse, <u>IMPULSIVE aggression</u> )               |
| <input checked="" type="checkbox"/> Sense of ownership of the victim  | <input checked="" type="checkbox"/> Situational variables (social supports lacking, interpersonal conflict, occupational probs)  |
| <input checked="" type="checkbox"/> Obsessiveness about partner or family                                     | <input checked="" type="checkbox"/> Subject to a Protective Order and/or divorce in past 6 mths                                  |
| <input checked="" type="checkbox"/> Isolation of victim, <u>perpetrator</u> , or both                         | <input type="checkbox"/> Victim believes he may seriously injure or kill her (or is capable)                                     |
| <input checked="" type="checkbox"/> Destruction of property   |  |
| <input type="checkbox"/> *Stalking  |  |
| <input type="checkbox"/> Firearms kept in the home or has access or has concealed weapons permit              |  |
| <input checked="" type="checkbox"/> Access to victim  |  |
| <input type="checkbox"/> Sexual violence, forcing sex   |  |

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