




COMMONWEALTH OF VIRGINIA
DEPARTMENT OF FORENSIC SCIENCE

CERTIFICATE OF BLOOD ALCOHOL ANALYSIS
AS DETERMINED BY A CHEMICAL TEST OF THE ACCUSED'S BREATH

NAME OF ACCUSED ROGERS, CHARLES, A	NAME OF COURT CHFD GEND DIST CT
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BREATH ANALYSIS

SAMPLE EXAMINED AND TEST CONDUCTED BY BRAXTON, CHARLES, A		AGENCY Chesterfield County SO
DFS LICENSE NUMBER 26871	LICENSE EXPIRES 05/01/2016	DATE TEST CONDUCTED 02/07/2015
TEST EQUIPMENT NUMBER 010574		

RESULTS: TIME SAMPLE TAKEN 01:28 EST

SAMPLE'S ALCOHOL CONTENT 0.01 GRAMS PER 210 LITERS OF BREATH

ATTEST:

I CERTIFY THAT THE ABOVE IS AN ACCURATE RECORD OF THE TEST CONDUCTED; THAT THE TEST WAS CONDUCTED WITH THE TYPE OF EQUIPMENT AND IN ACCORDANCE WITH THE METHODS APPROVED BY THE DEPARTMENT OF FORENSIC SCIENCE; THAT THE TEST WAS CONDUCTED IN ACCORDANCE WITH THE DEPARTMENT'S SPECIFICATIONS; THAT PRIOR TO ADMINISTRATION OF THE TEST THE ACCUSED WAS ADVISED OF HIS RIGHT TO OBSERVE THE PROCESS AND SEE THE BLOOD ALCOHOL READING ON THE EQUIPMENT USED TO PERFORM THE BREATH TEST, AND THAT I POSSESS A VALID LICENSE TO CONDUCT SUCH TEST, GIVEN UNDER MY HAND THIS 07 DAY OF Feb, 20 15.

BREATH TEST OPERATOR Dep C.A. Braxton u228

I HAVE RECEIVED A COPY OF THIS CERTIFICATE OF ANALYSIS Charles Rogers
SUBJECT'S SIGNATURE

SUBJECT REFUSED TO SIGN FOR COPY OF CERTIFICATE OF ANALYSIS _____
OPERATOR'S SIGNATURE

FOR ACCUSED