CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

						1 of 1		
	Complete Nos. 1 - 4 and 6 if there are interested parties.					OFFICE USE ONLY		
	Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.			CE	CERTIFICATION OF FILING			
	ame of business entity filing form, and the city, state and country of the business entity's place business.				Certificate Number: 2023-969199			
	LION TotalCare, Inc							
	Dallas, TX United States				te Filed:			
	Name of governmental entity or state agency that is a being filed.	party to the	e contract for which the form	is 01/0	01/05/2023			
	City of Killeen			Date	Acknowledged:			
3	Provide the identification number used by the government description of the services, goods, or other property to	nental entit	ty or state agency to track or	identify the c	ontract, and pro	vide a		
	032620	o no provid						
	Cleaning/Repair PPE Gear							
		1			Nature o	f interest		
4	Name of Interested Party		City, State, Country (place of busin		(check a	oplicable)		
					Controlling	Intermediary		
An	drew, Schwartz		Dayton, OH United States	3	Х			
Ste	ephen, Schwartz		Dayton, OH United States	×				
Ma	rk, Smith		Dayton, OH United States	1	Х			
5	Check only if there is NO Interested Party.							
6	UNSWORN DECLARATION							
	My name is Awalus & SCHWARE		, and my	date of birth is	8/5/1964	, <u> </u>		
	My address is 7200 POE ME		DAYTON	DH	45414	USA		
•	(street)		(city)	(state)	(zip code)	(country)		
	I declare under penalty of perjury that the foregoing is true	and correct						
	Executive State of OHIO, on the			on the	a 5 day of TARNARY 2012			
Tonia S. Banks						(month) (year)		
	Notary Public In and For the State of Ohio		1.111					
١	Recorded in Clark County							
	My Commission Expires March 9, 2024		Signature of authorized agent of contracting business entity (Declarant)					
orr	ns provided 5) Texas Ethics Commission	www.eth	ics.state.tx.us		Version V	3.5.1.3ac88bc0		