

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
 Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

**OFFICE USE ONLY
 CERTIFICATION OF FILING**

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

LION Totalcare, Inc.
 Dayton, OH United States

Certificate Number:
 2025-1374091

Date Filed:
 10/08/2025

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Killeen Fire Department

Date Acknowledged:

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

010424-LIO
 Firefighter PPE, training equipment and cleaning and repair services

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is Andrew Schwartz and my date of birth is 8/5/64

My address is 1510 Woodstock Dr., Oakwood, Oh, 45419, US
(city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Montgomery County, State of Ohio, on the 3rd day of November, 2025.
(month) (year)


 Signature of authorized agent of contracting business entity
(Declarant)