

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

Certificate Number:
2019-569398

Date Filed:
12/12/2019

Date Acknowledged:

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

Lenco Industries, Inc.
Pittsfield, MA United States

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

Round Rock Police Department

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.

TBD
Lenco BearCat Armored Security Vehicle

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Light, Diane	Pittsfield, MA United States	X	
	Light, Leonard	Pittsfield, MA United States	X	

5 Check only if there is NO Interested Party. ☐

6 UNSWORN DECLARATION

My name is Carrie A Mackinnon, and my date of birth is _____

My address is 10 Bethe Industrial Dr. Pittsfield MA 01201 USA
(street) (city) (state) (zip code) (country)

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

Executed in Berkshire County, State of Massachusetts on the 14 day of Jan., 20 20
(month) (year)

Carrie A Mackinnon
Signature of authorized agent of contracting business entity
(Declarant)

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.

Lenco Industries, Inc.
Pittsfield, MA United States

Certificate Number:
2019-569398

Date Filed:
12/12/2019

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

Round Rock Police Department

Date Acknowledged:
01/17/2020

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.

TBD
Lenco BearCat Armored Security Vehicle

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Light, Diane	Pittsfield, MA United States	X	
	Light, Leonard	Pittsfield, MA United States	X	

5 Check only if there is NO Interested Party.

☐

6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

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

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)