CERTIFICATE OF INTERESTED PARTIES		FOI	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	
Name of business entity filing form, and the city, state and country of the business entity's place of business.		Certificate Number:		
AppleOne,Inc. dba AppleOne Employment Services		2025-1302168		
Glendale, CA United States Name of governmental entity or state agency that is a party to the contract for which the form is		Date Filed: 04/29/2025		
being filed. Collin County		Date Acknowledged:		
Provide the identification number used by the governmental entit description of the services, goods, or other property to be provide 2024-261 Temporary Personnel Services	y or state agency to track or identify ed under the contract.	the contract, and pro	ovide a	
4		Nature of interest		
Name of Interested Party	City, State, Country (place of busin		applicable) Intermediary	
Howroyd, , Katharyn	Glendale, CA United States	Controlling X	Intermediary	
Howroyd, , Janice Bryant	Glendale, CA United States	х		
Howroyd, , Brett	Glendale, CA United States	Х		
			<u> </u>	
5 Check only if there is NO Interested Party.				
6 UNSWORN DECLARATION				
My name is, and my date of birth		birth is		
My address is				
(street)	(city) (s	state) (zip code)	(country)	
I declare under penalty of perjury that the foregoing is true and correct. Glendale CA		4/2	4/29/2025	
Executed in				
Docusigne Thai N	•	(month) (year)	
D9BA14C15DF64E7 Signature of authorized agent of contracting business entity (Declarant)				