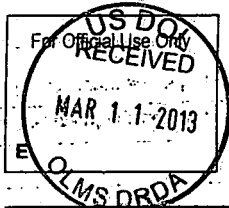


FORM LM-20 AGREEMENT AND ACTIVITIES REPORT



This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440. Required of persons, including Labor Relations Consultants and Other Individuals and Organizations, Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended. (LMRDA)

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

514453

1. File Number: C- 00483

Person Filing	
2. Name and mailing address (include ZIP Code):	
Name	Name
Title	Title
Organization Cruz & Associates	Organization
P.O. Box, Bldg., Room No., if any PO Box 1831	P.O. Box, Bldg., Room No., if any
Street	Street
City Upland	City
State California	State
ZIP Code + 4 91711	ZIP Code + 4
4. Date fiscal year ends: Dec / 31	5. Type of person: a. <input type="checkbox"/> Individual b. <input type="checkbox"/> Partnership c. <input checked="" type="checkbox"/> Corporation d. <input type="checkbox"/> Other (Specify):

Nature of Agreement or Arrangement	
6. Full name and address of employer with whom made (include ZIP Code):	
Name Roald Pederson	7. Date entered into: 2 / 6 / 2013
Organization JELD-Wen, Rocklin	8. Name of person(s) through whom made:
Trade Name, if any	Name
P.O. Box, Bldg., Room No., if any	Name
Street 3901 Cincinnati Ave.	Name
City Rocklin	Name
State California	Name
ZIP Code + 4 95765-1303	Name

Signatures

Each of the undersigned declares, under penalty of perjury and other applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VII on penalties in the instructions.)

13. Signed <u>Lepelux</u>	President (If other title, see instructions)	14. Signed _____	Treasurer (If other title, see instructions)
Title <u>Other (Specify)</u>		Title <u>Treasurer</u>	
<u>CEO</u>			
On <u>2/28/2013</u>	<u>909-980-8736</u>	On _____	_____
Date	Telephone Number	Date	Telephone Number

9. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly:

- a. To persuade employees to exercise or not to exercise, or persuade employees as to the manner of exercising, the right to organize and bargain collectively through representatives of their own choosing.
- b. To supply an employer with information concerning the activities of employees or a labor organization in connection with a labor dispute involving such employer, except information for use solely in conjunction with an administrative or arbitral proceeding or a criminal or civil judicial proceeding.

10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.):

Paid Hourly, Expenses Reimbursed.

Specific Activities to be Performed

11. For each activity, separately list in detail the information required (See instructions):

a. Nature of activity:

To inform employees of their section 7 rights and answer questions regarding collective bargaining.

11.b. Period during which performed:

2/6/2013

11.c. Extent performed:

ongoing

11.d. Name and address through whom performed:

Name Eduardo Padilla

Organization EPC Consulting

P.O. Box, Bldg., Room No., if any

Street 3650 Lomacitas Lane

City Bonita

State California

ZIP Code + 4 91902

Additional Name and address through whom performed, if any:

Name

Organization

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

12.a. Identify subject groups of employees:

Production workers

12.b. Identify subject labor organizations:

IAM