

Trachte Building Systems Employee Stock Ownership Plan  
Questionnaire for Interested Class Members

**Please provide the following information**

**Personal Information**

1. Name: \_\_\_\_\_
2. Address: \_\_\_\_\_  
\_\_\_\_\_
3. Telephone: (    ) \_\_\_\_\_ - \_\_\_\_\_ (Home)(Work)(Cell)  
(    ) \_\_\_\_\_ - \_\_\_\_\_ (Home)(Work)(Cell)
4. E-mail: \_\_\_\_\_ @ \_\_\_\_\_  
(If you are still employed at Trachte, please provide a non-Trachte email)
5. Currently married? \_\_\_\_yes \_\_\_\_no  
(If your spouse is or was an employee of Trachte or one of its subsidiaries, please have your spouse fill out a separate form if she/he is interested.)

**Employment**

6. Dates of Employment at Trachte (or subsidiary)? \_\_\_/\_\_\_/\_\_\_ through \_\_\_/\_\_\_/\_\_\_
7. If you worked for a subsidiary, which one? \_\_\_\_\_
8. Were you terminated? If so, what was your date of termination? \_\_\_/\_\_\_/\_\_\_
9. Were you laid off? If so, what was the date and length of lay off? \_\_\_\_\_  
\_\_\_\_\_
10. Are you still employed by Trachte or one of its subsidiaries? \_\_\_\_\_

**ESOP plan**

11. Were you a participant in the Old Trachte ESOP (prior to September 2002)? \_\_\_\_\_  
If so, do you have any documents from that time? \_\_\_\_\_
12. Were you a participant in the Alliance ESOP (after September 2002)? \_\_\_\_\_  
If so, do you have any documents from that time? \_\_\_\_\_

13. Were you a participant in the “new” Trachte ESOP (after September 2007)? \_\_\_\_\_  
If so, do you have any documents from that time? \_\_\_\_\_

**Payout**

14. Did you ever request a payout from either the Old Trachte ESOP, the Alliance ESOP or the “new” Trachte ESOP? Please circle which one.

15. Did you receive a payout? \_\_\_\_\_ If so, when? \_\_\_\_\_

Amount received? \_\_\_\_\_ Amount owed (if different) \_\_\_\_\_

Thank you for taking the time to complete this questionnaire. Please mail or email this survey to:

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