Federal Parent Locator Service

FAST Levy

Record Layouts

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1. FAST LEVY INPUT TRANSACTION LAYOUTS

This appendix includes the layouts for the records that are accepted by the Federally Assisted State Transmitted (FAST) Levy system. Each record layout in this section includes:

- 1. Field names
 - 2. Field lengths
 - 3. Location
 - 4. Field types (alphabetic, numeric, or alphanumeric)
 - 5. Field comments

The comment section of the record layouts indicates whether the field is required for the transaction. Fields defined as "Conditionally Required" are required to be present on the input record, based on the conditions that are described in the comment field. Comments also provide an explanation of the field and its relationship to other fields or records. Optional fields must be filled with spaces if not used or data is not available.

The file structure for the Electronic Withhold Request and Response are the same. Each file can consist of one or more batches. Each batch contains at least one header record, followed by one or more detail records, and then a trailer record to complete the batch.

1.1 Electronic Withhold Request

The Electronic Withhold Request is batched by Federal Employer Identification Number (FEIN). If a request from a state is being made to multiple financial institutions (FIs) there will be a batch for each FEIN included in the file being sent to the FAST Levy portal. A header will exist for each FI with their FEIN and the state's Federal Information Processing Standards (FIPS) code in that header.

States may send either one-step or two-step levy requests and direct the FIs to attach assets at either the customer level or at a specific account level (customer's account and type of account are required for freezing and seizing assets).

Following the Withhold Request batches is the Notice of Right to Garnish Federal Benefits record. Each file sent will contain one record at the end of the file.

1.1.1 ONE-STEP/TWO-STEP PROCESS

A one-step levy process allows a state to send a request that will freeze, and at the same time seize, the account assets. A two-step levy process requires the state to make an initial request to freeze the assets followed by a second request to seize the assets.

1.1.2 CUSTOMER LEVEL/ACCOUNT LEVEL REQUEST

Customer level requests instruct the FI to freeze/seize any accounts belonging to the obligor. This allows the FI to determine what accounts to freeze and seize when the obligor has more

than one account at a FI. Based on internal polices, the FI will determine which accounts to freeze/seize based on a FAST Levy request. Account level requests instruct the FI to freeze/seize specific accounts and amounts in those accounts, consistent with state law.

1.2 Electronic Withhold Response

The Electronic Withhold Response is batched from an FI by state. If an FI is responding to several state requests, there will be one header with the FI's FEIN for each state in the file. The file will also contain the state's FIPS code for each batch in the file.

A. ELECTRONIC WITHHOLDING REQUEST RECORD (STATE TO FI)

	CHART A-1: ELECTRONIC WITHHOLD REQUEST HEADER RECORD									
No.	Field Name	Length	Location	A/N	Comments					
1	Record Identifier	2	1-2	A	Required This field must contain the characters 'RH' that identifies the record as a Request Header.					
2	FEIN	9	3-11	N	Required This field must contain the Financial Institution's Federal Employer Identification Number (FEIN).					
3	Filler	1	12-12	4∕N	This field is for future versions. For this version, fill with spaces.					
4	FIPS Code	2	13-14	N	Required This field must contain the two-digit numeric Federal Information Processing Standard (FIPS) Code of the requesting state.					
5	Local County Code	3	15-17 A	A∕N	Optional This field may contain a three-digit local county code or filled with spaces.					
6	Processing Date	8	18-25	N	Required This field must contain the run date for the batch. This must be in YYYYMMDD format.					
7	Batch ID	6	26-31	4/N	Required This field must be a unique identifier for each batch sent to the portal. Batch ID must be used one time only.					

	CHART A-1: ELECTRONIC WITHHOLD REQUEST HEADER RECORD								
No.	Field Name	Length	Location	A/N	Comments				
8	Batch Type Code	2	32-33	A	RequiredThis field must contain the type of request for the batch. Valid values are:CL = Customer level request – all requests contained in the batch will behandled by the FI at a customer level and not by specific account for thecustomer.AS = Single account request – all requests contained in the batch are singleaccount requests and will be handle by the FI at the account level. Eachrequest will be for one SSN and one account number.AG = Group account request – all requests contained in the batch will havethe same SSN for different account numbers. FIs will handle a groupaccount request as a single request and one fee will apply to the groupaccount request.				
9	Portal Error Message Text	30	34-63 <i>A</i>	VN	Portal Use This field contains the field number that was in error, along with the error code, when the portal performed its validation. Header records with errors will return the entire batch. The returned batch will contain all requests originally sent. This field is filled with spaces by the requestor. Up to six errors are returned. The format is NN:CD, NN:CD, NN:CD, NN:CD, NN:CD, NN:CD where 'NN' is equal to the field number and 'CD' is equal to the error code. Valid CD values are: IN = Invalid data RQ = Missing required data NU = Not numeric				
10	Filler	537	64-600 A	/N	This field is for future versions. For this version, fill with spaces.				

	CHART A-2: ELECTRONIC WITHHOLD REQUEST DETAIL RECORD								
No.	Field Name	Length	Location	A/N	Comments				
1	Record Identifier	2	1-2	A	Required This field must contain the characters 'RD' that identifies the record as a Request Detail.				
2	Action Code	2	3-4	N	RequiredThis field must contain the code of the action to be taken. Valid valuesare:01 = execute lien and levy, used for one step process02 = release withhold03 = execute lien, used for two step process04 = amend levy amount05 = execute levy, used for two step process06 = extend freeze number of days				
3	SSN	9	5-13	N	Required This field must contain the Social Security number (SSN) of the obligor.				
4	Last Name	20	14-33	A/N	Required This field must contain the obligor's last name. Valid special characters are: Hyphens (-) Apostrophes (') Periods (.) The first character must not be a space.				

	CHART A-2: ELECTRONIC WITHHOLD REQUEST DETAIL RECORD								
No.	Field Name	Length	Location	A/N	Comments				
5	First Name	15	34-48	A/N	Required This field must contain the obligor's first name. Valid special characters are: Hyphens (-) Apostrophes (') Periods (.) The first character must not be a space.				
6	Middle Name	15	49-63	A/N	Optional This field contains the obligor's middle name. Valid special characters are: Hyphens (-) Apostrophes (') Periods (.) The first character must not be a space if middle name is populated. Fill with spaces if no middle name is available.				
7	Name Suffix	4	64-67	A/N	Optional This field contains the obligor's suffix name. Example: Jr, Sr, III. Valid special characters are: Hyphens (-) Apostrophes (') Periods (.) The first character must not be a space. Fill with spaces if no suffix name is available.				
8	DOB	8	68-75	A/N	Optional This field contains the obligor's date of birth (DOB), in CCYYMMDD format. Fill with spaces if no DOB is available.				

	CHART A-2: ELECTRONIC WITHHOLD REQUEST DETAIL RECORD								
No.	Field Name	Length	Location	A/N	Comments				
9	Account Type Code	2	76-77	A/N	Conditionally Required This field must contain the type of account for the withhold request. This field is required when the Batch Type Code = 'AS' or 'AG'. Valid values are: 01 = Savings account 04 = Checking/demand deposit account 05 = Term deposit certificate 06 = Collateral Account 11 = Money market account 12 = IRA/KEOGH 14 = ERISA Plan account 16 = Cash Balances 17 = Compound Account 18 = Other Fill with spaces if Batch Type Code is 'CL'.				
10	Account Number	20	78-97	A/N	Conditionally Required This field must contain the Account Number that the state is requesting funds to be withheld if the Batch Type Code is 'AS' or 'AG'. Fill with spaces if Batch Type Code is 'CL'.				

	CHART A-2: ELECTRONIC WITHHOLD REQUEST DETAIL RECORD								
No.	Field Name	Length	Location	A/N	Comments				
11	Withhold Amount	10	98-107	N	RequiredThis field must contain the maximum dollar amount and cents to withhold. Two digit decimal is assumed. The amount must contain a value greater than 0.The field must formatted as following:NumericDecimal AssumedUnsignedRight JustifyZero Fill to LeftZero Fill if N/A				
12	Threshold Amount	6	108-113	N	Required This field contains the minimum dollar amount and cents that must be in the account(s) after the fees and exemptions are deducted. Two digit decimal is assumed. Fill with zeroes when there is no threshold amount. For example, the account balance is \$500. The FI fee is \$50. The amount in the account after fees and exemptions is \$450. The state threshold amount is \$500. This would not meet the threshold amount the state submitted for the request. The field must formatted as following: Numeric Decimal Assumed Unsigned Right Justify Zero Fill to Left Zero Fill if N/A				

	CHART A-2: ELECTRONIC WITHHOLD REQUEST DETAIL RECORD									
No.	Field Name	Length	Location	A/N	Comments					
13	Request Date	8	114-121	N	Required This field must contain the date the withhold was requested, in CCYYMMDD format.					
14	Passback Text	40	122-161	A/N	Optional This field must contain data that is returned to the requestor. Fill this field with spaces if no passback information is needed by the requestor.					
15	Freeze Number Days	4	162-165	N	Conditionally Required This field must contain the additional number of days the account(s) must be frozen beyond the submitting state's standard timeframe. If no additional days are needed fill field with zeroes. Value cannot be zeroes if action code = 06. Note: Financial institutions will follow the rules for the state to determine business vs. calendar days. The field must formatted as following: Numeric Unsigned Right Justify Zero Fill to Left Zero Fill if N/A					

	CHART A-2: ELECTRONIC WITHHOLD REQUEST DETAIL RECORD								
No.	Field Name	Length	Location	A/N	Comments				
16	Exemption Amount	10	166-175	Ν	RequiredThis field must contain the dollar amount and cents that is to be excluded from the levy action. Any amount over the exemption amount is available for freeze/seize. Two digit decimal is assumed. Fill with zeros if no exemption amount is required.The field must formatted as following: Numeric Decimal Assumed Unsigned Right Justify Zero Fill to Left Zero Fill if N/A				
17	Legal Attachment Code	2	176-177	A/N	Required This field may contain the type of legal document for the withhold request. Default Value is 'CS' for Child Support Order.				
18	Legal Attachment Action Code	2	178-179	A/N	Optional This field may contain the type of attachment for the withhold request. Fill this field with spaces if not needed. Valid values are: OL = Continuous or ongoing levy PT = Point in time levy				
19	Contact Name	50	180-229	A/N	Required This field must contain the first and last name of the person or a point of contact (POC) who the FI will refer the customer to for additional information.				

	C	HART A	-2: ELEC	ronic	WITHHOLD REQUEST DETAIL RECORD
No.	Field Name	Length	Location	A/N	Comments
20	Contact Phone Number	10	230-239	Ν	Required This field must contain the phone number of the person or a POC for which the FI will refer the customer to for additional information.
21	Contact Phone Extension Text	5	240-244	A/N	Optional This field contains a phone extension for the person or a POC the FI should contact for additional information. Fill with spaces if no extension is available.
22	Contact E-mail Text	50	245-294	A/N	Optional This field may contain an email address for the person or a POC the FI should contact for additional. Fill with spaces if no email is available.
23	Agency Name	50	295-344	A/N	Required This field must contain the name of the child support agency.
24	Payment Type Code	1	345-345	A	Required This field must contain the method the state would prefer to receive the payment from the financial institution (FI) if the FI has the capability to send per the states request. Valid values are: E = Electronic request M = Check request
25	Address Line 1 Text	50	346-395	A/N	Required This field must contain the street address of the child support agency where the FI should mail the payment.
26	Address Line 2 Text	50	396-445	A/N	Optional This field contains the street address of the child support agency where the FI should mail the payment.

	CHART A-2: ELECTRONIC WITHHOLD REQUEST DETAIL RECORD									
No.	Field Name	Length	Location	A/N	Comments					
27	Address Line 3 Text	50	446-495	A/N	Required This field must contain the city, state, and zip of the child support agency where the FI should mail the payment.					
28	Request Timestamp	12	496-507	A/N	Required This field must contain spaces. The FAST Levy portal will populate this field. The timestamp format is HH:MM:SS:SSS.					
29	Portal Error Message Text	30	508-537	A/N	Portal Use This field contains the field number that was in error, along with the error code, when the portal performed its validation. Request records with errors will be returned in their original batch if a request did not pass validation. The returned batch will only contain requests that did not pass validation. All requests that pass validation will be sent to the FI. This field is filled with spaces by the requestor. Up to six errors are returned. The format is NN:CD, NN:CD, NN:CD, NN:CD, NN:CD, NN:CD where 'NN' is equal to the field number and 'CD' is equal to the error code. Valid CD values are: IN = Invalid data RQ = Missing required data NU = Not numeric					
30	Agency Identifier	20	538-557	A/N	Required This field must contain a unique identifier assigned by the agency.					
31	Filler	43	558-600	A/N	This field is for future versions. For this version, fill field with spaces.					

	CHART A-3: ELECTRONIC WITHHOLD REQUEST TRAILER RECORD									
No.	Field Name	Length	Location	A/N	Comments					
1	Record Identifier	2	1-2	A	Required This field must contain the characters 'RT' that identifies the record as a Request Trailer.					
2	FEIN	9	3-11	N	Required This field must contain the Financial Institution's Federal Employer Identification Number (FEIN).					
3	Filler	1	12-12	A/N	This field is for future versions. For this version, fill with spaces.					
4	FIPS Code	2	13-14	N	Required This field must contain the two-digit numeric FIPS Code of the requesting state.					
5	Local County Code	3	15-17	A/N	Optional This field may contain a three-digit local county code or filled with spaces.					
6	Record Count	6	18-23	N	Required This field must contain the total number of records submitted in this batch. The field must formatted as following: Numeric Unsigned Right Justify Zero Fill to Left Zero Fill if N/A					

	CHART A-3: ELECTRONIC WITHHOLD REQUEST TRAILER RECORD										
No.	Field Name	Length	Location	A/N	Comments						
7	Portal Error Message Text	30	24-53	A/N	Portal Use This field contains the field number that was in error, along with the error code, when the portal performed its validation. Trailer records with errors will return the entire batch. The returned batch will contain all requests originally sent. This field is filled with spaces by the requestor. Up to six errors are returned. The format is NN:CD, NN:CD, NN:CD, NN:CD, NN:CD where 'NN' is equal to the field number and 'CD' is equal to the error code. Valid CD values are: IN = Invalid data RQ = Missing required data NU = Not numeric						
8	Filler	547	54-600	A/N	This field is for future versions. For this version, fill with spaces.						

	CHART A-4: ELECTRONIC WITHHOLD REQUEST NOTICE RECORD										
No.	Field Name	Length	Location	A/N	Comments						
1	Record Identifier	2	1-2	A	Required This field must contain the characters 'RN' that identifies the record as a Request Notice.						
2	Notice of Right to Garnish Federal Benefits Text	598	3-600 A	VN	RequiredThe field must contain the Notice of Right to Garnish Federal Benefits text.The Notice of Right to Garnish Federal Benefits is created by the FASTLevy Portal. Each file will have one Notice Record at the end of the file.Proposed Notice of Right to Garnish Federal BenefitsState child support agencies (CSA) issued these orders pursuant to authorityto attach or seize obligors' assets in financial institutions (FI) [42 USC §666].The garnishee is notified that procedures established by 31 CFR 212 toidentify and protect federal benefits deposited to FI accounts do not apply tothese orders. The garnishee must comply with the terms of these ordersincluding instructions for withholding and retaining funds in any account(s)covered by these orders pending further state CSA notice.						

B. ELECTRONIC WITHHOLD RESPONSE RECORD (FI TO STATE)

	CHART B-5: ELECTRONIC WITHHOLD RESPONSE HEADER RECORD										
No.	Field Name	Length	Location	A/N	Comments						
1	Record Identifier	2	1-2	A	Required This field must contain the characters 'AH' that identifies the record as a Response Header.						
2	FEIN	9	3-11	N	Required This field must contain the Financial Institution's Federal Employer Identification Number (FEIN).						
3	Filler	1	12-12	A/N	This field is for future versions. For this version, fill with spaces.						
4	FIPS Code	2	13-14	N	Required This field must contain the two-digit numeric FIPS Code of the requesting state.						
5	Local County Code	3	15-17	A/N	Optional This field may contain a three-digit local county code or filled with spaces.						
6	Processing Date	8	18-25	N	Required This field must contain the run date for the batch in CCYYMMDD format.						
7	Batch ID	6	26-31	A/N	Required This field must contain the state's unique identifier submitted for this batch of records. Return the state's Batch ID sent in the Withhold Request file.						
8	Batch Type Code	2	32-33	A	Required This field must contain the type of request submitted for this batch of records. Return the state's Batch Type Code sent in the Withhold Request file.						

	C	HART I	B-5: ELEC	C WITHHOLD RESPONSE HEADER RECORD	
No.	Field Name	Length	Location	A/N	Comments
9	Contact Name	50	34-83	A/N	Optional This field contains the first and last name of the person the state should contact for additional information. Fill with spaces if no Contact Name is available.
10	Contact Phone Number	10	84-93	N	Required This field must contain the phone number for the person the state should contact for additional information.
11	Contact Phone Extension Number	5	94-98	A/N	Optional This field contains a phone extension for the person the state should contact for additional information. Fill with spaces if no extension is available.
12	Contact e-mail text	50	99-148	A/N	Optional This field contains an e-mail address for the person the state should contact for additional information. Fill with spaces if no e-mail address is available.
13	Portal Error Message Text	30	149-178 A	Ą/N	Portal Use This field contains the field number that was in error, along with the error code, when the portal performed its validation. Header records with errors will return the entire batch. The returned batch will contain all requests originally sent. This field is filled with spaces by the requestor. Up to six errors are returned. The format is NN:CD, NN:CD, NN:CD, NN:CD, NN:CD, NN:CD where 'NN' is equal to the field number and 'CD' is equal to the error code. Valid CD values are: IN = Invalid data RQ = Missing required data NU = Not numeric
14	Filler	222	179-400 /	A/N	This field is for future versions. For this version, fill with spaces.

		CHART	B-6: ELE	CTRO	NIC WITHHOLD RESPONSE DETAIL RECORD
No.	Field Name	Length	Location	A/N	Comments
1	Record Identifier	2	1-2	A	Required This field must contain the characters 'AD' that identifies the record as a Response Detail.
2	Response Code	2	3-4	N	RequiredThis field must contain the response type code. Valid values are:04 = Bypassed Acct/Accts did not meet minimum balance requirement05 = Account(s) satisfies part or all of the levy and account is frozen06 = Match is good but no attachable account(s)07 = Manual Review10 = Customer not found12 = Match Good, Closed Account20 = Full or partial amount released from withhold (in response to ActionCode '02' from Request Record)50 = Reject, FI could not process request
3	SSN	9	5-13	N	Required This field must contain the Social Security number (SSN) of the obligor for the financial institution (FI) to initiate an action to withhold.
4	Last Name	20	14-33 A	A/N	Required This field must contain the obligor's last name. Valid special characters are: Hyphens (-) Apostrophes (') Periods (.) The first character must not be a space.

	CHART B-6: ELECTRONIC WITHHOLD RESPONSE DETAIL RECORD									
No.	Field Name	Length	Location	A/N	Comments					
5	First Name	15	34-48 A	'N	Required This field must contain the obligor's first name. Valid special characters are: Hyphens (-) Apostrophes (') Periods (.) The first character must not be a space.					
6	Middle Name	15	49-63 A	'N	Optional This field contains the obligor's middle name. Valid special characters are: Hyphens (-) Apostrophes (') Periods (.) The first character must not be a space if middle name is populated. Fill with spaces if no middle name is available.					
7	Name Suffix	4	64-67 A	Ń	Optional This field contains the obligor's suffix name. Example: Jr, Sr, III. Valid special characters are: Hyphens (-) Apostrophes (') Periods (.) Fill with spaces if no suffix is available.					
8	DOB	8	68-75 A	/N	Optional This field contains the obligor's date of birth (DOB), in CCYYMMDD format. Fill with spaces if no DOB is available.					
9	Filler	2	76-77 A	/N	This field is for future versions. For this version, fill with spaces.					

	CHART B-6: ELECTRONIC WITHHOLD RESPONSE DETAIL RECORD										
No.	Field Name	Length	Location	A/N	Comments						
10	Account Number	20	78-97 A	/N	Conditionally Required This field contains any account number that the FI attached/froze. Fill with spaces if the account number is not provided. If the state submitted an Account Level request, 'AS' or 'AG' in the Batch Type Code, this field must be populated. Fill with spaces if Batch Type Code is 'CL'.						
11	Freeze Amount	10	98-107	N	Conditionally Required This field must contain the dollar amount and cents attached/frozen before fees and penalties are deducted. Two digit decimal is assumed. If no amount is attached/frozen fill with zeroes. The field is required when the FI returns an '05' in the Response Code. The field must formatted as following: Numeric Decimal Assumed Unsigned Right Justify Zero Fill to Left Zero Fill if N/A						
12	Filler	4	108-111 A	/N	This field is for future versions. For this version, fill with spaces.						
13	Withheld Date	8	112-119 A	/N	Required This field must contain the date the FI attached/froze the account(s), in YYYYMMDD format. Fill with spaces if no funds attached or frozen.						
14	Passback Text	40	120-159 A	/N	Conditionally Required This field must contains the data provided in the withhold request record that must be returned to the requestor. Fill with spaces if no passback text is available.						
15	Filler	3	160-162 A	/N	This field is for future versions. For this version, fill with spaces.						

	CHART B-6: ELECTRONIC WITHHOLD RESPONSE DETAIL RECORD										
No.	Field Name	Length	Location	A/N	Comments						
16	Fee Amount	6	163-168	Ν	Required This field must contain the dollar amount and cents of fees and penalties charged by the FI for the withheld amount. Two digit decimal is assumed. Fill with zeroes if no fee applies. The field must formatted as following: Numeric Decimal Assumed Unsigned Right Justify Zero Fill to Left Zero Fill if N/A						
17	Account Relationship Code	1	169-169 A	/N	Required This field must contain information regarding the obligor's ownership of the account(s). Valid values are: 0 = Sole owner of the matched account 1 = Secondary owner of the matched account 2 = Primary owner with secondary owners listed to matched account 3 = At least one of the account(s) is a joint account. Use this code when the state submits the request at the customer level.						
18	Safe Deposit Box Indicator	1	170-170	A	RequiredThis field must indicate whether the account holder has a safe deposit box at the FI.Valid values are: $Y = Yes$ $N = No$						

	CHART B-6: ELECTRONIC WITHHOLD RESPONSE DETAIL RECORD									
No.	Field Name	Length	Location	A/N	Comments					
19	Returned Timestamp	12	171-182 A	/N	Required This field must contain the timestamp for the record sent by the state. FIs use this field to determine "first come, first serve". The timestamp format is HH:MM:SS:SSS. Return the Request Timestamp in this field.					
20	Error Message Text	30	183-212 A	/N	Portal use This field contains the field number that was in error, along with the error code, when the portal performed its validation. Response records with errors will be returned in their original batch if a response did not pass validation. The returned batch will only contain responses that did not pass validation. All responses that passed validation records will be passed to the state. This field is filled with spaces by the responder. Up to six errors are returned. The format is: NN:CD, NN:CD, NN:CD, NN:CD, NN:CD, Valid CD values are: IN = Invalid data RQ = Missing required data NU = Not numeric					
21	FI Message Text	100	213-312 A	/N	Conditionally Required This field is for a text message that provides a reason for which the FI rejected the withhold request. If the financial institution uses code 50 for the Response Code this field must contain a reason.					
22	Agency Identifier	20	313-332 A	/N	Required This field must contain the agency identifier provided in the withhold request record.					
23	Filler	68	333-400 A	/N	This field is for future versions. For this version, fill with spaces.					

	CHART B-7: ELECTRONIC WITHHOLD RESPONSE TRAILER RECORD									
No.	Field Name	Length	Location	A/N	Comments					
1	Record Identifier	2	1-2	A	Required This field must contain the characters 'AT' that identifies the record as a Response Trailer.					
2	FEIN	9	3-11	N	Required This field must contain the Financial Institution's Federal Employer Identification Number (FEIN).					
3	Filler	1	12-12	A/N	This field is for future versions. For this version, fill with spaces.					
4	FIPS Code	2	13-14	N	Required This field must contain the two-digit numeric FIPS Code of the requesting state.					
5	Local County Code	3	15-17	A/N	Optional This field may contain a three-digit local county code or filled with spaces.					
4	Record Count	6	18-23	N	Required This field must contain the total number of records submitted in this batch.					
5	Portal Error Message Text	30	24-53 /	A/N	Portal Use This field contains the field number in error, along with the error code, when the portal performed its validation. Trailer records with errors will return the entire batch. The returned batch will contain all requests originally sent. This field is filled with spaces by the requestor. Up to six errors are returned. The format is NN:CD, NN:CD, NN:CD, NN:CD, NN:CD where 'NN' is equal to the field number and 'CD' is equal to the error code. Valid CD values are: IN = Invalid data RQ = Missing required data NU = Not numeric					

	CHART B-7: ELECTRONIC WITHHOLD RESPONSE TRAILER RECORD							
No.	No. Field Name Length Location A/N Comments							
6	Filler	<mark>347</mark>	<mark>54-400</mark> A	/N	This field is for future versions. For this version, fill with spaces.			