

The Paperwork Reduction Act of 1995(Pub.L. 104-13)

Public reporting burden for this collection of information is estimated to average 0.46 hours, per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information, unless it displays a currently valid OMB control number.

### CHART F-1: REJECTED CASE SUBMISSION AND UPDATE RECORD LAYOUT

OMB Control No: 0970-0161 Expiration Date: xx/xx/xxxx

Field Name	Location	Length	A/N	Comments
Submitting State Code	1-2	2	A	This field contains the state abbreviation that was sent to OCSE on the Case Submission and Update Record.
Local Code	3-5	3	A/N	This field contains the local code that was sent to OCSE by the state on the Case Submission and Update Record.
SSN	6-14	9	N	This field contains the Social Security number that was sent to OCSE by the state on the Case Submission and Update Record.
Case ID	15-29	15	A/N	This field contains the case ID that was submitted to OCSE on the Case Submission and Update Record.
NCP Last Name	30-49	20	A/N	This field contains the NCP last name that was sent to OCSE by the state on the Case Submission and Update Record.
NCP First Name	50-64	15	A/N	This field contains the NCP first name that was sent to OCSE by the state on the Case Submission and Update Record.
Arrearage Amount	65-72	8	N	This field contains the arrearage amount that was sent to OCSE by the state on the Case Submission and Update Record.
Transaction Type	73	1	A	This field contains the transaction type that was sent to OCSE by the state on the Case Submission and Update Record.
Case Type Indicator	74	1	A	This field contains the case type indicator that was sent to OCSE by the state on the Case Submission and Update Record.
Filler	75-79	5	A/N	Space filled.
Process Year	80-83	4	A/N	This field contains the process years that were sent to OCSE by the state on the Case Submission and Update Record.
NCP Address Line1	84-113	30	A/N	This field contains the NCP address line 1 that was sent to OCSE by the state on the Case Submission and Update Record.

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Field Name	Location	Length	A/N	Comments
NCP Address Line2	114-143	30	A/N	This field contains the NCP address line 2 that was sent to OCSE by the state on the Case Submission and Update Record.
NCP City	144-168	25	A/N	This field contains the NCP city that was sent to OCSE by the state on the Case Submission and Update Record.
NCP State	169-170	2	A	This field contains the NCP state that was sent to OCSE by the state on the Case Submission and Update Record.
NCP Zip Code	171-179	9	N	This field contains the NCP zip code that was sent to OCSE by the state on the Case Submission and Update Record.
Date Issued	180-187	8	A/N	This field contains the PON date that was sent to OCSE by the state on the Case Submission and Update Record.
Exclusion Indicator(s)	188-227	40	A	This field contains the exclusion indicator(s) that was sent to OCSE by the state on the Case Submission and Update Record.
Rejected Error Codes	228-239	12	A/N	This field contains up to six two-digit codes. These codes are reported consecutively with no commas or spaces. Refer to Charts G-1, "Rejected Case Submission and Update Error Codes" and G-2, "Rejected Case Submission and Update Warning Codes" for complete lists of possible error and warning codes.
OCSE Last Name	240-243	4	A/N	When a case is rejected with error code 17, this field contains the first four characters of the NCP last name that is stored on the OCSE Case Master File for this case. The OCSE Last Name can be used to correct the NCP last name at the state. Refer to Chart G-1, "Rejected Case Submission and Update Error Codes" for a complete description of Error Code 17.

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### CHART F-1: REJECTED CASE SUBMISSION AND UPDATE RECORD LAYOUT

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Field Name	Location	Length	A/N	Comments
Corrected SSN Indicator	244	1	A/N	For records with a value of '02' in the Rejected Error Codes field, the value of this indicator informs the submitting state whether a corrected SSN was identified for the submitted SSN. Y – A record with the state submitted SSN and submitting state code will be returned in the UMACS file; the record will also contain the corrected SSN found. Space – No corrected SSN was found.
Request Code	245	1	A/N	This field contains the request code that was sent to OCSE by the state on the Case Submission and Update Record.

### CHART F-2: REJECTED CASE SUBMISSION AND UPDATE CONTROL RECORD LAYOUT

OMB Control No: 0970-0161 Expiration Date: xx/xx/xxxx

Field Name	Location	Length	A/N	Comments
Submitting State Code	1-2	2	A	This field contains the state abbreviation that was sent to OCSE by the state on the Case Submission and Update Record.
Reject Control	3-5	3	A	This is a constant field and contains 'CTL' to identify this record as the Reject Control Record.
TANF Accepted	6-14	9	N	This field contains the total number of TANF records on the Case Submission and Update Record that were accepted by OCSE.
TANF Rejected	15-23	9	N	This field contains the total number of TANF records on the Case Submission and Update Record that were rejected by OCSE.
Non-TANF Accepted	24-32	9	N	This field contains the total number of non-TANF records on the Case Submission and Update Record that were accepted by OCSE.
Non-TANF Rejected	33-41	9	N	This field contains the total number of non-TANF records on the Case Submission and Update Record that were rejected by OCSE.

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TANF Warning	42-50	9	N	This field contains the total number of TANF records on the Case Submission and Update Record that received a warning from OCSE.
Non-TANF Warning	51-59	9	N	This field contains the total number of non-TANF records on the Case Submission and Update Record that received a warning from OCSE.
Filler	60-245	186	A/N	Space filled.

### CHART F-3: UNACCOUNTABLE MISSING ADDRESS/CORRECTED SSN (UMACS) RECORD LAYOUT

OMB Control No: 0970-0161 Expiration Date: xx/xx/xxxx

Field Name	Location	Length	A/N	Comments
Submitting State Code	1-2	2	A	This field contains the state abbreviation that was sent to OCSE by the state on the Case Submission and Update Record.
Local Code	3-5	3	A/N	This field contains the local code that was sent to OCSE by the state on the Case Submission and Update Record.
SSN	6-14	9	A/N	This field contains the Social Security number that was sent to OCSE by the state on the Case Submission and Update Record.
Case ID	15-29	15	A/N	This field contains the case identification that was sent to OCSE by the state on the Case Submission and Update Record.
NCP Last Name	30-49	20	A/N	This field contains the NCP last name that was sent to OCSE by the state on the Case Submission and Update Record.
NCP First Name	50-64	15	A/N	This field contains the NCP first name that was sent to OCSE by the state on the Case Submission and Update Record.
Arrearage Amount	65-75	11	N	This field contains the arrearage amount that was sent to OCSE by the state on the Case Submission and Update Record.

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### CHART F-3: UNACCOUNTABLE MISSING ADDRESS/CORRECTED SSN (UMACS) RECORD LAYOUT

OMB Control No: 0970-0161 Expiration Date: xx/xx/xxxx

Field Name	Location	Length	A/N	Comments
Unaccountable Error Code	76-77	2	A	This field contains one two-digit error code that identifies the reason that the record is being returned. Refer to Appendix G, Chart G-3, “Unaccountable Missing Address/Corrected SSN Error Codes” for a complete list of possible error codes and explanations.
Name Control	78-81	4	A	This field contains the first four characters of the NCP last name that was sent to OCSE on the Case Submission and Update Record.
Case Type Indicator	82	1	A/N	This field contains the Case Type indicator that was sent to OCSE by the state on the Case Submission and Update Record.
Filler	83-87	5	A/N	Space filled.
Corrected SSN	88-96	9	A/N	<ul style="list-style-type: none"> <li>• If the unaccountable error code is 31, this field contains a corrected Social Security number that was received from SSA.</li> <li>• If the unaccountable error code is 20, this field is spaces.</li> </ul>
Corrected SSN Source Indicator	97	1	A/N	<p>I – This record is being returned because an Add transaction was submitted with an invalid SSN, and a corrected SSN was found for the submitted SSN.</p> <ul style="list-style-type: none"> <li>• If the unaccountable error code is ‘20’, this field is spaces.</li> <li>• If the unaccountable error code is ‘31’, this indicator informs the state of the reason that a corrected SSN is being returned.</li> </ul>
Filler	98-108	11	A/N	Space filled.

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### CHART F-4: COLLECTION AND ADJUSTMENT RECORD LAYOUT

OMB Control No: 0970-0161 Expiration Date: xx/xx/xxx

Field Name	Location	Length	A/N	Comments
Submitting State Code	1-2	2	A	This field contains the state abbreviation that was sent to OCSE by the state and stored on the OCSE Case Master File.
Local Code	3-5	3	A/N	This field contains the local code that was sent to OCSE by the state and stored on the OCSE Case Master File.
SSN	6-14	9	N	This field contains the Social Security number that was sent to OCSE by the state and stored on the OCSE Case Master File.
Case ID	15-29	15	A/N	This field contains the case identification that was sent to OCSE by the state and stored on the OCSE Case Master File.
NCP Last Name	30-49	20	A/N	This field contains the NCP last name that was sent to OCSE by the state and stored on the OCSE Case Master File.
NCP First Name	50-64	15	A/N	This field contains the NCP first name s that was sent to OCSE by the state and stored on the OCSE Case Master File.
Certified Arrearage Amount	65-75	11	N	This field contains the arrearage amount that is stored on the OCSE Case Master File at the time of certification. The certified arrearage amount is a signed positive numeric amount with two decimal places assumed.
Collection Amount	76-86	11	N	This field contains the amount of the offset that was sent to OCSE on the Fiscal Service Weekly Collection Record. The collection amount is a signed positive numeric amount with two decimal places assumed. <ul style="list-style-type: none"> <li>If the Collection Amount Field contains a value greater than zero, the adjustment amount is zeroes.</li> </ul>

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### CHART F-4: COLLECTION AND ADJUSTMENT RECORD LAYOUT

OMB Control No: 0970-0161 Expiration Date: xx/xx/xxx

Field Name	Location	Length	A/N	Comments
Adjustment Amount	87-97	11	N	This field contains the amount of the adjustment that was sent to OCSE on the Fiscal Service Weekly Collection Record. The adjustment amount is a signed positive numeric amount with two decimal places assumed. <ul style="list-style-type: none"> <li>If the adjustment amount contains a value greater than zero, the collection amount is zeroes.</li> </ul>
Adjustment Year	98-101	4	N	This field contains the year during which the offset originated that was sent to OCSE on the Fiscal Service Weekly Collection Record. The adjustment year is in the CCYY format. <ul style="list-style-type: none"> <li>If the adjustment amount is greater than zero, this field contains a valid year.</li> <li>If the collection amount is greater than zero this field is zeroes.</li> </ul>
Offset Year	102-105	4	N	This field contains the current processing year when the offset occurred, in the CCYY format.
Return Indicator	106	1	A	This field contains the return indicator that was sent to OCSE on the Fiscal Service Weekly Collection Record. The return indicator identifies whether or not this is a joint return. Y – joint return N – not a joint return
Case Type Indicator	107	1	A	This field contains the Case Type indicator that was sent to OCSE by the state and stored on the OCSE Case Master File.
Filler	108-112	5	A/N	Space filled.

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### CHART F-4: COLLECTION AND ADJUSTMENT RECORD LAYOUT

OMB Control No: 0970-0161 Expiration Date: xx/xx/xxx

Field Name	Location	Length	A/N	Comments
Payment Name	113-147	35	A/N	<ul style="list-style-type: none"> <li>• If the collection amount is greater than zero, this field contains the name on the Fiscal Service Payment Record.</li> <li>• If the return indicator is equal to 'Y', this field may contain both NCP and/or other name(s).</li> <li>• If the adjustment amount is greater than zero, this field contains spaces.</li> </ul>
Payment Street Address	148-182	35	A/N	<ul style="list-style-type: none"> <li>• If the collection amount is greater than zero, this field contains the payment street address that was sent to OCSE on the Fiscal Service Weekly Collection Record.</li> <li>• If the adjustment amount is greater than zero, this field contains spaces.</li> </ul>
Payment City and State	183-207	25	A/N	<ul style="list-style-type: none"> <li>• If the collection amount is greater than zero, this field contains the payment city and state that was sent to OCSE on the Fiscal Service Payment Record.</li> <li>• If the adjustment amount is greater than zero, this field contains spaces.</li> </ul>



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Field Name	Location	Length	A/N	Comments
Payment Zip Code	208-216	9	N	<ul style="list-style-type: none"> <li>If the collection amount is greater than zero, this field contains the payment Zip Code that was sent to OCSE on the Fiscal Service Payment Record.</li> <li>If the adjustment amount is greater than zero, this field contains spaces.</li> </ul>
Offset Type	217-219	3	A	<p>This field identifies the type of offset or adjustment that applied. Valid values are:</p> <p>RET – Federal Retirement  TAX – Tax Refund Offset  VEN – Vendor Payment/Miscellaneous</p>
Fee Amount	220-224	5	N	<p>This field contains the service fee amount for an offset that was sent to OCSE on the Fiscal Service Weekly Collection Record. The fee amount is a signed positive numeric amount with two decimal places assumed.</p> <ul style="list-style-type: none"> <li>If the collection amount contains a value greater than zero, the fee amount is non-zeroes.</li> </ul>
Injured Spouse Indicator	225	1	A	<p>This field contains the injured spouse indicator that was sent to OCSE on the Fiscal Service Weekly Collection Record. The injured spouse indicator identifies if an injured spouse allocation has been processed.</p> <p>Y – processed injured spouse allocation  N – no information is available, or no injured spouse allocation has been filed</p> <p>This field is only populated for joint return offset records, that is, position 106 is a ‘Y’ and position 107 is an ‘N’.</p> <ul style="list-style-type: none"> <li>If the record is for a single return offset or any adjustment record,</li> </ul>

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### CHART F-4: COLLECTION AND ADJUSTMENT RECORD LAYOUT

OMB Control No: 0970-0161 Expiration Date: xx/xx/xxx

Field Name	Location	Length	A/N	Comments
				the field contains a space.
Zero Balance Delete Indicator	226	1	A	This field contains the zero balance delete indicator that was set by OCSE to show that an offset reduced the modified arrearage amount for a case to zero. The case is deleted at OCSE but not Fiscal Service. Y – case deleted by the offset N – all other records, including adjustments and offsets that did not reduce the modified arrearage amount to zeros
TOP Trace Number	227-236	10	A/N	The trace number assigned to an offset collection by Fiscal Service and returned as an identifier with a collection or associated adjustment.
Filler	237-240	4	A/N	Space filled.

### CHART F-5: COLLECTION AND ADJUSTMENT CONTROL RECORD LAYOUT

OMB Control No: 0970-0161 Expiration Date: xx/xx/xxx

Field Name	Location	Length	A/N	Comments
Submitting State Code	1-2	2	A	This field contains the state abbreviation that was sent to OCSE and stored on the OCSE Case Master File.
Filler	3-5	3	A/N	Space Filled.
Total Control	6-14	9	A/N	This field is a constant field and contains 'TOTAL' to identify this record as the Collection and Adjustment Control Record.
Filler	15-34	20	A/N	Space Filled.
Total Adjustments	35-49	15	N	This field contains the total number of adjustments that were processed.

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### CHART F-5: COLLECTION AND ADJUSTMENT CONTROL RECORD LAYOUT

OMB Control No: 0970-0161 Expiration Date: xx/xx/xxx

Field Name	Location	Length	A/N	Comments
Total Collections	50-64	15	N	This field contains the total number of collections that were processed.
Total Certified Arrearage Amount	65-75	11	N	This field is an accumulation of the certified arrearage amounts that were processed. The total certified arrearage amount is a signed positive numeric amount with two decimal places assumed.
Total Collection Amount	76-86	11	N	This field is an accumulation of the collection amounts that were processed. The total collection amount is a signed positive numeric amount with two decimal places assumed.
Total Adjustment Amount	87-97	11	N	This field is an accumulation of the adjustment amounts that were processed. The total adjustment amount is a signed positive numeric amount with two decimal places assumed.
Total Net Amount	98-108	11	N	This field contains the total collection amount minus the total adjusted amount. The total net amount is a signed positive numeric amount with two decimal places assumed.
OCSE Cycle Number	109-114	6	A/N	The year and cycle number for this file of collections and adjustments. The format of the field is CCYYNN were CC is century, YY is calendar year, and NN is the cycle number.
Filler	115-240	126	A/N	Space filled.

### CHART F-6: CASE RECONCILIATION RECORD LAYOUT

OMB Control No: 0970-0161 Expiration Date: xx/xx/xxxx

Field Name	Location	Length	A/N	Comments
Record Identifier	1-3	3	A	This field is a constant and contains 'REC' to identify this record as the Federal Offset Reconciliation Detail Record.

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### CHART F-6: CASE RECONCILIATION RECORD LAYOUT

OMB Control No: 0970-0161 Expiration Date: xx/xx/xxxx

Field Name	Location	Length	A/N	Comments
Submitting State Code	4-5	2	A	This field contains a valid state code for the state requesting the Reconciliation File. The state code contains a valid two-character alphabetic postal abbreviation.
Local Code	6-8	3	A/N	This field contains the most recent local code submitted by the state and accepted for the case.
SSN	9-17	9	N	This field contains the Social Security number submitted for the NCP.
Case ID	18-32	15	A/N	This field contains the case identification that was submitted by the state for the case. This field contains spaces if a case identification was not submitted by the state.
NCP Last Name	33-52	20	A/N	This field contains the last name of the NCP as originally certified. It contains at least one alphabetic character and is uppercase. No embedded spaces or special characters, except a hyphen, are present within the first four positions.
NCP First Name	53-62	10	A/N	This field contains the first name of the NCP, up to the first 10 characters. It contains at least one alphabetic character and is uppercase.
Current Arrearage Amount	63-70	8	N	This field contains the current arrearage amount for the case. The value is the amount certified by the state net of any Tax or Administrative Offsets or modifications. This field contains the amount in whole dollars only.
Case Type Indicator	71	1	A	This field contains one of the following codes to indicate the type of case: A – TANF N – Non-TANF

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Field Name	Location	Length	A/N	Comments
Last Pre-Offset Notice Date	72-79	8	A/N	<p>This field contains the date that the most recent Pre-Offset Notice was sent, in CCYYMMDD format.</p> <ul style="list-style-type: none"> <li>• If OCSE issues the notice for the state, this is the date that the PON was sent by OCSE.</li> <li>• If the state issues the PON, this is the date issued that was provided by the state on the Add Case Transaction or the Annual Submittal Process Transaction.</li> </ul>
Pre-Offset Notice Hold Indicator	80	1	A	<p>This field contains one of the following values to indicate if the case is active at Fiscal Service:</p> <p>H – The case is on hold pending the Pre-Offset Notice hold period.</p> <p>Space – The case has either been sent to Fiscal Service or is MSFIDM-only.</p>

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Field Name	Location	Length	A/N	Comments
Department of State Action Indicator	81	1	A	This field contains one of the following codes to indicate the action that was taken with DoS for the case: S – OCSE submitted the NCP to DoS for passport denial when the case’s arrearage amount exceeded the federally-mandated threshold. D – OCSE previously submitted the NCP to DoS for passport denial, but has now forwarded a Delete Record to DoS. C – OCSE submitted the NCP to DoS for passport denial when the combined arrearage amount for the eligible TANF and non-TANF cases from a single state exceeded the federally-mandated threshold. R – OCSE submitted the NCP to DoS for passport denial, but DoS rejected the case for an invalid country code or an invalid DOB. Space – The NCP is eligible to receive his/her passport, based on one of the following conditions: 1) the current arrearage amount is less than the federally-mandated threshold, or 2) the Passport Denial Exclusion Indicator was set.
Administrative Offset Exclusion Indicator	82-84	3	A	This field contains one of the following values that were sent by the state: ADM – Exclude all Administrative Offsets (RET, SAL, VEN) Space – Exclusion indicator does not apply
Federal Retirement Offset Exclusion Indicator	85-87	3	A	This field contains one of the following values that were sent by the state: RET – Exclude Federal Retirement Space – Exclusion indicator does not apply
Vendor Payments Exclusion Indicator	88-90	3	A	This field contains one of the following values that were sent by the state: VEN – Exclude Vendor Payment/Miscellaneous Space – Exclusion indicator does not apply

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OMB Control No: 0970-0161 Expiration Date: xx/xx/xxxx

Field Name	Location	Length	A/N	Comments
Federal Salary Exclusion Indicator	91-93	3	A	This field contains one of the following values that were sent by the state: SAL – Exclude Federal Salary ( <b>pre-set on all cases at Fiscal Service</b> ) Space – Exclusion indicator does not apply
Tax Refund Offset Exclusion Indicator	94-96	3	A	This field contains one of the following values that were sent by the state: TAX – Exclude Tax Refund Offset Space – Exclusion indicator does not apply
Passport Denial Exclusion Indicator	97-99	3	A	This field contains one of the following values that were sent by the state: PAS – Exclude Passport Denial Space – Exclusion indicator does not apply
Multistate Financial Institution Data Match Exclusion Indicator	100-102	3	A	This field contains one of the following values that were sent by the state: FIN – Exclude MSFIDM Space – Exclusion indicator does not apply
Filler	103-105	3	A	Space filled.
Insurance Exclusion Indicator	106-108	3	A	This field contains one of the following values that were sent by the participating state: INS – Exclude from Insurance Match Space – Exclusion indicator does not apply
SSN/Name Verification Code	109	1	A	This field contains one of the following values to indicate whether the NCP has a verified or matched SSN/Name combination: M – The NCP’s current SSN/Name matches P – The NCP’s previous SSN/Name verifies or matches, the current SSN/Name does not verify or match U – The NCP’s current SSN/Name does not verify or match V – The NCP’s current SSN/Name verifies

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OMB Control No: 0970-0161 Expiration Date: xx/xx/xxxx

Field Name	Location	Length	A/N	Comments
Address Source	110	1	A	This field contains one of the following values to indicate the source of the address: O – Other S – Submitting state
Address Line 1	111-145	35	A/N	This field contains the first address line of the NCP’s mailing address.
Address Line 2	146-180	35	A/N	This field contains the second address line of the NCP’s mailing address.
City	181-205	25	A/N	This field contains the city of the NCP’s mailing address.
State	206-207	2	A/N	This field contains the state abbreviation of the NCP’s mailing address.
Zip	208-216	9	A/N	This field contains the zip code of the NCP’s mailing address.
Foreign Indicator	217	1	A/N	This field contains an indicator if the NCP’s address information is for a foreign address.
Country Name	218-242	25	A/N	This field contains the name of the NCP’s foreign country.
Filler	243-245	3	A/N	This field is reserved for future use and contains spaces.

### CHART F-7: CASE RECONCILIATION CONTROL RECORD LAYOUT

OMB Control No: 0970-0161 Expiration Date: xx/xx/xxxx

Field Name	Location	Length	A/N	Comments
Record Identifier	1-3	3	A	This field is a constant and contains ‘RCT’ to identify this record as the Federal Offset Reconciliation Control Totals Record.



**The Paperwork Reduction Act of 1995(Pub.L. 104-13)**

Public reporting burden for this collection of information is estimated to average 0.46 hours, per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information, unless it displays a currently valid OMB control number.

Submitting State Code	4-5	2	A	This field contains the state abbreviation that was sent to OCSE by the state on the Case Submission and Update Record.
TANF Cases Returned	6-14	9	N	This field contains a count of the total detail records on the file for TANF cases.
Non-TANF Cases Returned	15-23	9	N	This field contains a count of the total detail records on the file for non-TANF cases.
Total Cases Returned	24-32	9	N	This field contains a count of the total number detailed records on the file.
Extract Date	33-40	8	N	This field contains the date that the reconciliation data was extracted from the OCSE Case Master File in CCYYMMDD format.
Filler	41-245	205	A/N	This field is reserved for future use and contains spaces.

**The Paperwork Reduction Act of 1995**

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information, unless it displays a currently valid OMB control number. This information collection is expected to take .4 hours per response. OMB control number: 0970-0161, Expiration date xx/xx/xxx.