

REQUIREMENTS FOR MAGNETIC MEDIA FILING OF THE
CURRENCY TRANSACTION REPORT BY CASINOS
FINCEN FORM 103

JULY 2004

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Purpose

The purpose of this specification package is to provide the requirements and conditions for filing FinCEN Form 103, the Currency Transaction Report by Casinos (CTRC) information on magnetic media. For the purpose of these specifications, magnetic cartridges and 3-1/2 inch diskettes will be referred to as "Media".

The magnetic media forwarded to the Detroit Computing Center (DCC) will be considered a substitute for the Form 103 paper document, provided the transaction is accepted by the DCC system. Receipt and acknowledgement of magnetic media is further discussed in a later section.

Approval to participate in the magnetic media reporting program is contingent upon the filer following these steps:

- Review specifications
- File application to participate
- Satisfy acceptance testing procedures
- Receive formal DCC approval
- File reports no more frequently than every two weeks
- Monitor quality

Continued participation in the Magnetic Media Program is contingent upon maintenance of quality standards and timely reporting.

Application for Magnetic Media Reporting

For purposes of these specifications, the Casino is the agency preparing the CTRCs and the Transmitter is the organization preparing the magnetic media file. The Casino and transmitter may be the same or different organizations.

Generally, card clubs are subject to the same rules as Casinos, unless a different requirement for card clubs is explicitly stated

in 31 CFR Part 103. Therefore, the term "Casino" when used in this document includes a reference both to a Casino and to a card club.

Casinos and their transmitters must complete and send to the Internal Revenue Service Detroit Computing Center (DCC) an "Application for Magnetic Media Reporting of Currency Transactions" (Form DCC-4419) and a Declaration Statement. The Declaration Statement is an agreement between the IRS and the Casino or Transmitter relative to filing CTRCs magnetically.

Only a single application should be submitted, even if you file on more than one type of magnetic media (e.g., magnetic cartridge and 3-1/2 inch diskette).

DCC will review the application and notify the applicant, in writing, of authorization to file. Magnetic media reports may not be filed until the application has been approved.

After you have received approval to file on magnetic media, you need not reapply each year; however notify DCC in writing if:

- You change media type (diskette to cartridge, etc.) or report using more than one type of media.
- You discontinue filing on magnetic media.
- You have used a transmitter to prepare your magnetic media but now prepare the transmission from your own computer

If any of these conditions apply to you, contact DCC for clarification. Also, notify DCC in writing if you had hardware or software changes that would affect the characteristics of your magnetic media submission. Please use your Transmitter

Control Code (TCC) and Location Control Code (LCC) in all contacts with DCC.

Filing of Magnetic Media Reports

General:

DCC will advise magnetic filers when they may begin to file using magnetic media. Until this notification has been issued, magnetic media will not be accepted.

If the magnetic filing system encounters problems which appear will remain unresolved for a potentially lengthy period, the filer will be advised to stop magnetic filing until the problem has been resolved.

Do not file a paper Form 103 for Casino transactions, which are reported by magnetic media.

If entire files are unreadable due to format errors, etc. we will contact the transmitter by via telephone to send a replacement for the file. Invalid transactions on a file, however, should be corrected and resubmitted as part of the file for the next full reporting period. A filer whose error rates are at a high level on a continuing basis may risk being discontinued as a magnetic media filer.

Filers are required to retain a copy of the Casino Form 103 or have the ability to reconstruct the data filed magnetically for a period of five years. In addition, the magnetic filer must retain the acknowledgement from DCC to facilitate inquiries for the same period as well as any 'working' papers, which may be necessary for centralized keying of transactions.

Aggregation of Casino information is to be automated if possible, however, the requirement for aggregation is not different using Magnetic Media filing than it would be if filing paper CTRCs.

Transmittal Process:

A Form DCC-4804 Transmittal must accompany your magnetic media submissions. DCC encourages the use of computer-generated forms that include all necessary information. Be sure to include the forms or computer generated substitute with your media shipment. **Do not mail the**

cartridges or diskettes and transmittal documents separately.

The filer should sign the affidavit on DCC-4804; however, an agent may sign the affidavit on behalf of the filer if all of the following conditions are met:

- The agent has been designated the authority to sign the affidavit under and agency agreement (either oral, written, or implied) that is valid under any state law.
- The agent signs the affidavit and adds the caption 'For: (Name of Filer)'. See form 4800 (CTR Magnetic Media Reporting Instruction) for detailed instructions.

Before submitting magnetic media files, include the following:

- A signed transmittal Form 4804 or computer generated substitute.
- The magnetic media with an external identifying label as described in Part B, Section 2 and 3. Be sure to include the proper sequence on the label.
- A statement on the outside of the shipping container that states "**Attn: Tape Library, 'Deliver unopened: CTRC Magnetic Media; __ of __'.**" If there is only one container, mark the outside as 1 of 1. For multiple containers, include the sequence (e.g. 1 of 3, 2 of 3, etc.).

DCC will not pay or accept 'Collect on Delivery' or 'Charged to IRS' shipments of CTRCs on magnetic media that an individual or organization is legally required to report.

Data Sequencing and Validation Criteria:

The following data controls must be adhered to or the CTRC magnetic media will be rejected. The data records must be in the following sequence:

· Transmitter (1A)

First record on the file – must be only one.

· Casino Location Header (2A)

One Casino Location Header record for each Casino location reporting on the magnetic media.

· Transaction Summary (2B)

One record of this type for each transaction being reported.

· Customer (Part 1, Section A) (2C)

One record of this type for each customer involved in the transaction reported in Record 3A.

· Agent (Part 1, Section B) (2D)

One record of this type for each agent involved in the transaction reported in Record 3A.

· Location Summary (8A)

One record for each Casino reporting transactions on this file. Follows the last transaction reported for the Casino location.

· Casino Summary (8B)

One record of this type. Follows the last Location Summary (9A) record.

· File Summary (8Z)

Last record on the file – must only be one.

Filing Requirements

The casino documents filed using magnetic media will be filed on a biweekly basis (i.e., January 1, 2002 - January 14, 2002). Magnetic media must be prepared and sent for processing as soon as possible after the reporting period ends. A fixed reporting cycle will be established for each filer.

In order to allow the filer sufficient time to accumulate data, create the magnetic media file, and submit the file to the DCC, Treasury has determined that all transactions filed on

magnetic media will be considered filed timely if received by the DCC no more than 30 days after the date of the transaction.

Once a filer begins filing Casino documents utilizing magnetic media, all original, replacement, amended, and late report filings must be submitted on magnetic media.

BSA regulations require that filers retain a copy of the CTRC data or have the ability to reconstruct the data filed magnetically for a period of five years. In addition, the magnetic filer must retain the acknowledgment from DCC to facilitate inquiries for the same period as well as any "working" papers that may be necessary for centralized processing of transactions.

Although a duly authorized agent may sign the affidavit, the filer is held accountable for the accuracy of the Form DCC-4804 and the data that is submitted.

Test Files and Acceptance Procedures

DCC will assist new transmitters with their initial magnetic media submission by reviewing a test file. When ready to file, the Filer will be asked to provide a test file. The testing process will be as follows:

- With all test data submit a Form DCC-4804 or a computer-generated substitute, which includes your TCC and the number of CTRCs submitted. The Form DCC-4804 contains a check box to indicate the type of file; (e.g., production or test).
- The test data must be formatted according to the current requirements. **The information in the "1A" and "2A" records, which defines the filing Casino, must be actual information - not fictitious.**
- The test data should consist of a set of sample Casino forms, containing data normally supplied by the filer. The test file must contain at least 50, but not more than 100 CTRCs.
- Upon receipt of the test file the DCC will review and provide feedback to

- the transmitter within ten working days.
- If 95% of the test documents are error free and the file is correctly formatted, a letter granting final acceptance will be issued by the DCC allowing the transmitter to participate in the Magnetic Media Program.
- When a test file is not acceptable, DCC will identify the errors and discuss the necessary corrections with the filer. When the errors are corrected, the filer should send a new set of test data to DCC. The filer is responsible for correcting their software to eliminate errors. If, after three attempts, the filer's test file continues to be unacceptable, the filer must develop an acceptable plan for correcting deficiencies before any further tests.
- Approval to participate in the program applies to the system compatibility only and not to the accuracy relative to the requirements of the Bank Secrecy Act and the implementing regulations. Thus, approval for magnetic filing only means that the format is acceptable and adheres to the current specifications for magnetic filing.
- Accepted filers will be notified and issued an eight character Transmitter Control Code (TCC). In addition, a five character Location Code will be assigned, as some Casinos have multiple locations.

- Contact person
- Type(s) of magnetic media offered (e.g., 18/36 track cartridge; or 3 1/2 inch magnetic diskettes).

Receipt and Acknowledgment of Magnetic Media Files

Each CTRC will be acknowledged to the transmitter as soon as possible after receipt. The transmitter should immediately match the acknowledgments to the original file transmitted.

If the filer does not receive the acknowledgement file, the CTRC's **are not considered filed and must be resubmitted**. This could be a result of unreadable data or a tape, which cannot be processed.

Any CTRC that contains errors will be flagged and error codes indicating the reason for the error(s) will be returned via an acknowledgment record. These error situations should be corrected and the records sent back to DCC as correction records and not as amendments. The acknowledgment record will include only error codes and the minimum information needed to identify individual CTRCs. **The logical record length of each acknowledgment record will be 57 characters, blocked 5700**. It will contain up to the first eight error codes. See the Acknowledgment Record Format section.

DCC acknowledges receipt by inserting a document control number in the DCN field of the CTRC 3R Record. **The DCN number must be included** when resubmitting corrections for those records flagged because of errors.

If you receive acknowledgment of transactions, which you did not file, or you do not receive acknowledgment for transactions that you did file, please notify the CTRC Magnetic Media Coordinator as soon as possible by calling the Help Desk. The Help Desk phone number is 1-866-743-5748.

Vendor List

DCC maintains a list of vendors who support magnetic media. There are currently no vendors supplying software for filing Casino documents magnetically.

If you are a vendor who offers a software package, has the ability to produce magnetic media for your customers, and you would like to be included on the list, submit a written request to DCC. The request should include:

- Company name
- Address
- Telephone number

How to File Amended CTCR's or Corrections to Invalid Files

If a CTCR that was prepared and submitted on magnetic media must be amended, you must file a complete replacement report as soon as possible. **All fields must be completed with the correct information, NOT JUST THE DATA FIELDS NEEDING CORRECTION.** If the original CTCR was submitted on magnetic media, then any amendments must also be filed on magnetic media. Amended reports for magnetically filed documents will not be accepted on paper. **Amendments to magnetically filed documents must include the document control number specified on the acknowledgment record, along with the amended indicator.**

DCC checks each document filed for errors as indicated in Exhibit 5. If errors are found, the record is marked and the error codes are returned to the filer on the acknowledgment record. However, the CTCR is accepted as filed and becomes part of the DCC database even though it contains errors. CTCRs with errors are to be corrected and re-submitted as part of the next reporting period file. Any filer whose error rates are at a high level on a continuing basis may risk being suspended as a magnetic filer. Corrections to documents with errors must be forwarded on magnetic media, and the Document Control Number (DCN) that DCC has assigned to the original record must be included. (The DCN will be returned on the acknowledgment file in the "3R" record and must be placed in the "2B" record when corrections/amendments are made to previously filed CTCRs.

File Specifications

The specifications contained in the following sections define the required file format and contents of the records to be included in the magnetic media file. These specifications must be adhered to unless deviations have been specifically granted by

If files are unreadable due to format errors, problems, etc., or unprocessable due to file errors, the transmitter will be contacted by telephone to send a replacement for the file. Invalid files are to be corrected and re-submitted as soon as possible to prevent them from being considered as filed late.

How to Contact the Detroit Computing Center

Magnetic media processing for CTCRs is centralized at the DCC. Magnetic cartridges and diskettes are to be mailed to the following address:

Magnetic Media Coordinator
Detroit Computing Center
P.O. Box 740-A
Detroit, MI 48232

Direct all magnetic filing correspondence and all requests for magnetic media related publications or information to the following:

Magnetic Media Coordinator
Detroit Computing Center
985 Michigan Avenue
Detroit, MI 48226-2458

Direct all Bank Secrecy Act (BSA) compliance related correspondence and questions to the BSA Technical Support Branch at the following address and phone number:

BSA Technical Support Branch
Compliance Review Group
Detroit Computing Center
985 Michigan Avenue
Detroit, MI 48226-2458
Phone Number: (800) 800-2877
(313) 234-1613

DCC in writing.

All records must be a **fixed length of 390 characters.**

Cartridge Specifications

Usually DCC will be able to process any

compatible cartridge file. The standard file characteristics are 18/36 track, EBCDIC, odd parity, 6250 BPI, and standard labels. The standard data set name to be used on files is **ICCTP.CI047.C8362**. All deviations from the above must be approved in writing by DCC.

All compatible cartridge files must be 1/2 inch contained in plastic cartridges, which are approximately 4 inches, by 5 inches by 1 inch in dimension.

An external label must appear on each cartridge submitted for processing. The following information must appear on the label:

- The transmitters name
- Transmitter Control Code (TCC)
- Date of preparation
- A reel number assigned by the preparer which must match the reel number on the internal label
- Number of reels in file
- Reel sequence number (i.e., 01 of 08)

The above information will assist DCC in processing a cartridge. Cartridges will
3-1/2 inch Diskette Specifications

These specifications define the file characteristics acceptable for diskette media reporting. These characteristics must be adhered to unless deviations are specifically authorized by DCC in writing.

All records must be fixed in length to the size specified for each record type, 390 characters.

Usually DCC will be able to process any compatible diskette file. The standard file characteristics are 3-1/2 inch diskette double sided/double density or double sided/high density. The standard data set name to be used on files is **CTRC8362**. All deviations from the above must be approved in writing by DCC.

All diskettes must be generated using MS-DOS or Windows on an IBM compatible personal computer in ASCII mode. All alphabetic characters must be in the upper case only. Records cannot span diskettes.

normally be returned within 45 days of receipt, however they may not be returned in the same shipping containers in which they were received.

The cartridge records defined in these specifications should have a **block size of 27,690**.

For the purposes of these specifications the following conventions must be used for internal labels:

Header Label:

- Standard headers provided they begin with 1HDR, HDR1, VOL1, VOL2, UHL1, or "b LABEL".
- Consist of a maximum of 80 positions.

Trailer Label:

- Standard trailer labels may be used provided that they begin with 1EOR, 1EOF, EOR1, EOF1, EOVS1, or EOVS2.
- Consist of a maximum of 80 positions.

An external label must appear on each diskette submitted for processing. The following information should appear on the label:

- The transmitters name
- Transmitter Control Code (TCC)
- Date of preparation
- Period Coverage Dates
- Number of diskettes in file
- Diskette sequence number (i.e., 01 of 08)

The above information will assist DCC in processing a diskette. Diskettes will normally be returned within 45 days of receipt, however they may not be returned in the same shipping containers in which they were received.

The diskette records defined in these specifications should be **unblocked 370 character records**. The industry standard record delimiter for diskette data records is the two-byte combination of 0D0A

hexadecimal characters (carriage return, line feed).

File Organization

All incoming data must be in the expected format. An asterisk (*) denotes a mandatory record for the file and for each transaction.

Based on the filer's application, DCC keeps identifying information on file for the reporting Casino. This data includes the transmitter code, transmitter and casino names, addresses, EINs, and location codes (TCC and locations codes are assigned by DCC). The Transmitter and Header records use this information to correctly identify the transmitter and the filer. Any records that do not match DCC files cannot be processed.

* **Transmitter (1A) Record**

This must be the first record on the file. There can be only one of these records.

* **Casino Location Header (2A) Record**

There must be one of these records for each Casino location included on the file. This record must immediately precede all records relating to that Casino location.

* **Transaction Summary (2B) Record**

There must be one Transaction Summary Record for each transaction reported. This record will be the first for each transaction.

* **Customer (Part 1 -Section A) (2C) Record**

There must be one customer record for each transaction. There may be multiples of this record type depending on the number of persons or organizations who are customers of this transaction.

* **Agent (Part 1 - Section B) (2D) Record**

This record must be filed if a person(s) acted as an agent for the customers of this transaction. This record is not required if the customer conducted the transaction on his own behalf. There may be multiples of this record.

* **Location Summary (8A) Record**

There must be one of this record type for each Casino Location reporting on the file. It is the control record for the reporting casino location. It must be the last record associated with the casino location.

* **Casino Summary (8B) Record**

There must be one of this record type for each Casino reporting. It must be the last record associated with the Casino and will follow the last Location Summary Record for the Casino.

* **File Summary (8Z)**

There must be one of these records on the file and it must be the last record on the file.

Records that fail to meet these requirements will be coded as correspondence errors and returned to the filer for corrections.

Overview of File

All original, replacement, amendment, and late report filings can be submitted on magnetic media. The DCN assigned to the error record must be included. The DCN must also be included for amendments, along with the amendment indicator code.

All dates are to be in the format of century, year, month, day, with month and day both being right justified and zero-filled. (CCYYMMDD)

Money amounts are 10 positions and should be right justified and zero filled. Enter dollar amounts only. All cents should be rounded

up to the next higher dollar amount (i.e., \$10,000.06 should be reported as \$10,001).

The transaction sequence number, which is generated by the transmitter, will be used in the acknowledgment records sent back to the transmitter. This will be a five digit field starting with one and incremented by one for each succeeding currency transaction report by casino. It is to be right justified and zero filled.

All zip codes are to be left justified and zero filled.

All name, address, and city fields are to be left justified and space filled.

All name and address fields relating to CTRC data must follow the Name Editing Conventions specified in the attachments.

Account numbers must NOT contain leading zeros unless they are part of the actual account number. All entries must be left justified and space filled.

Do not include lower case characters.

All "Filler" fields should be space filled. Do not use low values as a substitute for spaces. Blank fields must be space filled.

All validation and consistency edits are specified in Exhibit 5.

Record Layouts

Transmitter "1A" Record

This record identifies the transmitter of the file (person or organization handling the data accumulation and formatting). There can be only one "1A" Record on each magnetic media file and it must be the first record after the header label. All data elements for this record are required. All records on the must be 390 characters. For cartridge files, the **block size must be 27,690 characters**. All alpha characters entered in the file must be uppercase.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "1A".
3-37	Transmitter's Name	35	REQUIRED. Enter the name of the individual or organization that is transmitting this file. Left justify and blank fill unused positions.
38-72	Transmitter Street Address	35	REQUIRED. Enter the street address of the transmitter. Do not abbreviate or use a post office box number. Left justify and blank fill unused positions.
73-97	Transmitter City	25	REQUIRED. Enter the city of the transmitter. Do not abbreviate city name. Left justify and blank fill unused positions.
98-99	Transmitter State	2	REQUIRED. Enter the state of the transmitter. Use the correct abbreviation from Exhibit 4.
100-108	Transmitter Zip Code	9	REQUIRED. Enter the valid 9-digit Zip Code of the transmitter. If only the first 5 digits are known, left justify and fill the unused positions with zeroes. Exhibit 6 holds valid state zip code combinations.
109-111	Transmitter Area Code	3	REQUIRED. Enter the telephone area code of the transmitter.
112-118	Transmitter Telephone	7	REQUIRED. Enter the telephone number of the transmitter.
119-153	Transmitter Contact Name	35	REQUIRED. Enter the name of the person who is the official contact for this file.
154-162	Transmitter's Federal EIN	9	REQUIRED. Must be the valid 9-digit number assigned to the transmitter by IRS and must match the transmitter name. Do not enter hyphens, slashes, alpha characters, all 9s or all zeroes.

Media Position	Field Title	Length	Description and Remarks
163-170	Coverage Beginning Date	8	REQUIRED. Enter the earliest original transaction date on the file. Enter as a numeric 8-position field in format: century, year, month, day (CCYYMMDD).
171-178	Coverage Ending Date	8	REQUIRED. Enter the latest original transaction date on the file. Enter as a numeric 8 position field in format: century, year, month, day (CCYYMMDD)
179-186	Transmitter Control Code (TCC)	8	REQUIRED. Enter the 8-character Transmitter Control Code (TCC) assigned by DCC.
187-380	Blank	194	Enter blanks.
381-390	User Field	10	Use this field for any descriptive information you may require, otherwise, enter blanks. We discourage the use of TIN information in this field. Not included in acknowledgment file.

Casino Location Header “2A” Record

This record is required for each Casino Location reporting transactions on this file; it identifies information regarding the Casino location where reported transactions were completed. The number of Casino Location Header records will depend on the number of different casino locations reporting on the magnetic media file.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "2A".
3-10	Transmittal Control Code	8	REQUIRED. Enter the TCC assigned by DCC.
11-15	Location Code	5	REQUIRED. Enter the location code for the submitting Casino location as assigned by DCC. Do not use all zeroes.
16-50	Casino Trade Name	35	REQUIRED. Enter the name by which the Casino does business and is commonly known. Use the standard abbreviations and name editing instructions in Exhibits 2 and 3. Left justify and blank fill unused positions.
51-85	Casino Legal Name	35	REQUIRED. Enter the legal name of the Casino. The name must match the EIN. Use the standard abbreviations and name editing instructions in Exhibits 2 and 3. Left justify and blank fill unused positions.
86-94	Casino EIN	9	REQUIRED. Must be the valid 9-digit number assigned to the Casino by IRS and must match the Casino Legal Name. Do not enter hyphens, slashes, alpha characters, all 9s or all zeroes.
95-129	Casino Street Address	35	REQUIRED. Enter the street address of the Casino. Do not abbreviate or use a post office box number. Left justify and blank fill unused positions.
130-154	Casino City	25	REQUIRED. Enter the city of the Casino. Do not abbreviate city name. Left justify and blank fill unused positions.
155-156	Casino State	2	REQUIRED. Enter the state code of the Casino. Use the correct abbreviation from Exhibit 4.
157-165	Casino Zip Code	9	REQUIRED. Enter the valid 9-digit zip code of the Casino. If only the first five digits are known, left justify and fill the unused positions with zeroes. Exhibit 6 holds valid state zip code combinations.

Media Position	Field Title	Length	Description and Remarks
166-185	Approving Official's Title	20	REQUIRED. Enter the official title of the approving official. Left justify and fill unused positions with blanks.
186-220	Preparer's Name	35	REQUIRED. Enter the name of the preparer. See Exhibit 3 for name editing conventions. Left justify and fill unused positions with blanks
221-255	Contact Person's Name	35	REQUIRED. Enter the name of the contact person. See Exhibit 3 for name editing conventions. Left justify and fill unused positions with blanks.
256-258	Contact Person's Area Code	3	REQUIRED. Enter the contact person's area code.
259-265	Contact Person's Telephone Number	7	REQUIRED. Enter the contact person's telephone number.
266-273	Approval Date	8	REQUIRED. Enter the date the transaction was approved
274	Resolution Code	1	REQUIRED. Enter the code to indicate where correspondence relating to these transactions should be sent. <u>Code</u> <u>Type of Resolution</u> 2 Casino Headquarters 3 Casino Location 4 Transmitter
275-380	Blank	106	Enter blanks.
381-390	User Field	10	Use this field for any descriptive information you may require, otherwise, enter blanks. We discourage the use of TIN information in this field. Not included in acknowledgment file.

Transaction Summary “2B” Record

Identifies and describes the actual casino currency transaction, provides a summary of the transaction component parts and the transaction amount. Data fields within the Transaction Summary Record identify the counts for the Customer "2C" Records and the Agent "2D" Record. There can be any number of these record types per file, one record for each transaction.

Media Position	Field Title	Length	Description and Remarks				
1-2	Record Type	2	REQUIRED. Enter "2B".				
3-10	Transmitter Control Code	8	REQUIRED. Enter the 8-character TCC assigned by DCC. The TCC is also required on Form DCC-4802.				
11-15	Location Code	5	REQUIRED. Enter the location code for the casino reporting transactions as assigned by DCC. Do not enter all zeroes.				
16-20	Transaction Sequence Number	5	REQUIRED. Enter a sequential number starting with 00001 and increment by 1 for each Casino Transaction Summary "2B" Record on the file.				
21-29	Employer Identification Number (EIN)	9	REQUIRED. Enter the EIN as assigned by the IRS.				
30	Amends Prior Report	1	Enter the code to designate if this amends a prior report. <table style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: center;"><u>Code</u></td> <td style="text-align: center;"><u>Reports</u></td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">Amends</td> </tr> </table>	<u>Code</u>	<u>Reports</u>	1	Amends
<u>Code</u>	<u>Reports</u>						
1	Amends						

Media Position	Field Title	Length	Description and Remarks
31-118	Transaction Cash-in Codes (1 position) and Amounts (10 positions)	88	<p>REQUIRED. Enter the appropriate code or codes to describe the transaction. At least one entry is required in the Transaction Cash-in Code or Transaction Cash-out Code. Enter all codes that apply. In position 30, enter the first Transaction Cash-in Code followed by the 10-digit cash amount in positions 31-40. Right justify cash amounts and fill unused positions with zeros. Enter subsequent Cash-in Codes and Amounts in positions 41-117. A total of eight code and amount pairs may be entered when appropriate. Enter blanks in unused positions.</p> <p><u>Code</u> <u>Type of Transaction</u></p> <p>A Purchase of casino chips, tokens, and other gaming instruments</p> <p>B Deposit (front money or safekeeping)</p> <p>C Payment on credit (including markers)</p> <p>D Bets of currency</p> <p>E Currency received for wire transfers out</p> <p>F Purchase of casino checks</p> <p>G Currency exchange</p> <p>H Other Cash-in</p>
119-138	Other Cash-in Description	20	<p>If "H" is used for any Cash-in Codes in Positions 30-117, enter a description of the cash-in transaction. Left justify and fill unused positions with blanks.</p>

Media Position	Field Title	Length	Description and Remarks
139-248	Transaction Cash-out Codes (1 position) and Amounts (10 positions)	110	<p>REQUIRED. Enter the appropriate code or codes to describe the transaction. At least one entry is required in the Transaction Cash-in Code or Transaction Cash-out Code. Enter all codes that apply. In position 138, enter the first Transaction Cash-out Code followed by the 10-digit cash amount in positions 139-148. Right justify cash amounts and fill unused positions with zeros. Enter subsequent Cash-out Codes and Amounts in positions 149-247. A total of ten code and amount pairs may be entered when appropriate. Enter blanks in unused positions.</p> <p><u>Code</u> <u>Type of Transaction</u></p> <p>I Redemption of casino chips, tokens, and other gaming instruments</p> <p>J Withdrawal of deposit (front money or safekeeping)</p> <p>K Advance on credit (including markers)</p> <p>L Payment on bet (including slot jackpot)</p> <p>M Currency paid from wire transfer in</p> <p>N Negotiable instrument cashed (including checks)</p> <p>O Currency Exchange</p> <p>P Travel/complimentary expenses & gaming incentives</p> <p>T Payments for tournament, contest or other promotions</p> <p>Q Other cash-out</p>
249-268	Other Cash-out Description	20	If "Q" is used for any Cash-out Code in positions 138-247, enter a description of the cash-out transaction. Left justify and fill unused positions with blanks.
269-278	Transaction Total Amount Cash In	10	REQUIRED. Enter the total amount of currency received in this transaction. Enter only dollar amounts, no cents, always round cents up to next higher dollar. Do not truncate. Right justify and fill unused positions with zeroes.
279-288	Transaction Total Amount Cash Out	10	REQUIRED. Enter the total amount of currency paid out in this transaction. Enter only dollar amounts, no cents, always round cents up to next higher dollar. Do not truncate. Right justify and fill unused

Media Position	Field Title	Length	Description and Remarks
			positions with zeroes.
289-296	Transaction Date	8	REQUIRED. Enter the date of this transaction. Enter as a numeric 8-digit field in the format century, year, month, day (CCYYMMDD).
297-298	Foreign Currency	2	If foreign currency was used, enter the two-digit country code for the currency used. See Exhibit 4.
299-300	Number of Customer Records	2	REQUIRED. Enter the count of Customer "2C" Records associated with this transaction (01-98). Right justify and fill unused positions with zeroes.
301-302	Number of Agent Records	2	REQUIRED. Enter the count of Agent "2D" Records associated with this transaction (00-98).
303	Multiple Transactions	1	Enter an "M" if there are multiple transactions.
304-317	Document Control Number (DCN)	14	REQUIRED. Enter all zeroes on initial submission of this transaction. Enter the DCN assigned to the transaction by DCC when submitting a corrected or amended record.
318-381	Filler	63	Blank.
381-390	User Field	10	Use this field for any describe information you may require, otherwise, enter blanks. We discourage the use of TIN information in this field. Not included in acknowledgment file.

Customer (Part 1 - Section A) "2C" Record

This record identifies the person(s) or organization(s) for whom this transaction was completed. This record is required. There should be one of these records for every customer involved in this transaction.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "2C".
3-7	Location Code	5	REQUIRED. Enter the location code for the submitting casino. Do not use all zeroes.
8-12	Transaction Sequence Number	5	REQUIRED. Enter the transaction sequence number from the associated Transaction Summary "2B" Record.
13	Organization or Individual Code	1	REQUIRED. Enter the code to designate whether the beneficiary name in positions 16-65 is an Organization Name or an Individual's Name. <u>Code Org/Ind Type</u> 1 Individual 2 Organization 3 Both
14	Multiple Persons	1	Enter a "P", if there are multiple persons.
15-49	Organization or Individual Name	35	REQUIRED. Enter the customer's name. Use conventions from Exhibits 2 and 3 to edit the name.
50-84	Street Address	35	REQUIRED. Enter the customer's street address. Do not enter Post Office Box Number. Do not abbreviate.
85-109	City	25	REQUIRED. Enter the customer's city. Do not abbreviate. Left justify and fill unused positions with blanks.
110-111	State	2	REQUIRED. Enter the customer's state code. Use the valid abbreviation from Exhibit 4.
112-120	Zip Code	9	REQUIRED. Enter the customer's valid 9-digit ZIP code. If only the first 5 digits are known, left justify and fill the unused positions with zeroes.
121-122	Country Code	2	Enter a valid 2-digit country code, if other than U.S. Use the valid abbreviation from Exhibit 4.
123-131	SSN/EIN	9	Enter the Customer's Social Security Number (SSN) or Employer Identification Number (EIN). EIN is used if the customer is <u>not</u> an individual is a nonresident alien, who does not have an SSN or an IRS Individual Tax Identification Number (ITIN), enter "NONE".

Media Position	Field Title	Length	Description and Remarks
132-139	Date of Birth	8	Enter the Date of Birth, if it is known, as an 8-position field in format: century, year, month, day (CCYYMMDD).
140	Method of Identification	1	REQUIRED. Enter the code for the type of identification used to verify the customer's identity. If more than one type of id is used, always submit first type. Code Identification Code Identification 1 Examined ID credential 3 Organization 2 Known Customer - info on file
141	Describe ID Credential	1	REQUIRED. Enter the code for the type of identification used to describe the customer's or beneficiary's name. If more than one type of id is used, always submit first type. Code Type Code Type 2 Driver Permit/State I.D. 3 Alien ID 1 Passport 4 Other
142-161	Other description	20	If code in ID Credential above is 4, "other", enter description.
162-163	ID Issued by State/Country	2	REQUIRED. Enter valid country code or state code from Exhibit 4 from where the identification was issued.
164-185	ID Number	22	REQUIRED. Enter the number from the identification.
186-207	Customer Account Number	22	REQUIRED. Enter the principal account number the casino has assigned to the owner of this transaction. If no account number has been assigned, enter "NONE".
208-380	Blank	173	Enter blanks.
381-390	User Field	10	Use this field for any descriptive information you may require; otherwise, enter blanks. We discourage the use of TIN information in this field. The acknowledgment file WILL include this field.

Agent (Part 1- Section B) “2D” Record

This record contains information about the identity of the person(s) who acted as Agent for the transaction. This record is required when there is a separate agent involved in the transaction.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "2D".
3-7	Location Code	5	REQUIRED. Enter the location number for the submitting casino. Do not use all zeroes.
8-12	Transaction Sequence Number	5	REQUIRED. Enter the transaction sequence number from the associated currency transaction "2B" Record.
13	Multiple Agents Indicator	1	Enter an "A", if there are multiple agents.
14-48	Agent Name	35	REQUIRED. Enter the agent's name. Use the name editing instructions in Exhibit 3. Left justify and fill unused positions with blanks.
49-83	Agent Street Address	35	REQUIRED. Enter the agent's mailing address. Do not use Post Office Box. Left justify and fill unused positions with blanks.
84-108	Agent City	25	REQUIRED. Enter agent's city. Do not abbreviate. Left justify and fill unused positions with blanks.
109-110	Agent State	2	REQUIRED. Enter the agent's state. Use the valid abbreviation from Exhibit 4.
111-119	Agent Zip Code	9	REQUIRED. Enter the valid 9-digit Zip Code. If only the first 5 digits are known, left justify and fill the unused positions with zeroes.
120-121	Country Code	2	Enter a valid 2-digit country code, if not U.S. Use Exhibit 4.
122-130	SSN	9	REQUIRED. Enter the agent's SSN. If that individual is a non-resident alien who does not have an SSN or ITIN, enter "NONE".
131-138	Date of Birth	8	Enter the Date of Birth, if it is known, as an 8-position field in format: century, year, month, day (CCYYMMDD).
139	Method of Identification	1	REQUIRED. Enter the code for the type of identification used to verify the customer's or beneficiary's name. If more than one type of id is used, always submit first type. Code Identification 1 Examined ID credential

Media Position	Field Title	Length	Description and Remarks
			2 Known Customer - info on file
140	Describe ID Credential	1	REQUIRED. Enter the code for the type of identification used to describe the customer's or beneficiary's name. If more than one type of id is used, always submit first type. Code Type Code Type 2 Driver Permit/State I.D. 3 Alien ID 1 Passport 4 Other
141-160	Other description	20	If code in "ID Credential" above is 4 "other", enter description.
161-162	ID Issued By State/Country	2	REQUIRED. Enter the valid state or country code where identification was issued. Use state and country codes from Exhibit 4.
163-184	ID Number	22	REQUIRED. Enter the number from the identification.
185-380	Blank	196	Enter blanks
381-390	User Field	10	Use this field for any descriptive information you may require; otherwise, enter blanks. We discourage the use of TIN information in this field. Not included in acknowledgment file.

Location Summary “8A” Record

This record is required for each casino location reporting transactions on this file. It follows the last transaction reported for the casino location. This record contains counts for the types of record associated with the casino location.

Media Position	Field Title	length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "8A".
3-7	Location Code	5	REQUIRED. Enter the location number for the submitting casino. Do not use all zeroes. Right justify and fill unused positions with zeroes.
8-14	Location Transaction Summary Record Count	7	REQUIRED. Enter number of Transaction Summary "2B" records for the casino location
15-21	Blank	7	Enter blanks.
22-28	Customer Record Count	7	REQUIRED. Enter the number of Customer "2C" records for the casino location.
29-35	Agent Record Count	7	REQUIRED. Enter the number of Agent "2D" records for the casino location
36-47	Total Amount Cash In Reported for Location	12	REQUIRED. Enter the total dollar amount of cash in reported for the casino location.
48-59	Total Amount Cash Out Reported for Location	12	REQUIRED. Enter the total dollar amount of cash out reported for the casino location.
60-380	Blank	321	Enter blanks.
381-390	User Field	10	Use this field for any descriptive information you may require; otherwise, enter blanks. We discourage the use of TIN information in this field. Not included in acknowledgment file.

Casino Summary “8B” Record

This record is required; it summarizes counts of transactions for each Casino reporting on this file. It follows the last reported Location Summary "8A" Record filed for the Casino. This record contains counts of the number of each type of record for the Casino.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "8B".
3-9	Location Record Count	7	REQUIRED. Enter number of Location "2A" records for the Casino.
10-16	Transaction Summary Record Count	7	REQUIRED. Enter number of Transaction Summary "2B" records for the Casino.
17-23	Blank	7	Enter blanks.
24-30	Customer Record Count	7	REQUIRED. Enter number of Customer "2C" records for the Casino.
31-37	Agent Record Count	7	REQUIRED. Enter number of Agent "2D" records for the Casino.
38-49	Total Cash In Amount Reported for Casino	12	REQUIRED. Enter the total dollar amount of cash in reported for the Casino.
50-61	Total Cash Out Amount Reported for Casino	12	REQUIRED. Enter the total dollar amount of cash out reported for the Casino.
62-380	Blank	319	Enter blanks.
381-390	User Field	10	Use this field for any descriptive information you may require; otherwise, enter blanks. We discourage the use of TIN information in this field. Not included in the acknowledgment file.

File Summary Record “8Z” Record

This record is required as the last record on the file. There must be only one of this record type on the file. This record contains counts of the number of each type of record on the file.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "8Z".
3-9	Casino Summary Record Count	7	REQUIRED. Enter number of Casino Summary "8B" records.
10-16	Location Summary Record Count	7	REQUIRED. Enter number of Location Summary "8A" records.
17-23	Transaction Summary Record Count	7	REQUIRED. Enter number of Transaction Summary "2B" Records.
24-30	Blank	7	Enter blanks.
31-37	Customer Record Count	7	REQUIRED. Enter number of Customer "2C" records.
38-44	Agent Record Count	7	REQUIRED. Enter number of Agent "2D" records.
45-56	Total File Cash In Amount Reported	12	REQUIRED. Enter total dollar amount of cash in reported.
57-68	Total File Cash Out Amount Reported	12	REQUIRED. Enter total dollar amount of cash out reported.
69-380	Blank	312	Enter blanks.
381-390	User Field	10	Use this field for any descriptive information you may require; otherwise, enter blanks. We discourage the use of TIN information in this field. Not included in acknowledgment file.

Acknowledgement Records

Acknowledgement "1A" Record

This record is created by DCC as part of an acknowledgment file returned to the Transmitter. This record contains identifying information and error codes pertaining to the transmitter data received by DCC. **All records on the file will be 57 positions. For cartridge files, the block size will be 14,991 positions.**

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "1A".
3-10	Coverage Beginning Date	8	From positions 163-170 of the incoming "1A" record.
11-18	Coverage Ending Date	8	From positions 171-178 of the incoming "1A" record.
19-26	Transmitter Control No. Code (TCC)	8	From positions 179-186 of the incoming "1A" record.
27-56	Error Codes (1-10)	30	Error Codes are assigned by DCC after consistency and validity edits. Exhibit 7 lists the codes. Each code is 3 digits.
57	Blanks	1	Blank filled.

Acknowledgement Location "2A" Record

This record is created by DCC as part of an acknowledgment file returned to the Transmitter. This record contains identifying information and error codes pertaining to the Location data received.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "2A".
3-7	Location Code	5	From positions 11-15 of incoming "2A" record.
8-34	Error Codes (1-9)	27	Error Codes are assigned by DCC after consistency and validity edits. Exhibit 7 lists the codes. Each code is 3 digits.
35-57	Blank	23	Blank filled.

Acknowledgement Transaction Information and Error Code “3R” Record

This record is created by DCC as part of an acknowledgment file returned to the Transmitter. This record contains identifying information and error codes pertaining to transactions records. The transaction sequence number identifies transactions. The DCC assigned Document Control Number is returned to the transmitter for each transaction.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "3R".
3-7	Transaction Sequence Number	5	From positions 16-20 of incoming "2B" record.
8-21	Document Control Number	14	Assigned by DCC. A unique identifying number.
22-31	User Field	10	From positions 381 – 390 of the incoming "2B" record.
32-33	Blank	2	Blank filled.
34-57	Error Codes (1-8)	24	Error Codes are assigned by DCC after consistency and validity edits. Exhibit 7 lists the codes. Each code is 3 digits.

Acknowledgement Trailer for Transmitter "9Z" Record

This record is created by DCC as part of an acknowledgment file returned to the Transmitter. This record is a systems control record and it summarizes the data processed by DCC. There are no error codes in this record.

Media Position	Field Title	Length	Description and Remarks
1-2	Record Type	2	REQUIRED. Enter "9Z".
3-9	Number of Locations in File	7	Generated by DCC, the number of Location records processed from this file.
10-16	Number of Transactions (CTRCs) in File	7	Generated by DCC.
17-57	User Field	41	Blanks.

Elements

<u>Element</u>	<u>Description</u>
Account Number	The customer's account number as related to the transaction being reported, if any.
Agent	Relates to the entries in Part I, Section B of the CTRC. Any individual who conducts a currency transaction on behalf of another individual or organization.
Amended Report	A report that is used to correct one that was previously filed and accepted by DCC.
Card Club	Any organization duly licensed or authorized to do business as a card club, gaming club, card room, gaming room, or similar gaming establishment in the United States, including tribal card clubs, and having gross annual gaming revenue in excess of \$1,000,000. The term includes the principal headquarters and every domestic branch or place of business of the establishment.
Casino	Any organization duly licensed or authorized to do business as a casino or gambling casino, including a tribal casino, in the United States (except casinos located in Nevada under Regulation 6A) and having gross annual gaming revenues in excess of \$1 million. This includes the principal headquarters and every domestic branch or place of business of the casino.
Checks	For purposes of this filing it includes all negotiable instruments, (including personal, business, bank, cashier's and third-party checks), money orders, traveler's checks, certificates of deposit and promissory notes not customarily accepted as money.

Element	Description
Corrected Report	A report which is used to correct one that was previously filed but rejected by DCC because of validity or consistency errors.
CTRC	Currency Transaction Report by Casinos (Form 103)
Customer	Any person involved in a currency transaction whether or not that person participates in the casino's gaming activities.
EIN	Employer Identification Number
File	A file consists of all magnetic media records submitted by a transmitter.
Filer	Casino that prepares the CTRC.
Gaming Day	A casino's normal business day by which it keeps its books and records for business, accounting and tax purposes. If the casino offers 24-hour gaming, its gaming day is the 24-period by which it keeps its books and records.
Identifying Numbers	For individuals, it is the Social Security Number (SSN). For customers that are not individuals, it is the Employer Identification Number (EIN). If an individual is a non-resident alien, it is an Individual Tax Identification Number (ITIN).
Location Code	DCC will assign a location code to each casino location. The code is used to differentiate between various casinos that file under the same EIN. It is an alpha/numeric code, which must be used when submitting transactions using magnetic media.
Magnetic Media	Magnetic media refers to 18/36-track magnetic cartridge, or 3-1/2 inch diskette.

Element	Description
Resolution Code	Code which signifies who is to receive the correspondence relating to transactions.
SSN	Social Security Number
TIN	Taxpayer Identification Number
Transmitter	Person or organization submitting magnetic media file(s).
Transmitter Control Code (TCC)	An eight-character number assigned by DCC to the transmitter prior to actual reporting on magnetic media. This code is inserted in most records of your files and must be present before the file can be processed. An Application for Magnetic Media Reporting must be filed with DCC to receive this number.

Abbreviations

<u>Word</u>	<u>Abbreviation</u>	<u>Word</u>	<u>Abbreviation</u>
Accounting	ACCTG	Exchange	XCHG
Accounts	ACCTS	Federal	FED
Administration	ADMIN	Federal Credit Union	FCU
Air Force Base	AFB	Finance	FIN
Apartment	APT	Financial	FINCL
American	AMER	First National Bank	FNB
Associates	ASSOC	Foreign	FORGN
Association	ASSN	General	GEN
Avenue	AVE	Government	GOVT
Bank	BK	Group	GRP
Banking	BKG	Headquarters	HDQTRS
Branch	BR	Highway	HWY
Broadway	BWY	Hospital	HOSP
Building	BLDG	Incorporated	INC
Casualty	CASLTY	Industry(ies)	INDUST
Center	CTR	Information	INFO
Certificate	CERT	Institute, Institution	INST
Certificate of Deposit	CD	Insurance	INS
Circle	CRL	International	INT
Commerce	CMRC	Lane	LN
Commission	COMM	Limited	LTD
Company	CO	Management	MGMT
Comptroller	COMPT	Manufacturers	MFTRS
Consolidated	CONS	Manufacturing	MFG
Construction	CONST	Market	MKT
Corporation	CORP	Municipal	MUN
Cooperative	COOP	Mutual	UTL
County	CNTY	National	NAT
Court	CT	Northeast	NE
Credit Union	CU	Northern, North	NO
Department	DEPT	Northwest	NW
Deposit	DEP	Organization	ORG
Distributor, Distributing	DISTB	Park	PK
District	DIST	Place	PL
Division	DIV	Plaza	PLZ
Drive	DR	Post Office	PO
East, Eastern	E	Railroad	RR
Electrical	ELEC	Realty	RLTY
		Road	RD

<u>Word</u>	<u>Abbreviation</u>	<u>Word</u>	<u>Abbreviation</u>
Room	RM	Trust	TR
Route	RT	University	UNIV
Savings	SAV	US Air Force	USAF
Savings and Loan	SL	US Army	USA
Security	SEC	US Coast Guard	USCG
Service	SERV	US Marine Corps	USMC
Southeast	SE	US Navy	USN
Southern, South	SO	Village	VLGE
Southwest	SW	Western, West	W
Street	ST		
Suite	STE		
Transportation	TRANS		

Note: All abbreviations listed may be changed from singular to plural, and vice versa, by the addition or deletion of the letter 's'.

Delete any titles, prefixes, suffixes or other descriptive information such as Mr., Mrs., Dr., Reverend, Partner, or Trustee. Do not delete suffixes that distinguish family members such as Jr., Sr., III or IV. Suffixes should be edited to follow the middle initial.

Delete all punctuation (e.g., Jr. would be submitted as Jr).

Spanish surnames. Care must be taken in formatting Spanish surnames as the names are usually written in the order of first name, father's last name, and then mother's last name, i.e., Juan Vega Santiago. The father's last name, Vega would be used as the last name; however, both last names should be retained. Example: Vega/Santiago/Juan.

Place a slash ("/") before each name (including suffixes) except the first surname (e.g., White/Elizabeth/A) but not between compound names such as "Van Gogh".

If only the surname of an individual is present, then place a slash after it (e.g., Jones/).

If a non-individual is listed, do not enter slashes between names. Delete the word, "The" whenever it appears.

If an organization has a separate "doing business as" (DBA) name, enter the organization's legal and business names (e.g., "Smith Enterprises, Inc., DBA Smith Casino Tours").

Country Code List

Alabama	AL
Alaska	AK
APO/FPO (ZIP 090xx - 098xx)	AE
APO/FPO (ZIP 340xx)	AA
APO/FPO (ZIP 962xx - 966xx)	AP
Arizona	AZ
Arkansas	AR
California	CA
Colorado	CO
Connecticut	CT
Delaware	DE
District of Columbia	DC
Florida	FL
Georgia	GA
Hawaii	HI
Idaho	ID
Illinois	IL
Indiana	IN
Iowa	IA
Kansas	KS
Kentucky	KY
Louisiana	LA
Maine	ME
Maryland	MD
Massachusetts	MA
Michigan	MI
Minnesota	MN
Mississippi	MS
Missouri	MO
Montana	MT
Nebraska	NE
Nevada	NV
New Hampshire	NH
New Jersey	NJ
New Mexico	NM
New York	NY
North Carolina	NC
North Dakota	ND
Ohio	OH
Oklahoma	OK
Oregon	OR
Pennsylvania	PA
Rhode Island	RI
South Carolina	SC

U.S. States

South Dakota	SD
Tennessee	TN
Texas	TX
Unknown, Other State	UN
Utah	UT
Vermont	VT
Virginia	VA
Washington	WA
West Virginia	WV
Wisconsin	WI
Wyoming	WY

U.S. Territories

American Samoa	AS
Guam	GU
Marshall Islands	MH
Micronesia, Federated States	FM
Northern Mariana Islands	MP
Palau	PW
Puerto Rico (USPS)	PR
U.S. Virgin Islands	VI

Canada States/Territories

Alberta	AB
British Columbia	BC
Manitoba	MB
New Brunswick	NB
Newfoundland and Labrador	NF
Northwest Territory	NT
Nova Scotia	NS
Nunavut	NU
Ontario	ON
Prince Edward Island	PE
Quebec	QC
Saskatchewan	SK
Yukon Territory	YT

Mexico States/Territories

Aguascalientes	AG
Baja, California (Territory North)	BA
Baja, California (Territory South)	BJ
Campeche	CE
Chiapas	CI
Chihuahua	CH

Ecuador	EC	Isle of Man	IM
Egypt	EG	Israel	IS
El Salvador	ES	Italy	IT
England	UK	Ivory Coast (Cote d'Ivoire)	IV
Equatorial Guinea	EK	Jamaica	JM
Eritrea	ER	Jan Mayen	JN
Estonia	EN	Japan	JA
Ethiopia	ET	Jersey	JE
Europa Island	EU	Jordan	JO
Falkland Islands (Islas Malvinas)	FA	Juan De Nova Island	JU
Faroe Island	FO	Kazakhstan	KZ
Fiji	FJ	Kenya	KE
Finland	FI	Kiribati	KR
France	FR	Korea, North	KN
French Guiana	FG	Korea, South	KS
French Polynesia	FP	Kuwait	KU
French Southern & Antarctic	FS	Kyrgyzstan	KG
Gabon	GB	Laos	LA
Gambia	GA	Latvia	LG
Gaza Strip	GZ	Lebanon	LE
Georgia	GG	Lesotho	LT
Germany	GM	Liberia	LI
Ghana	GH	Libya	LY
Gibraltar	GI	Liechtenstein	LS
Glorioso Islands	GO	Lithuania	LH
Golan Heights	SY	Luxembourg	LU
Great Britain	UK	Macao	MC
Greece	GR	Macedonia	MK
Greenland	GL	Madagascar	MA
Grenada	GJ	Malawi	MI
Guadeloupe	GP	Malaysia	MY
Guatemala	GT	Maldives	MV
Guernsey	GK	Mali	ML
Guinea	GV	Malta	MT
Guinea-Bissau	PU	Marshall Islands	RM
Guyana	GY	Martinique	MB
Haiti	HA	Mauritania	MR
Heard & McDonald Islands	HM	Mauritius	MP
Holy See (Vatican City)	VT	Mayotte	MF
Honduras	HO	Mexico	MX
Hong Kong	HK	Moldova	MD
Hungary	HU	Monaco	MN
Iceland	IC	Mongolia	MG
India	IN	Montserrat	MH
Indonesia	ID	Morocco	MO
Iran	IR	Mozambique	MZ
Iraq	IZ	Namibia	WA
Ireland	EI	Nauru	NR

Navassa Island	BQ	South Africa	SF
Nepal	NP	S. Georgia & S. Sandwich Islands	SX
Netherlands	NL	Spain	SP
Netherlands (Antilles)	NT	Spratley Islands	PG
New Caledonia	NC	Sri Lanka (Ceylon)	CE
New Zealand	NZ	Sudan	SU
Nicaragua	NU	Suriname	NS
Niger	NG	Svalbard	SV
Nigeria	NI	Swaziland	WZ
Niue	NE	Sweden	SW
Norfolk Island	NF	Switzerland	SZ
Norway	NO	Syria	SY
Oman (Muscat)	MU	Taiwan	TW
Pakistan	PK	Tajikistan	TI
Palau	PS	Tanzania	TZ
Panama	PM	Thailand	TH
Papua-New Guinea	PP	Togo	TO
Paracel Islands	PF	Tokelau Islands	TL
Paraguay	PA	Tonga	TN
Peru	PE	Trinidad & Tobago	TD
Philippines	RP	Tromelin Island	TE
Pitcairn Island	PC	Tunisia	TS
Poland	PL	Turkey	TU
Portugal	PO	Turkmenistan	TX
Qatar	QA	Turks & Caicos Islands	TK
Reunion	RE	Tuvalu	TV
Romania	RO	Uganda	UG
Russia	RS	Ukraine	UP
Rwanda	RW	United Arab Emirates	AE
Saint Helena	SH	United Kingdom	UK
Saint Kitts & Nevis	SC	United States of America	US
Saint Lucia	ST	Uruguay	UY
Saint Pierre & Miquelon	SB	Uzbekistan	UZ
Saint Vincent & Grenadines	VC	Vanuatu	NH
Samoa	WS	Vatican City	VT
San Marino	SM	Venezuela	VE
Sao Tome & Principe	TP	Vietnam	NM
Saudi Arabia	SA	Virgin Islands (British)	VI
Scotland	UK	Wales	UK
Senegal	SG	Wallis & Futuna	WF
Serbia & Montenegro	YI	West Bank	WB
Seychelles	SE	Western Sahara	WI
Sierre Leone	SL	Yemen	YM
Singapore	SN	Zambia	ZA
Slovakia	LO	Zimbabwe	ZI
Slovenia	SI	Unknown	XX
Solomon Island	BP	Various (more than one)	XV
Somalia	SO		

ZIP Code Validation Table

<u>State Code</u>	<u>State</u>	<u>Valid Range</u>	<u>State Code</u>	<u>State</u>	<u>Valid Range</u>
AL	Alabama	350 – 369	NM	New Mexico	870 – 884
AK	Alaska	995 – 999	NY	New York	005
AS	American Samoa	967			063
AZ	Arizona	850 – 865			090 – 149
AR	Arkansas	716 – 729	NC	North Carolina	269 – 289
		755	ND	North Dakota	580 – 588
CA	California	900 – 966	MP	Northern Mariana Islands	969
CO	Colorado	800 – 816	OH	Ohio	430 – 459
CT	Connecticut	060 – 069	OK	Oklahoma	730 – 749
DE	Delaware	197 – 199	OR	Oregon	970 – 979
DC	District of Columbia	200 – 205	PW	Palau Island	969
FM	Federated States of Micronesia	969	PA	Pennsylvania	150 – 196
FL	Florida	320 – 349	PR	Puerto Rico	006 – 009
GA	Georgia	300 – 319	RI	Rhode Island	028 – 029
		398 – 399	SC	South Carolina	290 – 299
GU	Guam	969	SD	South Dakota	570 – 577
HI	Hawaii	967 – 968	TN	Tennessee	370 – 385
ID	Idaho	832 – 838	TX	Texas	750 – 799
IL	Illinois	600 – 629			885
IN	Indiana	460 – 479	UT	Utah	840 – 847
IA	Iowa	500 – 528	VT	Vermont	050 – 059
KS	Kansas	660 – 679	VA	Virginia	201
KY	Kentucky	400 – 427			220 – 246
LA	Louisiana	700 – 714	VI	Virgin Islands	008
ME	Maine	039 – 049	WA	Washington	980 – 994
MH	Marshall Islands	969	WI	Wisconsin	530 – 549
MD	Maryland	206 – 219	WV	West Virginia	247 – 268
MA	Massachusetts	010 – 027	WY	Wyoming	820 – 831
		055			
MI	Michigan	480 – 499		Military Post Offices	
MN	Minnesota	550 – 567	AA	Armed Forces Americas (Except Canada)	340
MS	Mississippi	386 – 397	AE	Armed Forces Africa, Canada Europe, Middle East	090 – 098
MO	Missouri	630 – 658	AP	Armed Forces Pacific	962 – 966
MT	Montana	590 – 599			
NE	Nebraska	680 – 693			
NV	Nevada	889 – 898			
NH	New Hampshire	030 – 038			
NJ	New Jersey	070 – 089			

Error Code List

Error Code

Error Source

F00	The Record Identification is invalid. The Transmittal Control Code, Employer Identification Code (TIN/EIN) and Location Code do not match the DCC files.
F01	Non-numeric record counts were reported on the summary record.
F02	The number of records reported does not match the computer count for the Record Type 2A or Record Type 2A is not the second record on the file.
F16	There is no Transmitter (1A) Record on the file.
F19	The Location Summary Record Amounts do not equal the total of the Transaction Amounts.
F20	The File Summary Record Amounts do not equal the total of the Transaction Amounts.
F25	The number of records reported does not match the computer count for the Transaction Summary Record Type 2B or Record Type 2B is not the third record on the file.
F28	The number of records reported does not match the computer count for the Customer (Part 1, Section A) (2C) Record.
F29	The number of records reported does not match the computer count for the Agent (Part 1, Section B) (2D) Record.
F30	There is no Location Summary (8A) Record on the file.
F31	There is no Casino Summary (8B) Record on the file.
F32	There is no File Summary (8Z) Record on the file.

F33 The record was submitted as an Adjustment Record with a DCN but no original CTRC record was found.

F34 An invalid record type was present on the submitted file.

Transmitter Record

T01 The Name in the Transmitter (1A) Record is blank.

T02 The Address in the Transmitter (1A) Record is blank.

T03 The City in the Transmitter (1A) Record is blank.

T04 The State in the Transmitter Record (1A) is blank.

T05 The Zip Code in the Transmitter (1A) Record is blank.

T06 The Area Code and/or Telephone Number in the Transmitter (1A) Record is blank.

T07 The Contact Name in the Transmitter (1A) Record is blank.

T08 The Transmitter Control Code in the Transmitter (1A) Record is blank or invalid.

T09 The Transmitter EIN in the Transmitter (1A) Record is blank or invalid.

T10 The Coverage beginning date in the Transmitter (1A) Record is blank or invalid.

T11 The Coverage ending date in the Transmitter (1A) Record is blank or invalid.

T12 The Coverage ending date is blank or more than 25 days from the coverage beginning date in the Transmitter (1A) Record.

Location Header Record

L01	The Location Code in the Location Header (2A) Record is blank or invalid.
L02	The Resolution code in the Location Header (2A) Record is missing or invalid.
L03	The Casino Trade Name and/or Legal Name in the Location Header (2A) Record is blank.
L04	The Casino Address in the Location Header (2A) Record is blank.
L05	The Casino City in the Location Header (2A) Record is blank.
L06	The Casino State in the Location Header (2A) Record is blank.
L07	The Casino Zip Code in the Location Header (2A) Record is blank.
L08	The EIN in the Location Header (2A) Record is blank.

Error Codes – Returned on the Acknowledgment “3R” Record

C01	<p>The Name in the Agent (2D) Record is invalid due to one of the following reasons:</p> <ul style="list-style-type: none"> a. The Name equals spaces, zeros or low values. b. The Name was not keyed in the proper format. c. The Name contains no slashes.
C02	<p>The Address in the Agent (2D) Record is blank or incomplete due to one of the following reason:</p> <ul style="list-style-type: none"> a. The Street Address is blank. b. The City is blank. c. The State is blank or invalid if equal to the U.S., Canada or Mexico. d. The Country is not a standard abbreviation. e. The Zip Code is blank, zeroes, or invalid if the country is equal to the U.S.
C03	The Method of Identification in the Agent (2D) Record is not a valid code or is incomplete.

- C04 The Date of Birth in the Agent (2D) Record is blank or invalid.
- C07 The Name/ID is incomplete in the Agent (2D) Record.
- C11 The name in the Customer (2C) Record is invalid.
- C12 The Address in the Customer (2C) Record is blank or incomplete due to one of the following reasons:
- a. The Street address is blank.
 - b. The City is blank.
 - c. The State is blank or it contains an invalid abbreviation if the country is equal to the U.S., Canada or Mexico.
 - d. The Country Code is not a valid country abbreviation.
 - e. The Zip Code is blank, zeroes, or invalid if the country is equal to the U.S.
- C13 The Method of Identification in the Customer (2C) Record is not a valid code or is incomplete.
- C14 The Date of Birth in the Customer (2C) Record is blank or invalid.
- C16 The Customer's Account Number is missing in the Customer (2C) Record.
- C20 The Type or Transaction codes are missing or invalid in the Transaction Summary (2B) Record. A minimum of one of the following Type of Transactions must be present:
- a. A-H Transaction Cash In Codes
 - b. I-Q Transaction Cash Out Codes
- C22 The Transaction Total Amounts of currency is invalid in the Transaction Summary (2B) Record due to one of the following reasons:
- a. The Amount is blank.
 - b. The Amount is non-numeric.
- C24 The Transaction Date is blank or invalid in the Transaction Summary (2B) Record due to one of the following reasons:
- a. The Date is not numeric.

- b. The Month is not a valid code between 01 and 12.
- c. The Day is not a valid code between 01 and 31.
- d. The Date is not less than the current date.

C26 The SSN (TIN) in the Agent (2D) Record is invalid, or the SSN is equal to spaces, zeros or is non-numeric.

C27 The SSN does not match our file as a valid SSN for the Name shown in the Agent (2D) Record.

C28 The Identifying EIN/SSN in the Customer (2C) Record is an invalid number, contains all zeroes or is equal to all 9's.

C29 The Name in the Customer (2C) Record does not match the EIN/SSN in the DCC files.

C32 The Approving Official's Title or Preparer's Name or Contact Name in the Location Header (2A) Record is missing.

C33 The Approval Date in the Location Header (2A) Record is invalid due to one of the following reasons:

- a. The Date is blank or not numeric.
- b. The Month is not a valid number between 01 and 12.
- c. The Day is not a valid number between 01 and 31.
- d. The Date is not less than the current date.

C36 The Foreign Currency Country Code in the Transaction Summary (2B) Record is blank or invalid.

FAQs

Q.	What code do we use for a location code in records?
A.	DCC will assign a location code to every casino location filing magnetically. Although most casinos have only one location per EIN (TIN), some casinos have multiple locations.
Q.	If an error is identified in the Location "2A" records, will DCC still validate subsequent Location records?
A.	Yes, if there are other location records we will continue validation. However, each location within the erroneous group will contain the location error. This entire group must be corrected and resubmitted.
Q.	If we must begin each file with a Transaction Sequence Number starting with 00001 for each "2B" record, how are we to match the acknowledgment records with the right submission and sequence?
A.	In the Transmitter Record "1A", the coverage beginning or ending dates should be considered with the sequence numbers so that each submission is unique. This record will be returned to you on the acknowledgment file for this purpose.
Q.	During the acceptance test, are you planning to return an acknowledgment file?
A.	Yes, we will acknowledge your test file but do not require that it be corrected and resubmitted if it contains errors. We do recommend that you use it to test your internal error programs.
Q.	On the Declaration Statement under Test Submission, Item 2 there is a blank for a test submission date. How will this affect my status if I do not make this date?
A.	This does not affect your status at all; it is a planning date for DCC so we can estimate monthly input volumes. If the estimated date passes, we will contact you for your next best estimate.
Q.	Suppose I apply to file magnetically and for some reason wish to drop out of the program, can I do so?

A.	Yes. We want to be able to address the community's concerns. Therefore, if you decide to drop out, you must notify the Magnetic Filing Coordinator in writing of the date you wish to resume paper filing, giving the reasons for dropping out. Once this written notice is sent, you can immediately resume paper filing.
Q.	What can I do if my organization/casino takes exception to certain phrases in the Declaration Statement, which prevents us from participating?
A.	If the agreement contains phrases or statements, which prevent your organization/casino from filing, line through the phrase and submit the proposed changes to the CTRC Magnetic Media Coordinator for consideration.
Q.	The Amount of Transaction on the "2B" Record is in whole dollars. If I have a transaction for \$10,000.01, which is reportable, will you reject this transaction?
A.	We will not reject your transactions nor note the field in error. Any transaction amount can be reported via magnetic media as long as the amount is greater than zero.
Q.	The Standard Abbreviation Table in Attachment 2 is difficult to enforce. How exact do we have to be?
A.	This table is preferred, not mandatory.
Q.	Are the Standard Country and State Abbreviations mandatory?
A.	Yes. This table is mandatory.
Q.	In the general specifications, is the record format fixed or variable length?
A.	The record format and the block size are fixed lengths.