

**SPECIFICATIONS**

**FOR MAGNETIC MEDIA FILING**

**OF**

**SUSPICIOUS ACTIVITY REPORT BY**  
**MONEY SERVICES BUSINESS**  
**(SAR-MSB)**

**FORM TD F 90-22.56**

**July 2004**

**DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE**

These Specifications for Magnetic Media Filing of Suspicious Activity Reports By Money Services Business (Form TD F 90-22.56) were developed under the sponsorship of the following:

**Department of the Treasury**

Director, Financial Crimes Enforcement Network

**Internal Revenue Service**

Director, Detroit Computing Center

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## Purpose

The purpose of this specification is to provide the requirements and conditions for filing Suspicious Activity Report by Money Services Business (SAR-MSB), Treasury Form TDF 90-22.56 on magnetic media.

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

These specifications apply to the program for the filing of SAR-MSB submitted on magnetic cartridge or diskette.

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 every two to four weeks (as required)
- 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 the purpose of this specification, the FILER is the organization responsible for filing the SAR-MSB. Filers are required to complete an Application for Magnetic Media Reporting (Form DCC-4419). A copy of this form can be found in the attachments. Requests for additional

information or forms related to magnetic media processing should be addressed to the SAR-MSB Magnetic Media Coordinator at DCC.

The application should be filed with DCC as soon as possible after receipt of these specifications. DCC will act on the application and notify the applicant of authorization to file. Magnetic media may not be filed with DCC until the applicant has received approval.

Approval of applications to file the SAR-MSB on magnetic media will be contingent upon the applicant satisfactorily passing an acceptance test.

## Filing of Magnetic Media Reports

### General

DCC will advise magnetic filers when they may begin to file using magnetic media. This will be as early as possible after receipt of the application. Until this notification has been issued, magnetic media will not be accepted.

If files are unreadable due to format errors, etc., we will contact the transmitter by telephone to send a replacement for the file.

Any filer whose error rates remain 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 SAR-MSB data and all original supporting documentation or business record equivalent for five years from the date of the suspicious activity report. All supporting documentation must be made available to appropriate authorities upon request.**

## Transmittal Process

Magnetic media files and transmittals are submitted to DCC. Form(s) DCC-4804 and DCC-4802 (for multiple filers), must accompany magnetic submissions (see attachments). **DO NOT MAIL THE MEDIA AND THE TRANSMITTAL SEPARATELY.** DCC encourages the use of a substitute computer generated Form 4804 and/or Form 4802, which includes all information requested on the actual form. Substitute forms should follow the format of the transmittal form.

All submitted magnetic media files, must include the following:

- A Form 4804 or computer generated substitute.
- The magnetic media with an external identifying label.
- A statement on the outside of the shipping container that says 'Attn: Tape Library Deliver unopened: SAR-MSB Magnetic Media. 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 the SAR-MSB on magnetic media that an individual or organization is legally required to report.

## Data Sequencing and Validation Criteria

The following data controls must be followed or the SAR magnetic media will be rejected. The data records must be in the following sequence:

- Transmitter (1A)

There can only be one of this record type and it must be the first record on the file.

- Parent Reporting Business Information (2A)

There can be more than one of this record type depending on the number of different financial institutions which are included on the file. This record type will immediately precede all records that relate to the financial institution.

- Transaction Location Information (2B)

There can be more than one of this record type depending on the number of transaction locations which are being reported. One of these records will immediately precede all SAR-MSB records for the Transaction.

- Multiple Transaction Location Information (2C) Multiple locations being reported for the same SAR-MSB. There can be more than one of this record type depending on the number of transaction locations which are being reported.

- Suspicious Activity (3A)

There can be more than one of this record type on the file depending on the number of suspicious activities being reported for a financial institution Transaction.

- Subject Information (4A)

There can be more than one of this record type dependent on the number of persons involved in this suspicious activity.

- Serial Number Information (5A)

There can be more than one of this record type depending on the number of Serial numbers.

- Money Transfer Number Information (6A)

There can be more than one of this

record type depending on the number of Money transfer numbers.

- Narrative Description (7A)

There can be more than one of this record type depending on the length of the explanation given for the suspicious activity.

- Transaction Location Summary (9A)

There must be one of these records for each 2B record of a reporting business being reported. It is to be the last record associated with the 2B record.

- Reporting Business Summary (9B)

There must be one of these records for each reporting business being reported. It is to be the last record associated with the reporting business and will follow the 9A Summary Record for the last transaction location reported.

- File Summary (9Z)

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

## Acceptance Procedures

The Filer will be asked to provide a test file to DCC that is consistent with these requirements.

Final acceptance of the filer's test file will be as follows:

- The test data will consist of a set of reports, containing the data normally supplied by the filer.
- The test file should contain between 25 and 50 reports.
- Upon receipt of the filer's test file DCC will test, review and provide feedback to the filer within ten working days.

- If 95% of the filer's test returns are error-free and the file is correctly formatted, final acceptance will be issued by DCC allowing the filer to participate in the Magnetic Media Program.
- When a test file is found to be incorrectly formatted or more than 5% of the filer's test returns contain errors, DCC will identify to the filer the type of errors encountered. A new set of test data should be forwarded to DCC. The filer is responsible for correcting their software to eliminate the identified errors and any related errors.
- If, after three attempts, the filer's test file continues to be unacceptable, the filer must confer with the SAR-MSB Magnetic Media Coordinator and develop an acceptable plan for correcting deficiencies before any further tests are allowed.
- Filers granted acceptance will be notified.
- DCC will issue a Transmitter Control Code (TCC) to be used with all submissions of the SAR-MSB.

## Filing Dates

Filing using magnetic media will be on a continuous basis. Magnetic media must be prepared and submitted to DCC for processing no later than 30 calendar days after the date of initial detection of facts that may constitute a basis for filing a SAR-MSB. If no Subject was identified on the date of detection of the incident requiring the filing, a Money Service Business may delay filing a SAR-MSB for an additional 30 calendar days to identify a Subject. In no case shall reporting be delayed more than 60 calendar days after the date of initial detection of a reportable transaction.

## Receipt and Acknowledgment of Magnetic Media Files

SAR-MSB **will not be acknowledged** to the transmitter. Cartridges will be returned **with**

the original data removed.

## Filing Corrected Reports

If a SAR-MSB was prepared and submitted on magnetic media, must be corrected, you must file a complete corrected SAR-MSB as soon as possible. **All fields must be completed with the correct information, NOT JUST THE DATA FIELDS NEEDING CORRECTION.** Corrected SAR-MSB will be accepted on magnetic media. **Corrected magnetically filed SAR-MSB must include the appropriate code indicator.**

## Magnetic Media Coordinator Contacts

Direct all requests for Magnetic Media related publications or information to the following address:

**SAR-MSB Magnetic Media  
Coordinator  
Internal Revenue Service  
985 Michigan Ave.  
Detroit, MI 48226-2458  
Phone Number (313) 234-2011  
Fax Number (313) 234-1614**

## General Specifications

### Cartridge Specifications

These specifications define the file characteristics acceptable for magnetic media reporting. These characteristics must be followed unless specifically authorized by the DCC in writing.

All records should be fixed in length to the size specified for each record type. Usually DCC will be able to process a compatible cartridge file. The standard file characteristics are 18 or 36 track cartridges, EBCDIC, odd parity, and **standard labels**. The standard data set name to be used on cartridges is **ISARP.CI047.SARMMAG**.

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

- The transmitters name
- Date of preparation
- **A reel number assigned by the preparer which must match the reel number on the internal label (6 alpha numeric characters)**
- Number of reels in file.

**Note:** To allow better control processing of your files, uniquely numbered cartridge numbers must be transmitted when using multiple cartridges.

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.

## Diskette Specifications

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

All records should be fixed in length to the size specified for each record type.

Usually DCC will be able to process a compatible diskette file. The standard file characteristic is 3.5 inch diskette double sided/double density or double sided/high density. The standard data set name to be used on files is **SARMMAG**.

All diskettes must be generated using MS-DOS on an IBM compatible personal computer in ASCII mode. All alphabetic characters must be in **upper case only**.

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

- Contact Person and Telephone Number
- Date of preparation
- Diskette sequence number (i.e., 01 of 03)
- Coverage beginning and ending dates
- Number of SAR-MSB reports

The diskette records defined in these specifications should be unblocked 502 character records. The industry standard record delimiter for diskette data records is the two byte combination of 0D0A hexadecimal characters (carriage return, line feed).

**Note: Diskettes will not be returned.**

## **Overview of File**

This file is an alternative to filing SAR-MSB on paper. If you file a transaction on MAGNETIC MEDIA DO NOT FILE a paper SAR-MSB for the same SAR-MSB.

All initial, corrected and late report filings can be submitted on magnetic media.

A SAR-MSB which has missing or incomplete information is considered an original (initial) filing. When information becomes available it should be replaced on magnetic media, include the corrected 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**.

Money amounts **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., \$10,000.01 should be reported as \$10001).

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

**All Alphabetic characters must be in upper case.**

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

Account numbers must NOT contain leading zeroes unless they are part of the actual account number.

All entries must be **left justified and space filled**.

**Do not include lower case characters in the file.**

**All 'Filler' fields should be space filled. Do not use low values.**

## Record Types (Input)

### ***Transmitter (1A) Record - Required***

The first record on each file is to be the transmitter record. It will contain information identifying the transmitter (person or organization handling the data accumulation and formatting). There will be only one Transmitter Record on each magnetic media file. Include the following data elements in this record:

<b>Field Pos.</b>	<b>Field Name</b>	<b>Length</b>	<b>Description and Remark</b>
1 – 2	Record Type	2	Required. Enter `1A`.
3 – 37	Transmitter Name	35	Required. Enter the name of individual or organization who is transmitting the transactions on this file.
38 – 67	Transmitter Address	30	Required. Enter the street address of the transmitter.
68 – 92	Transmitter City	25	Required. Enter the city of the transmitter.
93 – 94	Transmitter State	2	Required. Enter the transmitter state in abbreviated form. Use the country and state standard abbreviations in the attachments.
95 – 103	Transmitter Zip Code	9	Required. Enter the transmitter Zip Code.
104 – 106	Transmitter Area Code	3	Required. Enter the transmitter area code.
107 – 113	Transmitter	7	Required. Enter the telephone number.
114 – 148	Transmitter	35	Required. Enter the name of an official contact for the transmitter.
149 – 157	Transmitter EIN	9	Required. Must be the valid nine-digit number assigned to the transmitter by IRS. Do not enter hyphens, slashes, ALPHA characters, all 9's, or all zeroes.

<b>Field Pos.</b>	<b>Field Name</b>	<b>Length</b>	<b>Description and Remark</b>
158 –165	Transaction Coverage Beginning Date	8	Required. This will be the date of the earliest original on the file. It is to be a numeric 8-digit field in format century, year, month, day.
166 –173	Transaction Coverage Ending Date	8	Required. This will be the date of the latest original transaction on the file. It is to be a numeric 8-digit field in f century, year, month, day format.
174 -181	Transmitter Control Code	8	Required. This is the code assigned by the IRS. This code is also entered on Form 4804.
182 –491	Filler	310	
492	Format Indicator	1	Required. Enter "1".
493 – 502	User Field	10	

## ***Parent Reporting Business Headquarters (2A) Record - Required***

This record identifies information regarding the Reporting Business Headquarters. The number of Business Headquarters (Parent) records will depend on the number of different Reporting Business Headquarters that are included on the file. Include the following data elements in this record:

<b>Field Pos</b>	<b>Field Name</b>	<b>Length</b>	<b>Description and Remarks</b>
1 – 2	Record Type	2	Required. Enter '2A'.
3 – 37	Reporting Business Name	35	Required. Enter the Reporting Businesses full legal name.
38 – 72	Reporting Business Doing Business As Name	35	Required. Enter the Reporting Businesses Doing Business As name.
73--102	Reporting Business Address	30	Required. Enter the address of the Reporting Business. Do not abbreviate.
103--127	Reporting Business City	25	Required. Enter the city where the Reporting Business is located.
128 –129	Reporting Business State	2	Required. Enter the two (2) character state code from the standard state code abbreviations in the attachments.
130 –138	Reporting Business Zip Code	9	Required. Enter the zip code for the Reporting Business.
139 –140	Reporting Business Country	2	Required. Enter the Reporting Business Country, if other than U.S.
141 –149	Reporting Business EIN	9	Required. Enter the EIN of the Parent Financial Reporting Business.
150 –159	Reporting Business Phone number	10	Required. Enter the Phone number of the reporting business Including the area code.
160 –492	Filler	333	
493 –502	User Field	10	

## **Transaction Location Information (2B) Record - Required**

This record identifies information on the Transaction Location Information where the activity occurred. The number of Transaction Location (Transaction) records is dependent on the number of different Transaction Locations being reported on the magnetic media file. There must be at least one 2B record. Include the following data elements in these records:

<b>Field Pos</b>	<b>Field Name</b>	<b>Length</b>	<b>Description and Remarks</b>
1 – 2	Record Type	2	Required. Enter '2B'.
3 – 7	Transaction Location Transaction Code	5	Required, Enter a unique number for the different Locations submitting SARs . This is to be right justified, and zero filled.
8	Multiple locations	1	Required. Enter 'Y' if multiple locations were involved.
9	Type of Business location	1	Required, A = Selling business location B = Paying business location C = Both
10 – 44	Transaction Location Legal Name	35	Required. Enter the Legal name of business
45 – 79	Doing Business As Name	35	Required. Enter the Doing business as name.
80 --109	Transaction Location Permanent Address	30	Required. Enter the permanent address of the Business.
110 – 134	Transaction Location City	25	Required. Enter the Transaction office city.
135 – 136	Transaction Location State	2	Required. Enter the two (2) character state code from the standard state code abbreviations in the attachments.
137 – 145	Transaction Location Zip Code	9	Required. Enter the zip code for the Transaction location.
146 – 147	Transaction Location Country Code	2	From the attachment, select the appropriate country code.
148 – 156	Reporting Business EIN	9	Required. Enter the EIN of the Parent Financial Reporting Business.
157 – 166	Reporting Business Phone number	10	Required. Enter the Phone number of the reporting business including the area code.
167 – 492	Filler	326	
493 – 502	User Field	10	

## **Transaction Location Information (2C) Record Multiple Selling and/or paying Business Locations**

This record identifies information on the Transaction Location Information where the activity occurred. The number of Transaction Location (Transaction) records is dependent on the number of different Transaction Locations being reported on the magnetic media file. If the reported activity occurred at multiple selling and/or business locations provide the information including the following data elements in these records:

<b>Field Pos</b>	<b>Field Name</b>	<b>Length</b>	<b>Description and Remarks</b>
1 – 2	Record Type	2	Required. Enter '2C'.
3 – 7	Transaction Location Transaction Code	5	Required, Enter a unique number for the different Locations submitting SARs . This is to be right justified, and zero filled.
8	Multiple Transactions	1	Required. Enter 'Y' if multiple Transactions were involved.
9	Type of Business location	1	Required, A = Selling business location B = Paying business location C = Both
10 – 44	Transaction Location Legal Name	35	Required. Enter the Legal name of business
45 – 79	Doing Business As Name	35	Required. Enter the Doing business as name.
80--109	Transaction Location Permanent Address	30	Required. Enter the permanent address of the Business.
110 – 134	Transaction Location City	25	Required. Enter the Transaction office city.
135 – 136	Transaction Location State	2	Required. Enter the two (2) character state code from the standard state code abbreviations in the attachments.
137 – 145	Transaction Location Zip Code	9	Required. Enter the zip code for the Transaction location.
146 – 147	Transaction Location Country Code	2	From the attachment, select the appropriate country code.
148 – 156	Reporting Business EIN	9	Required. Enter the EIN of the Parent Financial Reporting Business.
157 – 166	Reporting Business Phone number	10	Required. Enter the Phone number of the reporting business Including the area code.
167 – 492	Filler	326	
493 – 502	User Field	10	

## ***Suspicious Activity Report (3A) Record - Required***

This record identifies and describes the suspicious activity report. It occurs one time per suspicious activity. Include the following data elements in this record:

<b>Field Pos</b>	<b>Field Name</b>	<b>Length</b>	<b>Description and Remarks</b>
1 – 2	Record Type	2	Required. Enter '3A'.
3 – 7	Transaction Code	5	Required. Enter the Transaction Number for the submitting Transaction. This is to be right justified, and zero filled.
8 – 12	Transaction Sequence	5	Required. Enter a sequential number starting with 0001 and Number increment by 1 for each suspicious transaction (3A) record.
13	Corrects Report Indicator	1	Required. Enter “X” if this report corrects a prior Report.
14 – 22	Type of Filer	9	Enter the letter for all that apply: A = Issuer of money order B = Redeemer of money order C = Seller of money order D = Issuer of traveler check E = Redeemer of traveler check F = Seller of traveler check G = Money transmitter H = US Postal Service I = Other
23 – 62	Type of Filer Other	40	If other Type of filer, describe the Type of filer.
63 – 66	Financial Services Involved	4	Enter all that apply: A = money order B = traveler’s check C = money transfer D = other
67 – 106	Other Financial Service Involved	40	If other financial service involved describe the service involved.
107 – 114	From Violation Date	8	Enter the violation date or beginning violation date (if including a range of violation dates). CCYYMMDD format.
115--122	To Violation date	8	Enter the ending date of violation (if including a range of violation date) or leave blank. CCYYMMDD format.
123 –132	Violation Amount	10	Enter the total dollar amount involved in suspicious activity (must be numeric).
133 –136	Category of Suspicious Activity	4	Enter all that apply: A = Money laundering B = Structuring C = Terrorist financing D = Other

### **Suspicious Activity (3A) Record – Continued**

<b>Field Pos</b>	<b>Field Name</b>	<b>Length</b>	<b>Description and Remarks</b>
137 – 176	Other category of Suspicious Activity	40	If other category of suspicious activity selected, enter other description.
177	Character of Suspicious Activity	1	A = Unusual use of money order/traveler check B = Unusual use of money transfer C = Both
178 – 186	Character of Suspicious Activity continued	9	Enter all the numbers that apply. 1 = Alters transaction to avoid completion of fund transfer 2 = Alters transaction to avoid filing a CTR form 3 = Comes in frequently and purchases less than \$3,000 4 = Changes spelling or arrangement of name 5 = Individual using multiple or false identification 6 = Two or more individuals using the same identification 7 = Two or more individuals working together 8 = Same individual using multiple locations over a short period 9 = Offers a bribe in form of tip/gratuity
187 – 196	Enforcement Agency Contacted	10	Enter all the letter that apply. A = DEA B = FBI C = IRS D = US Customs E = US Postal Inspection F = US Secret Service G = Other Federal H = State Law Enforcement I = Local Law Enforcement J = Tribal Law Enforcement
197 – 231	Enforcement Agency Name	35	Enter the name of the Law Enforcement Agency already contacted, if G, H, I or J is checked above.
232 – 266	Enforcement Agency Contact Person	35	Enter the contact person from the Enforcement Agency contacted.
267 – 276	Enforcement Agency Contact Phone Number	10	Enter the phone number including area code of the contact person.
277 – 284	Enforcement Contact Date	8	Enter the date the Law Enforcement Agency was contacted. CCYYMMDD format.
285 – 319	Contact for Assistance Name	35	Complete name of Contact person (Last name/first name/middle initial format.
320 – 344	Contact Title/Position	25	Contact Title/Position.

<b>Field Pos</b>	<b>Field Name</b>	<b>Length</b>	<b>Description and Remarks</b>
345 – 347	Contact Area Code	3	Contact area code.
348 – 354	Contact Phone Number	7	Contact phone number.
355 – 362	Prepared Date	8	Date Report prepared.
363 – 364	Number of Subjects	2	Required. Number of Subject Records. Must be equal to the number of Subject 4A Records.
365 – 366	Number of Serial Numbers of Money Order/traveler Check records	2	Required. Number of Serial Number Records. Must be equal to the number of Serial Number 5A Records.
367 – 368	Number of Money transfer Number records	2	Required. Number of Money transfer number records. Must Be equal to the number of Money transfer 6A records.
369- 370	Number of Explanation/Description records	2	Required. Number of Explanation/Description records Must be equal to the number of Explanation/Description 7A Records.
371	Report Type	1	Required. Enter C For corrects a prior record.
372 – 492	Filler	121	
493 – 502	User Field	10	

## **Subject Information (4A) Record - Required**

This record contains information related to the Subjects identity. There can be more than one of these records if there are multiple Subjects for the same suspicious activity.

<b>Field Pos</b>	<b>Field Name</b>	<b>Length</b>	<b>Description and Remarks</b>
1 – 2	Record Type	2	Required. Enter "4A".
3 – 7	Transaction Code	5	Required. Enter the Transaction number for the submitting Transaction.
8 – 12	Transaction Sequence No.	5	Required. Enter the transaction sequence number from the associated 3A record.
13	Subject Type	1	Required. Enter one of the following: A = Purchaser/Sender B = Payee/Receiver C = Both A & B D = Other
14 – 48	Subject's Name	35	Enter the name of the Subject in the format last name/ First name/middle initial. Left justified and space filled. Follow the Name Editing Conventions shown in the attachment.
49 – 78	Subject's Address	30	Enter the street address of the Subject. Left justified and space filled.
79 – 103	Subject's City	25	Enter the city of the subject.
104 – 105	Subject's State	2	From the attachment, select the appropriate state code for the Subject.
106 – 114	Subject's Zip Code	9	Enter the zip code for the Subject.
115 – 116	Subject's Country	2	From the attachment, select the appropriate country code.
117	Subject's Identification	1	Enter the appropriate code for identification provided as follows: A - Driver's License/State ID B - Passport C - Alien Registration D - Other
118 – 157	Subjects Id Other Description	40	If 'D - Other' enter the description of Identification.
158 – 179	Subject Identification Number	22	Enter the number used for identification.
180 – 181	Subject Issuing Authority	2	Enter the appropriate code to designate the state/country where the identification was issued.
182 – 190	Subject SSN/EIN	9	Enter the Subjects EIN or SSN.
191 – 198	Subject Date of Birth	8	Enter the Subjects date of birth CCYYMMDD format.
199 – 201	Subject's Area Code	3	Enter Subject's residence area code.

**Subject Information (4A) Record - Required continued**

<b>Field Pos</b>	<b>Field Name</b>	<b>Length</b>	<b>Description and Remarks</b>
202 – 208	Subject's Phone Number	7	Enter Subject's residence telephone number.
209 – 216	Subject's Vehicle License/State Number	8	Enter Subject's vehicle/state number.
217 – 218	Subject' s Vehicle State	2	Enter Subject's vehicle state..
219 – 235	Subject's Customer Number	17	Enter Subject's customer number.
236 – 265	Subject's Occupation	30	Enter the occupation, profession, or business of the Subject (i.e. attorney, securities broker, auto dealer, etc.)".
266 – 300	Endorsers Name	35	Enter Endorsers (individual or entity) name, if any.
301 – 312	Subjects Bank Account Number	12	Enter Endorsers Bank account number
313 – 347	Bank of first deposit	35	Enter the name of the Bank of first deposit.
348 – 492	Filler	145	
493 – 502	User Field	10	

## ***Serial Number of Money Order or Traveler's Check Information (5A) Record - Required***

This record contains information related to the serial number(s) of the money orders or traveler checks used. This record can hold multiple serial number information. There can be more than one of these records if there are more than six money order or traveler check information for the same activity.

<b>Field Pos</b>	<b>Field Name</b>	<b>Length</b>	<b>Description and Remarks</b>
1 – 2	Record Type	2	Required. Enter "5A".
3 – 7	Transaction Code	5	Required. Enter the Transaction number for the submitting Transaction.
8 –12	Transaction Sequence No.	5	Required. Enter the transaction sequence number from the associated 3A record.
13	Type of Instrument	1	Enter A for Money order or B for Travelers check.
14 – 48	Issuer Name	35	Enter the Name of the Issuer of the Instrument.
49 – 63	Starting Number	15	Enter the starting number of the serial number.
64 –78	Ending Number	15	Enter the ending number of the serial number.
79	Type of Instrument	1	Enter A for Money order or B for Travelers check.
80 –114	Issuer Name	35	Enter the Name of the Issuer of the Instrument.
115-129	Starting Number	15	Enter the starting number of the serial number.
130 -144	Ending Number	15	Enter the ending number of the serial number.
145	Type of Instrument	1	Enter A for Money order or B for Travelers check.
146 –180	Issuer Name	35	Enter the Name of the Issuer of the Instrument.
181 –195	Starting Number	15	Enter the starting number of the serial number.
196 –210	Ending Number	15	Enter the ending number of the serial number.
211	Type of Instrument	1	Enter A for Money order or B for Travelers check.
212 –246	Issuer Name	35	Enter the Name of the Issuer of the Instrument.
247 –261	Starting Number	15	Enter the starting number of the serial number.
262 –276	Ending Number	15	Enter the ending number of the serial number.
277	Type of Instrument	1	Enter A for Money order or B for Travelers check.
278 –312	Issuer Name	35	Enter the Name of the Issuer of the Instrument.
313 –327	Starting Number	15	Enter the starting number of the serial number.
328 –342	Ending Number	15	Enter the ending number of the serial number.
343	Type of Instrument	1	Enter A for Money order or B for Travelers check.
344 –378	Issuer Name	35	Enter the Name of the Issuer of the Instrument.
379 –393	Starting Number	15	Enter the starting number of the serial number.
394 –408	Ending Number	15	Enter the ending number of the serial number.
409 –492	Filler	84	
493 –502	User Field	10	

## ***Money Transfer Information (6A) Record – Required***

This record contains information related to the money transfers used. This record can hold multiple money transfer information. There can be more than one of these records if there are more than nine money transfer information for the same activity.

<b>Field Pos</b>	<b>Field Name</b>	<b>Length</b>	<b>Description and Remarks</b>
1 – 2	Record Type	2	Required. Enter "6A".
3 – 7	Transaction Code	5	Required. Enter the Transaction number for the submitting Transaction.
8 – 12	Transaction Sequence No.	5	Required. Enter the transaction sequence number from the associated 3A record.
13 – 47	Issuer Name	35	Enter the Name of the Issuer of the Money Transfer.
48 – 62	Money Transfer Number	15	Enter the money transfer number.
63 – 97	Issuer Name	35	Enter the Name of the Issuer of the Money Transfer.
98 –112	Money Transfer Number	15	Enter the money transfer number.
113 –147	Issuer Name	35	Enter the Name of the Issuer of the Money Transfer.
148 –162	Money Transfer Number	15	Enter the money transfer number.
163 –197	Issuer Name	35	Enter the Name of the Issuer of the Money Transfer.
198 –212	Money Transfer Number	15	Enter the money transfer number.
213 –247	Issuer Name	35	Enter the Name of the Issuer of the Money Transfer.
248 –262	Money Transfer Number	15	Enter the money transfer number.
263 –297	Issuer Name	35	Enter the Name of the Issuer of the Money Transfer.
298 –312	Money Transfer Number	15	Enter the money transfer number.
313 –347	Issuer Name	35	Enter the Name of the Issuer of the Money Transfer.
348 –362	Money Transfer Number	15	Enter the money transfer number.
363 –397	Issuer Name	35	Enter the Name of the Issuer of the Money Transfer.
398 –412	Money Transfer Number	15	Enter the money transfer number.
413 –447	Issuer Name	35	Enter the Name of the Issuer of the Money Transfer.
448 –462	Money Transfer Number	15	Enter the money transfer number.
463 –492	Filler	30	
493 –502	User Field	10	

## ***Explanation/Description (7A) Record - Required***

This record contains a detailed Explanation/Description of known or suspicious violation of law. This record may occur multiple times. Include the following data elements in this record:

<b>Field Pos.</b>	<b>Field Name</b>	<b>Length</b>	<b>Description and Remarks</b>
1 – 2	Record Type	2	Required. Enter "7A".
3 – 7	Transaction Code	5	Required. Enter the Transaction number for the submitting Transaction.
8 – 12	Transaction Sequence No.	5	Required. Enter the transaction sequence number from the associated 3A record.
13 – 492	Explanation/Description	480	Enter a detailed Explanation/description of the Suspicious Activity. Upper case characters only. Do not use low values or special characters.
493 – 502	User Field	10	

## **Transaction Summary (9A) Record - Required**

There should be one of these records on the file for each MSB Transaction that is being reported. This record contains counts of the number of each type record associated with the Transaction. Include the following data elements in these records:

<b>Field Pos.</b>	<b>Field Name</b>	<b>Length</b>	<b>Description and Remarks</b>
1 – 2	Record Type	2	Required. Enter `9A'.
3 – 7	Transaction Code	5	Required. Enter the Transaction number for the submitting Transaction. Right justified and zero filled.
8 – 14	Suspicious Activity Count	7	Required. Enter a count of the number of Suspicious Activity Records (3A) for the Transaction.
15 – 21	Subject Record Count	7	Required. Enter the number of Subject (4A) records for the Transaction.
22 – 28	Serial Number of Money Order/Travelers checks Record Count	7	Required. Enter the number of Serial Number of Money Order/Travelers Checks (5A) records for the Transaction.
29 – 35	Money Transfer Record Count	7	Required. Enter the number of Money Transfer (6A) records for the Transaction.
36 – 42	Explanation/Description	7	Required. Enter the number of description/Explanation (7A) records for the Transaction.
43 – 492	Filler	450	
493 – 502	User Field	10	

## ***Parent Money Services Business Summary (9B) Record - Required***

There should be one of these records on the file for each MSB which is being reported. This record is to follow the last reported MSB Transaction '9A' Summary Record for the MSB. This record contains counts of the number of each type record associated with the financial institutions. Include the following data elements for these records:

<b>Field Pos.</b>	<b>Field Name</b>	<b>Length</b>	<b>Description and Remarks</b>
1—2	Record Type	2	Required. Enter '9B'.
3—9	Transaction Record Count	7	Required. Enter count of Transaction Records for the financial institution.
10—16	Transaction Location Information Record Count For Multiple Selling and/or Paying Business Locations	7	Required. Enter count of Transaction Location Information Records (2C) for Multiple Selling and/or Paying Business Locations.
17—23	MSB SAR Count	7	Required. Enter count of MSB SARs (3A) Records.
24—30	Subject Record Count	7	Required. Enter count of Subject 4A records..
31—37	Serial Number of Money Order/Traveler Check Record Count	7	Required. Enter the number of Serial Number of Money Order/Travelers Checks (5A) records
38—44	Money Transfer Record Count	7	Required. Enter the number of Money Transfer (6A) records.
45—51	Explanation/Description Count	7	Required. Enter count of explanation/description (7A) records.
52—492	Filler	441	
493—502	User Field	10	

## **File Summary (9Z) Record - Required**

There should only be one of these records on the file and it must be the very last record on the file. This record contains counts of the number of the various record types which are on the file. These records should contain the following:

<b>Field Pos.</b>	<b>Field Name</b>	<b>Length</b>	<b>Description and Remarks</b>
1—2	Record Type	2	Required. Enter `9Z'.
3—9	Parent Institution Record Count	7	Required. Enter count of parent institution records.
10—16	Transaction Record Count	7	Required. Enter count of Transaction institution records.
17—23	Transaction Location Information Records for Multiple Selling or Paying Business Location Count	7	Required. Enter count of Transaction Location Information Records for Multiple Selling or Paying Business location records.
24—30	MSB SAR Count	7	Required. Enter count of MSB SARs.
31—37	Subject Record Count	7	Required. Enter count of Subject records.
38—44	Serial Number of Money Order/Traveler Check Record Count	7	Required. Enter count of Serial Number of Money Order/Traveler Check records.
45—51	Money Transfer Record Count	7	Required. Enter the number of Money Transfer records.
52 – 58	Explanation/Description	7	Required. Enter count of explanation/description records.
59 – 492	Filler	434	
493—502	User Field	10	



Coahuila de Zaragoza	CU
Colima	CL
Destrito Federal	DF
Durango	DO
Guanajuato	GU
Guerrero	GR
Hidalgo	HL
Jalisco	JL
Michoacande Ocampo	MC
Morelos	MR
Nayarit	NA
Neuvo Leon	NL
Oaxaca	OA
Puebla	PB
Queretaro de Arteaga	QU
Quintana Roo	QR
San Luis Potosi	SL
Sinaloa	SI
Sonora	SO
Tabasco	TB
Tamaulipas	TA
Tlaxcala	TL
Veracruz-Llave	VC
Yucatan	YU
Zacatecas	ZA

Belarus	BO
Belgium	BE
Belize	BH
Benin	BN
Bermuda	BD
Bhutan	BT
Bolivia	BL
Bosnia & Hercegovina	BK
Botswana	BC
Bouvet Island	BV
Brazil	BR
British Indian Ocean Territory	IO
British Virgin Islands	VI
Brunei	BX
Bulgaria	BU
Burkina Faso	UV
Burma	BM
Burundi	BY
Cambodia	CB
Cameroon	CM
Canada	CA
Cape Verde	CV
Cayman Islands	CJ
Central African Republic	CT
Chad	CD
Chile	CI
China (Mainland)	CH
China (Taiwan)	TW
Christmas Island	KT
Clipperton Island	IP
Cocos Islands	CK
Colombia	CO
Comoros	CN
Congo (Brazzaville)	CF
Congo (Kinshasa)	CG
Cook Islands	CW
Coral Sea Islands	CR
Costa Rica	CS
Cote d'Ivoire	IV
Croatia	HR
Cuba	CU
Cyprus	CY
Czech Republic	EZ
Denmark	DA
Djibouti	DJ
Dominica	DO
Dominican Republic	DR
East Timor	TT

Country/Territory

Afghanistan	AF
Albania	AL
Algeria	AG
Andorra	AN
Angola	AO
Anguilla	AV
Antarctica	AY
Antigua & Barbuda	AC
Argentina	AR
Armenia	AM
Aruba	AA
Ashmore & Cartier Islands	AT
Australia	AS
Austria	AU
Azerbaijan	AJ
Bahamas	BF
Bahrain	BA
Bangladesh	BG
Barbados	BB
Bassas Da India	BS

Equador	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		<b>Military Post Offices</b>	
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			
MT	Montana	590 – 599	AP	Armed Forces Pacific	962 – 966
NE	Nebraska	680 – 693			
NV	Nevada	889 – 898			
NH	New Hampshire	030 – 038			
NJ	New Jersey	070 – 089			

## ***Attachments - Standard Abbreviations***

<u>Word</u>	<u>Abbreviation</u>	<u>Word</u>	<u>Abbreviation</u>
Accounting	ACCTG	Hospital	HOSP
Accounts	ACCTS	Incorporated	INC
Administration	ADMIN	Industry(ies)	INDUST
Air Force Base	AFB	Information	INFO
Apartment	APT	Institute, Institution	INST
American	AMER	Insurance	INS
Associates	ASSOC	International	INT
Association	ASSN	Lane	LN
Avenue	AVE	Limited	LTD
Bank	BK	Management	MGMT
Banking	BKG	Manufacturers	MFTRS
Transaction	BR	Manufacturing	MFG
Broadway	BWY	Market	MKT
Building	BLDG	Municipal	MUN
Casualty	CASLTY	Mutual	MUTL
Center	CTR	National	NAT
Certificate	CERT	Northeast	NE
Certificate of Deposit	CD	Northern, North	NO
Circle	CRL	Northwest	NW
Commerce	CMRC	Organization	ORG
Commission	COMM	Park	PK
Company	CO	Place	PL
Consolidated	CONS	Plaza	PLZ
Construction	CONST	Post Office	PO
Corporation	CORP	Railroad	RR
Cooperative	COOP	Realty	RLTY
County	CNTY	Road	RD
Court	CT	Room	RM
Credit Union	CU	Route	RT
Department	DEPT	Savings	SAV
Deposit	DEP	Savings and Loan	SL
Distributor, Distributing,	DISTB	Security	SEC
District	DIST	Service	SERV
Division	DIV	Southeast	SE
Drive	DR	Southern, South	SO
East, Eastern	E	Southwest	SW
Electrical	ELEC	Street	ST
Exchange	XCHG	Suite	STE
Federal	FED	Transportation	TRANS
Federal Credit Union	FCU	Trust	TR
Finance	FIN	University	UNIV
Financial	FINCL	US Air Force	USAF
First National Bank	FNB	US Army	USA
Foreign	FORGN	US Coast Guard	USCG
General	GEN	US Marine Corps	USMC
Government	GOVT	US Navy	USN
Group	GRP	Village	VLGE
Headquarters	HDQTRS	Western, West	W
Highway	HWY		

Note: All abbreviations listed may be changed from singular to plural, and vice versa, by the addition or

deletion of the letter 's'.

### **Attachments - Name Editing Instructions**

- A. Delete any titles, prefixes, suffixes or other descriptive information such as Mr., Mrs., Dr., Reverend, Partner, or Trustee. Do not delete suffixes, which distinguish family members such as Jr., Sr., III or IV. Suffixes should be edited to follow the middle initial (e.g. Doe\ John\L Jr).
- B. Delete all punctuation (e.g., 'JR.' would be submitted as 'JR').
- C. Do not use the following words in fields:
  - a) THE
  - b) SEE ABOVE
  - c) SAME AS ABOVE
  - d) SAME
  - e) COMPUTER GENERATED
  - f) SIGNATURE CARD
  - g) NONE
  - h) NON CUSTOMER
  - i) CUSTOMER
  - j) T/A
  - k) VARIOUS
  - l) OTHER
  - m) N/A
  - n) UNKNOWN
- D. 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.
- E. 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'.
- F. If only the surname of an individual is present, then place a slash after it (e.g., Jones/).
- G. If a non-individual is listed, do not enter slashes between names. Delete the word, 'The' whenever it appears. Drop the subdivision name (e.g., 'The First National Bank of Chicago-Manchester Transaction' will be 'FNB of Chicago-Manchester').

## **Definition of Terms**

**AKA** Also known as (individual)

**b** Denotes a blank position. Enter blanks(s) when this symbol is used.

**Corrected** A report which is used to correct a **Report** that was previously filed.

**Currency** For SAR-MSB purposes, currency is the coin and paper money of the United States or any country, which is circulated and customarily used and accepted as money.

**DBA** Doing Business As

**DCC** The Detroit Computing Center

**DEA** Drug Enforcement Administration

**EIN** Employer Identification Number

**FBI** Federal Bureau of Investigation

**File** For purposes of this procedure, a file consists of all magnetic tape, cartridge or diskette records submitted by a transmitter.

**Instruments** As used in this form includes Money order(s) and/or Traveler's Check(s)

**IRS** Internal Revenue Service

**ITIN** Individual Taxpayer Identification Number

**SSN** Social Security Number

**Subject** For SAR purposes, a Subject is a person with questionable/suspicious activities.

**Transactor** A person(s) who conducts a transaction.

**Transmitter** A Person(s) or organization(s) who prepare the magnetic files.

**USPS** U.S. Postal Service