

**BSA Electronic Filing
Requirements For The**

***Currency Transaction Report
by Casinos (CTR-C)
(FinCEN Form 103)***



Revised Date July 2011

DEPARTMENT OF THE TREASURY

These Specifications for Electronic Filing of Currency Transaction Reports by Casinos (CTR-C) (FinCEN Form 103) were developed under the sponsorship of the following:

**Financial Crimes Enforcement Network
Internal Revenue Service**

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Revision History

| Version Number | Date | Reason for Change |
|----------------|-----------|--|
| 1.0 | 2/26/08 | Finalized CTR-C Electronic File Specifications. |
| 1.1 | 3/31/08 | Additional clarification provided for the following fields: <ul style="list-style-type: none"> • Individual First Name, Item 4 • Date of Birth, Item 13 • Identification Credentials, Item 15 • Casino legal Name, Item 36 |
| 1.2 | 5/22/08 | Corrected the 2C record, ID Number field, (positions 257-278) and Customer Account Number field, (positions 279-300) to be Left Justified. Updated the description and remarks for the 2B record, Employer Identification Number (EIN) field, (positions 21-29). The description previously stated 'Enter the EIN as assigned by the IRS' and now states 'Enter the EIN of the filer as assigned by the IRS.' |
| 1.3 | 6/6/08 | Expansion of error and omission reporting process contained in the "how to File Amended CTRCs to Invalid Files" Section. |
| 1.4 | 7/19/2008 | Replaces references to magnetic media with references to electronic filing using the BSA E-Filing System. General information has been moved from this document to the General Specifications For Electronic Filing Of Bank Secrecy Act (BSA) Reports (General Specifications). Only specific information regarding this form has been retained in this document. |

| Version Number | Date | Reason for Change |
|----------------|----------|--|
| 1.5 | 4/9/2010 | <p>Record 1A Field Positions 3-57, Transmitter’s Name, last sentence of remarks revised to begin: “For an individual, please use the format....”</p> <p>Record 1A Field Positions 135-143, Transmitter ZIP Code, revised: “If 5 or 9 digits, entry cannot be all zeros or all nines. If 9 digits, the last 4 cannot be all zeros or all nines.”</p> <p>Record 2A Field Positions 16-70, Casino Trade Name (Item 35) reference to “Attachment E – Field Editing Instructions” added.</p> <p>Record 2A Field Positions 71-125, Casino Legal Name (Item 36) reference to “Attachment E – Field Editing Instructions” added.</p> <p>Record 2A Field Positions 212-220, Casino ZIP Code (Item 41) revised to add: “If 5 or 9 digits, entry cannot be all zeros or all nines. If 9 digits, the last 4 cannot be all zeros or all nines.”</p> <p>Record 2A Field Positions 266-220, Preparer’s Name (Item 46) and Field Positions 321-375, Contact Person’s Name (Item 47) added reference to “Attachment E – Field Editing Instructions.”</p> <p>Record 2B Field Positions 382-389, Transaction Date (Item 33) revised to add “Cannot be greater than the date in Date of Signature (Item 45).”</p> <p>Record 2B Field Positions 390-391, Foreign Currency changed to conditionally required and clarified: “REQUIRED (if Cash-in Code is “G” and Cash-out Code is “O”).”</p> <p>Record 2B Field Position 396, Multiple Transactions (Item 30) clarified: “Enter an 'X' if there are multiple currency transactions, none of which individually exceeds \$10,000.”</p> <p>Record 2C Field Positions 14-48, Organization or Individual Last Name (Item 3), 49-67, Individual First Name (Item 4),</p> |

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|----------------|------|--|
| | | <p>and 69-123, Doing Business As (DBA) (Item 6) clarified to add reference to "Attachment E – Field Editing Instructions."</p> <p>Record 2C Field Positions 199-200, State (Item 10), revised: "Enter "XX" if the state is unknown or the Country Code at field position 155-156 is not US, CA, or MX."</p> <p>Record 2C Field Positions 201-209, ZIP Code (Item 11), added: "If 5 or 9 digits, entry cannot be all zeros or all nines. If 9 digits, the last 4 cannot be all zeros or all nines."</p> <p>Record 2C Field Positions 212-220, SSN/EIN (Item 8), clarified: "Do not enter hyphens, slashes, or invalid entries such as all nines, all zeros, or "123456789"."</p> <p>Record 2D Field Positions 14-48, Agent Last Name (Item 18) and Field Positions 49-67, Agent First Name (Item 19) clarified to add reference to "Attachment E – Field Editing Instructions."</p> <p>Record 2D Field Positions 144-145, Agent State (Item 24) clarified: "Enter "XX" if the state is unknown or the Country Code at field position 155-156 is not US, CA, or MX."</p> <p>Record 2D Field Positions 146-154, Agent ZIP Code (Item 25), added: "If 5 or 9 digits, entry cannot be all zeros or all nines. If 9 digits, the last 4 cannot be all zeros or all nines."</p> <p>Record 2D Field Positions 157-165, SSN (Item 22) clarified: "Do not enter hyphens, slashes, or invalid entries such as all nines, all zeros, or "123456789"."</p> <p>Attachment E – Field Editing Instructions added.</p> |

| Version Number | Date | Reason for Change |
|-----------------------|-------------|---|
| 1.6 | 07/16/2010 | Record 2B Field Positions 390-391, Foreign Currency (Item 34), added "and/or". Attachment B – Error Code List revised to add Record, Field Position, and Form Field Number. Added missing error codes C94, C95, C96, C97, C98, and C99. |
| 1.7 | 06/17/2011 | Error codes F24 and F37 added to Attachment B – Error Code List. |

Purpose

The purpose of this specification package is to provide the requirements and conditions for electronically filing FinCEN Form 103, the Currency Transaction Report by Casinos (CTR-C) information. For the purpose of these specifications, electronic filing of this report will be through the BSA E-Filing System operated by the Financial Crimes Enforcement Network (FinCEN). For more information on the BSA E-Filing System and to register please go to <http://bsaefiling.fincen.treas.gov>. This document should be used in conjunction with the 'General Specifications for Electronic Filing of Bank Secrecy Act (BSA) Reports' (General Specifications) available at http://www.fincen.gov/forms/files/e-filing_GENspecs.pdf. It is recommended that you refer to the General Specifications first, and then the specific information contained in this document.

Electronic Filing

The BSA E-Filing System Batch File Testing Procedures are detailed in a separate document that can be accessed on the BSA E-Filing System web site at <http://bsaefiling.fincen.treas.gov> under Quick Links.

For purposes of these specifications, the Casino is the agency preparing the CTR-Cs and the Transmitter is the organization preparing the electronic 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.

Do not file a paper Form 103 for Casino transactions reported by electronic means.

Aggregation of Casino information is to be automated if possible, however, the requirement for aggregation is no different using electronic filing than it would be if filing paper CTR-Cs.

BSA regulations require that filers retain a copy of the CTR-C data or have the ability to reconstruct the data filed electronically for a period of five years. In addition, the

electronic filer must retain the acknowledgment file from the BSA E-Filing System to facilitate inquiries for the same period as well as any 'working' papers that may be necessary for centralized processing of transactions.

CTR-Cs with errors are to be corrected and re-submitted as part of the next reporting period file when the information is readily available. When not readily available (e.g., Item 30 was checked and the customer does not have: (a) a casino check cashing, credit or deposit account or (b) a previously filed FinCEN Form 103 or federal tax form containing the customer's missing identification information), then correct and resubmit the CTR-C whenever the correct data can be obtained from: (a) a reporting agency that provides telephonic or on-line searching of customer identification information for those that applied for casino credit, and whether a customer has any outstanding casino debts, (b) public on-line database search engines that do not require a subscription, (c) organizations that provide subscription services to businesses and governmental agencies containing individuals' personal identification information (e.g., name, date of birth, permanent address) from their commercial databases, or (d) the customer returning to the casino and conducting transactions from which the casino has obtained knowledge.

File Organization

All incoming data must be in the expected format. **All records must be a fixed length of 520 characters.**

Based on the filer's application, Enterprise Computing Center – Martinsburg (ECC-M) keeps identifying information on file for the reporting Casino. This data includes the Transmitter Control Code (TCC), transmitter and casino names, addresses, EINs, and Location Control Codes (LCC). The Transmitter and Header records use this information to correctly identify the transmitter and the filer. Any records that do not match ECC-M files cannot be processed.

Records that fail to meet these requirements will be rejected and returned to the filer for corrections.

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 (2B) Record for each transaction reported. This record will be the first for each transaction.

Customer (Part I - Section A) (2C) Record

There must be at least one customer record for each transaction. There may be up to 99 of this record type depending on the number of persons or organizations who are customers of this transaction.

Agent (Part I - 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 up to 99 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 (2A) Record for the Casino.

File Summary (9Z)

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

Record Layouts

Transmitter (1A) Record - Required

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 electronic file and it must be the first record. All data elements for this record are required.

| Field Position | Field Name | Length | Description and Remarks |
|----------------|----------------------------|--------|--|
| 1-2 | Record Type | 2 | REQUIRED. Enter "1A". |
| 3-57 | Transmitter's Name | 55 | REQUIRED. Enter the name of the individual or organization that is transmitting this file. Left justify and space fill unused positions. For an individual, please use the format of LastName FirstName MiddleInitial with spaces between each element. |
| 58-107 | Transmitter Street Address | 50 | REQUIRED. Enter the street address of the transmitter. Do not abbreviate or use a post office box number. Left justify and space fill unused positions. |
| 108-132 | Transmitter City | 25 | REQUIRED. Enter the city of the transmitter. Do not abbreviate city name. Left justify and space fill unused positions. |
| 133-134 | Transmitter State | 2 | REQUIRED. Enter the state code of the transmitter. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf . |
| 135-143 | 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 space fill unused positions. If 5 or 9 digits, entry cannot be all zeros or all nines. If 9 digits, the last 4 cannot be all zeros or all nines. |
| 144-146 | Transmitter Area Code | 3 | REQUIRED. Enter the telephone area code of the transmitter. |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|--------------------------------|--------|---|
| 147-153 | Transmitter Telephone | 7 | REQUIRED. Enter the telephone number of the transmitter. |
| 154-208 | Transmitter Contact Name | 55 | REQUIRED. Enter the name of the person who is the official contact for this file. Left justify and space fill unused positions. Please use the format of LastName FirstName MiddleInitial with spaces between each element. |
| 209-217 | 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, or invalid entries such as all nines or all zeros. |
| 218-225 | Coverage Beginning Date | 8 | REQUIRED. Enter the earliest original transaction date on the file. Enter as a numeric 8-position field in format: month, day, century, year (MMDDCCYY). |
| 226-233 | Coverage Ending Date | 8 | REQUIRED. Enter the latest original transaction date on the file. Enter as a numeric 8-position field in format: month, day, century, year (MMDDCCYY). |
| 234-241 | Transmitter Control Code (TCC) | 8 | REQUIRED. Enter your assigned 8-character TCC. |
| 242-245 | Format Indicator | 4 | REQUIRED. Enter '0051'. |
| 246-510 | Filler | 265 | Space filled. |
| 511-520 | User Field | 10 | Use this field for any descriptive information you may require; otherwise, space fill. Not included in acknowledgment file. |

Casino Location Header (2A) Record - Required

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 in the electronic file. The 2A record item numbers refer to the CTR-C Form Part III.

| Field Position | Field Name | Length | Description and Remarks |
|-----------------------|---------------------------------|---------------|--|
| 1-2 | Record Type | 2 | REQUIRED. Enter "2A". |
| 3-10 | Transmitter Control Code (TCC) | 8 | REQUIRED. Enter your assigned 8-character TCC. |
| 11-15 | Location Control Code (LCC) | 5 | REQUIRED. Enter the LCC for the submitting casino location. Do not use all zeros. |
| 16-70 | Casino Trade Name (Item 35) | 55 | REQUIRED. Enter the name by which the casino does business and is commonly known. Use Attachment E - Field Editing Instructions. Left justify and space fill unused positions. |
| 71-125 | Casino Legal Name (Item 36) | 55 | REQUIRED. Enter the legal name of the casino. The name must match the EIN. Use the standard name editing instructions in Attachment E - Field Editing Instructions. Left justify and space fill unused positions. |
| 126-134 | Casino EIN (Item 37) | 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, or invalid entries such as all nines, all zeros, or "123456789". |
| 135-184 | Casino Street Address (Item 38) | 50 | REQUIRED. Enter the street address of the casino. Do not abbreviate or use a post office box number. Left justify and space fill unused positions. |
| 185-209 | Casino City (Item 39) | 25 | REQUIRED. Enter the city of the casino. Do not abbreviate city name. Left justify and space fill unused positions. |
| 210-211 | Casino State (Item 40) | 2 | REQUIRED. Enter the state code of the casino. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf . |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|--|--------|---|
| 212-220 | Casino ZIP Code (Item 41) | 9 | REQUIRED. Enter the valid 9-digit ZIP Code of the casino. If only the first five digits are known, left justify and space fill. If 5 or 9 digits, entry cannot be all zeros or all nines. If 9 digits, the last 4 cannot be all zeros or all nines. |
| 221 | Type of Gaming Institution (Item 42) | 1 | REQUIRED. Enter the Type of Gaming Institution code. <u>Code</u> <u>Description</u> A State licensed casino B Card club C Tribal authorized casino Z Other (specify) |
| 222-245 | Other Type Description (Item 42z) | 24 | Required if 'Z' is used for the Type of Gaming Institution in Position 221, enter a description for Type of Gaming Institution. Left justify and space fill unused positions. |
| 246-265 | Approving Official's Title (Item 43) | 20 | Enter the official title of the approving official. Left justify and space fill unused positions. |
| 266-320 | Preparer's Name (Item 46) | 55 | Enter the name of the preparer. See Attachment E - Field Editing Instructions for name editing conventions. Left justify and space fill unused positions. Please use the format of LastName FirstName MiddleInitial with spaces between each element. |
| 321-375 | Contact Person's Name (Item 47) | 55 | Enter the name of the contact person. See Attachment E - Field Editing Instructions for name editing conventions. Left justify and space fill unused positions. Please use the format of LastName FirstName MiddleInitial with spaces between each element. |
| 376-378 | Contact Person's Area Code (Item 48) | 3 | Enter the contact person's area code. |
| 379-385 | Contact Person's Telephone Number (Item 48) | 7 | Enter the contact person's telephone number. |
| 386-393 | Date of Signature (Item 45) | 8 | Enter the date the transaction was approved. Enter as a numeric 8-position field in format: month, day, century, year (MMDDCCYY). |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|-----------------|--------|--|
| 394 | Resolution Code | 1 | REQUIRED. Enter the code to indicate where correspondence relating to these transactions should be sent. <u>Code</u> <u>Description</u> 2 Casino Headquarters 3 Casino Location 4 Transmitter |
| 395-510 | Filler | 116 | Space Filled. |
| 511-520 | User Field | 10 | Use this field for any descriptive information you may require; otherwise, space fill. Not included in acknowledgment file. |

Transaction Summary (2B) Record - Required

This record identifies and describes the actual casino currency transactions and provides a summary of the transaction component parts and the transaction amounts. Data fields within the Transaction Summary (2B) Record identify the counts for the Customer (2C) Records and the Agent (2D) Record. There can be a maximum of 99,999 of these record types per file, one record for each transaction. The 2B record item numbers refer to the CTR-C Form Part II.

NOTE REGARDING CASH-IN/CASH/OUT TRANSACTIONS (Items 31 and 32):

There must be at least one cash-in or cash-out transaction recorded in the Transaction Summary (2B) Record. Filers may record up to nine cash-in transactions and up to 10 cash-out transactions in the following fields. Cash-in transactions will be recorded in field positions 31 through 147. Cash-in transaction codes and amounts will be recorded in order beginning with the 'First Transaction: Transaction Cash-in Code' at field position 31. Cash-out transactions will be recorded in field positions 185 through 314. Cash-out transaction codes and amounts will be recorded in order beginning with the 'First Transaction: Transaction Cash-out Code' at field position 185. In all transaction entries the dollar amounts will be right-justified and zero filled. All unused fields will be space filled. Note: Cash-out codes for electronic submissions differ from those listed on the printed form. Electronic submission must use the codes specified in the Description and Remarks column.

| Field Position | Field Name | Length | Description and Remarks |
|-----------------------|--------------------------------|---------------|---|
| 1-2 | Record Type | 2 | REQUIRED. Enter "2B". |
| 3-10 | Transmitter Control Code (TCC) | 8 | REQUIRED. Enter your assigned 8-character TCC. |
| 11-15 | Location Control Code (LCC) | 5 | REQUIRED. Enter the LCC for the casino reporting transactions. Do not enter all zeros. |
| 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. |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|--|--------|--|
| 21-29 | Employer Identification Number (EIN) | 9 | REQUIRED. Enter the EIN of the filer as assigned by the IRS. Must be the valid 9-digit number assigned to the filer by IRS and must match the filer name. Do not enter hyphens, slashes, alpha characters, or invalid entries such as all nines, all zeros, or "123456789". |
| 30 | Amends Prior Report CTR-C (Item 1) | 1 | Enter an 'X' to designate if this amends a prior report. If this transaction is an amendment to a previous transaction, a DCN must be entered in field positions 397-410. |
| 31 | First Transaction: Transaction Cash-in Code (Item 31) | 1 | Enter the appropriate code to describe the first cash-in transaction being reported. If no transaction code is entered, space fill this field. <u>Code</u> <u>Description</u> A Purchase of casino chips, tokens, and other gaming instruments B Deposit(s) (front money or safekeeping) C Payment(s) on credit (including markers) D Currency wager(s) including money plays E Currency received for wire transfer(s) out F Purchase(s) of casino check(s) G Currency exchange(s) H Bills inserted into gaming devices Z Other (specify) |
| 32 - 43 | First Transaction: Cash-in Amount (Item 31) | 12 | Enter the Transaction Cash-in Amount associated with the Transaction Cash-in Code in the First Transaction: Transaction Cash-in Code (position 31). This entry must be right justified and zero filled. If no entry is recorded, space fill this field. |
| 44 | Second Transaction: Transaction Cash-in Code (Item 31) | 1 | Enter the appropriate code to describe the second cash-in transaction being reported. If no transaction code is entered, space fill this field. <u>Code</u> <u>Description</u> A Purchase of casino chips, tokens, and other gaming instruments B Deposit(s) (front money or safekeeping) C Payment(s) on credit (including markers) D Currency wager(s) including money plays E Currency received for wire transfer(s) out F Purchase(s) of casino check(s) G Currency exchange(s) H Bills inserted into gaming devices Z Other (specify) |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|--|--------|--|
| 45-56 | Second Transaction: Cash-in Amount (Item 31) | 12 | Enter the Transaction Cash-in Amount associated with the Transaction Cash-in Code in the Second Transaction: Transaction Cash-in Code (position 44). This entry must be right justified and zero filled. If no entry is recorded, space fill this field. |
| 57 | Third Transaction: Transaction Cash-in Code (Item 31) | 1 | Enter the appropriate code to describe the third cash-in transaction being reported. If no transaction code is entered, space fill this field. <u>Code</u> <u>Description</u> A Purchase of casino chips, tokens, and other gaming instruments B Deposit(s) (front money or safekeeping) C Payment(s) on credit (including markers) D Currency wager(s) including money plays E Currency received for wire transfer(s) out F Purchase(s) of casino check(s) G Currency exchange(s) H Bills inserted into gaming devices Z Other (specify) |
| 58-69 | Third Transaction: Cash-in Amount (Item 31) | 12 | Enter the Transaction Cash-in Amount associated with the Transaction Cash-in Code in the Third Transaction: Transaction Cash-in Code (position 57). This entry must be right justified and zero filled. If no entry is recorded, space fill this field. |
| 70 | Fourth Transaction: Transaction Cash-in Code (Item 31) | 1 | Enter the appropriate code to describe the fourth cash-in transaction being reported. If no transaction code is entered, space fill this field. <u>Code</u> <u>Description</u> A Purchase of casino chips, tokens, and other gaming instruments B Deposit(s) (front money or safekeeping) C Payment(s) on credit (including markers) D Currency wager(s) including money plays E Currency received for wire transfer(s) out F Purchase(s) of casino check(s) G Currency exchange(s) H Bills inserted into gaming devices Z Other (specify) |
| 71-82 | Fourth Transaction: Cash-in Amount (Item 31) | 12 | Enter the Transaction Cash-in Amount associated with the Transaction Cash-in Code in the Fourth Transaction: Transaction Cash-in Code (position 70). This entry must be right justified and zero filled. If no entry is recorded, space fill this field. |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|---|--------|---|
| 83 | Fifth Transaction: Transaction Cash-in Code (Item 31) | 1 | Enter the appropriate code to describe the fifth cash-in transaction being reported. If no transaction code is entered, space fill this field. <u>Code</u> <u>Description</u> A Purchase of casino chips, tokens, and other gaming instruments B Deposit(s) (front money or safekeeping) C Payment(s) on credit (including markers) D Currency wager(s) including money plays E Currency received for wire transfer(s) out F Purchase(s) of casino check(s) G Currency exchange(s) H Bills inserted into gaming devices Z Other (specify) |
| 84-95 | Fifth Transaction: Cash-in Amount (Item 31) | 12 | Enter the Transaction Cash-in Amount associated with the Transaction Cash-in Code in the Fifth Transaction: Transaction Cash-in Code (position 83). This entry must be right justified and zero filled. If no entry is recorded, space fill this field. |
| 96 | Sixth Transaction: Transaction Cash-in Code (Item 31) | 1 | Enter the appropriate code to describe the sixth cash-in transaction being reported. If no transaction code is entered, space fill this field. <u>Code</u> <u>Description</u> A Purchase of casino chips, tokens, and other gaming instruments B Deposit(s) (front money or safekeeping) C Payment(s) on credit (including markers) D Currency wager(s) including money plays E Currency received for wire transfer(s) out F Purchase(s) of casino check(s) G Currency exchange(s) H Bills inserted into gaming devices Z Other (specify) |
| 97-108 | Sixth Transaction: Cash-in Amount (Item 31) | 12 | Enter the Transaction Cash-in Amount associated with the Transaction Cash-in Code in the Sixth Transaction: Transaction Cash-in Code (position 96). This entry must be right justified and zero filled. If no entry is recorded, space fill this field. |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|---|--------|---|
| 109 | Seventh Transaction: Transaction Cash-in Code (Item 31) | 1 | Enter the appropriate code to describe the seventh cash-in transaction being reported. If no transaction code is entered, space fill this field. <u>Code</u> <u>Description</u> A Purchase of casino chips, tokens, and other gaming instruments B Deposit(s) (front money or safekeeping) C Payment(s) on credit (including markers) D Currency wager(s) including money plays E Currency received for wire transfer(s) out F Purchase(s) of casino check(s) G Currency exchange(s) H Bills inserted into gaming devices Z Other (specify) |
| 110-121 | Seventh Transaction: Cash-in Amount (Item 31) | 12 | Enter the Transaction Cash-in Amount associated with the Transaction Cash-in Code in the Seventh Transaction: Transaction Cash-in Code (position 109). This entry must be right justified and zero filled. If no entry is recorded, space fill this field. |
| 122 | Eighth Transaction: Transaction Cash-in Code (Item 31) | 1 | Enter the appropriate code to describe the eighth cash-in transaction being reported. If no transaction code is entered, space fill this field. <u>Code</u> <u>Description</u> A Purchase of casino chips, tokens, and other gaming instruments B Deposit(s) (front money or safekeeping) C Payment(s) on credit (including markers) D Currency wager(s) including money plays E Currency received for wire transfer(s) out F Purchase(s) of casino check(s) G Currency exchange(s) H Bills inserted into gaming devices Z Other (specify) |
| 123-134 | Eighth Transaction: Cash-in Amount (Item 31) | 12 | Enter the Transaction Cash-in Amount associated with the Transaction Cash-in Code in the Eighth Transaction: Transaction Cash-in Code (position 122). This entry must be right justified and zero filled. If no entry is recorded, space fill this field. |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|---|--------|---|
| 135 | Ninth Transaction: Transaction Cash-in Code (Item 31) | 1 | Enter the appropriate code to describe the ninth cash-in transaction being reported. If no transaction code is entered, space fill this field. <u>Code</u> <u>Description</u> A Purchase of casino chips, tokens, and other gaming instruments B Deposit(s) (front money or safekeeping) C Payment(s) on credit (including markers) D Currency wager(s) including money plays E Currency received for wire transfer(s) out F Purchase(s) of casino check(s) G Currency exchange(s) H Bills inserted into gaming devices Z Other (specify) |
| 136-147 | Ninth Transaction: Cash-in Amount (Item 31) | 12 | Enter the Transaction Cash-in Amount associated with the Transaction Cash-in Code in the Ninth Transaction: Transaction Cash-in Code (position 135). This entry must be right justified and zero filled. If no entry is recorded, space fill this field. |
| 148-160 | Filler | 13 | Space Filled. |
| 161-184 | Other Cash-in Description (Item 31z) | 24 | REQUIRED if 'Z' is used for any Cash-in Codes in Positions 31-147, enter a description of the cash-in transaction. Left justify and space fill unused positions. |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|--|--------|---|
| 185 | First Transaction: Transaction Cash-out Code (Item 32) | 1 | <p>Enter the appropriate code to describe the first Cash-out transaction. If no transaction code is entered, space fill this field. Cash-out codes for electronic submissions differ from those listed on the printed form. Electronic submissions must use the codes specified below.</p> <p><u>Code</u> <u>Description</u></p> <p>I Redemption(s) of casino chips, tokens, TITO Tickets and other gaming instruments</p> <p>J Withdrawal(s) of deposit (front money or safekeeping)</p> <p>K Advance(s) on credit (including markers)</p> <p>L Payment(s) on wager(s) (including race book and OTB or sports pool)</p> <p>M Currency paid from wire transfer in</p> <p>N Negotiable instrument(s_) cashed(including checks)</p> <p>O Currency Exchange(s)</p> <p>P Travel/complimentary expenses & gaming incentives</p> <p>T Payments for tournament, contest or other promotions</p> <p>Z Other (specify)</p> |
| 186-197 | First Transaction: Cash-out Amount (Item 32) | 12 | <p>Enter the Transaction Cash-out Amount associated with the Transaction Cash-out Code in the First Transaction: Transaction Cash-out Code (position 185). This entry must be right justified and zero filled. If no entry is recorded, space fill this field.</p> |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|---|--------|--|
| 198 | Second Transaction: Transaction Cash-out Code (Item 32) | 1 | <p>Enter the appropriate code to describe the second Cash-out transaction. If no transaction code is entered, space fill this field. Cash-out codes for electronic submissions differ from those listed on the printed form. Electronic submissions must use the codes specified below.</p> <p><u>Code</u> <u>Description</u></p> <p>I Redemption(s) of casino chips, tokens, TITO Tickets and other gaming instruments</p> <p>J Withdrawal(s) of deposit (front money or safekeeping)</p> <p>K Advance(s) on credit (including markers)</p> <p>L Payment(s) on wager(s) (including race book and OTB or sports pool)</p> <p>M Currency paid from wire transfer in</p> <p>N Negotiable instrument(s_) cashed(including checks)</p> <p>O Currency Exchange(s)</p> <p>P Travel/complimentary expenses & gaming incentives</p> <p>T Payments for tournament, contest or other promotions</p> <p>Z Other (specify)</p> |
| 199-210 | Second Transaction: Cash-out Amount (Item 32) | 12 | <p>Enter the Transaction Cash-out Amount associated with the Transaction Cash-out Code in the Second Transaction: Transaction Cash-out Code (position 198). This entry must be right justified and zero filled. If no entry is recorded, space fill this field.</p> |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|--|--------|---|
| 211 | Third Transaction: Transaction Cash-out Code (Item 32) | 1 | <p>Enter the appropriate code to describe the third Cash-out transaction. If no transaction code is entered, space fill this field. Cash-out codes for electronic submissions differ from those listed on the printed form. Electronic submissions must use the codes specified below.</p> <p><u>Code</u> <u>Description</u></p> <p>I Redemption(s) of casino chips, tokens, TITO Tickets and other gaming instruments</p> <p>J Withdrawal(s) of deposit (front money or safekeeping)</p> <p>K Advance(s) on credit (including markers)</p> <p>L Payment(s) on wager(s) (including race book and OTB or sports pool)</p> <p>M Currency paid from wire transfer in</p> <p>N Negotiable instrument(s_) cashed(including checks)</p> <p>O Currency Exchange(s)</p> <p>P Travel/complimentary expenses & gaming incentives</p> <p>T Payments for tournament, contest or other promotions</p> <p>Z Other (specify)</p> |
| 212-223 | Third Transaction: Cash-out Amount (Item 32) | 12 | <p>Enter the Transaction Cash-out Amount associated with the Transaction Cash-out Code in the Third Transaction: Transaction Cash-out Code (position 211). This entry must be right justified and zero filled. If no entry is recorded, space fill this field.</p> |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|---|--------|--|
| 224 | Fourth Transaction: Transaction Cash-out Code (Item 32) | 1 | <p>Enter the appropriate code to describe the fourth Cash-out transaction. If no transaction code is entered, space fill this field. Cash-out codes for electronic submissions differ from those listed on the printed form. Electronic submissions must use the codes specified below.</p> <p><u>Code</u> <u>Description</u></p> <p>I Redemption(s) of casino chips, tokens, TITO Tickets and other gaming instruments</p> <p>J Withdrawal(s) of deposit (front money or safekeeping)</p> <p>K Advance(s) on credit (including markers)</p> <p>L Payment(s) on wager(s) (including race book and OTB or sports pool)</p> <p>M Currency paid from wire transfer in</p> <p>N Negotiable instrument(s_) cashed(including checks)</p> <p>O Currency Exchange(s)</p> <p>P Travel/complimentary expenses & gaming incentives</p> <p>T Payments for tournament, contest or other promotions</p> <p>Z Other (specify)</p> |
| 225-236 | Fourth Transaction: Cash-out Amount (Item 32) | 12 | Enter the Transaction Cash-out Amount associated with the Transaction Cash-out Code in the Fourth Transaction: Transaction Cash-out Code (position 224). This entry must be right justified and zero filled. If no entry is recorded, space fill this field. |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|--|--------|---|
| 237 | Fifth Transaction: Transaction Cash-out Code (Item 32) | 1 | <p>Enter the appropriate code to describe the fifth Cash-out transaction. If no transaction code is entered, space fill this field. Cash-out codes for electronic submissions differ from those listed on the printed form. Electronic submissions must use the codes specified below.</p> <p><u>Code</u> <u>Description</u></p> <p>I Redemption(s) of casino chips, tokens, TITO Tickets and other gaming instruments</p> <p>J Withdrawal(s) of deposit (front money or safekeeping)</p> <p>K Advance(s) on credit (including markers)</p> <p>L Payment(s) on wager(s) (including race book and OTB or sports pool)</p> <p>M Currency paid from wire transfer in</p> <p>N Negotiable instrument(s_) cashed(including checks)</p> <p>O Currency Exchange(s)</p> <p>P Travel/complimentary expenses & gaming incentives</p> <p>T Payments for tournament, contest or other promotions</p> <p>Z Other (specify)</p> |
| 238-249 | Fifth Transaction: Cash-out Amount (Item 32) | 12 | <p>Enter the Transaction Cash-out Amount associated with the Transaction Cash-out Code in the Fifth Transaction: Transaction Cash-out Code (position 237). This entry must be right justified and zero filled. If no entry is recorded, space fill this field.</p> |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|--|--------|---|
| 250 | Sixth Transaction: Transaction Cash-out Code (Item 32) | 1 | <p>Enter the appropriate code to describe the sixth Cash-out transaction. If no transaction code is entered, space fill this field. Cash-out codes for electronic submissions differ from those listed on the printed form. Electronic submissions must use the codes specified below.</p> <p><u>Code</u> <u>Description</u></p> <p>I Redemption(s) of casino chips, tokens, TITO Tickets and other gaming instruments</p> <p>J Withdrawal(s) of deposit (front money or safekeeping)</p> <p>K Advance(s) on credit (including markers)</p> <p>L Payment(s) on wager(s) (including race book and OTB or sports pool)</p> <p>M Currency paid from wire transfer in</p> <p>N Negotiable instrument(s_) cashed(including checks)</p> <p>O Currency Exchange(s)</p> <p>P Travel/complimentary expenses & gaming incentives</p> <p>T Payments for tournament, contest or other promotions</p> <p>Z Other (specify)</p> |
| 251-262 | Sixth Transaction: Cash-out Amount (Item 32) | 12 | Enter the Transaction Cash-out Amount associated with the Transaction Cash-out Code in the Sixth Transaction: Transaction Cash-out Code (position 250). This entry must be right justified and zero filled. If no entry is recorded, space fill this field. |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|--|--------|---|
| 263 | Seventh Transaction: Transaction Cash-out Code (Item 32) | 1 | <p>Enter the appropriate code to describe the seventh Cash-out transaction. If no transaction code is entered, space fill this field. Cash-out codes for electronic submissions differ from those listed on the printed form. Electronic submissions must use the codes specified below.</p> <p><u>Code</u> <u>Description</u></p> <p>I Redemption(s) of casino chips, tokens, TITO Tickets and other gaming instruments</p> <p>J Withdrawal(s) of deposit (front money or safekeeping)</p> <p>K Advance(s) on credit (including markers)</p> <p>L Payment(s) on wager(s) (including race book and OTB or sports pool)</p> <p>M Currency paid from wire transfer in</p> <p>N Negotiable instrument(s_) cashed(including checks)</p> <p>O Currency Exchange(s)</p> <p>P Travel/complimentary expenses & gaming incentives</p> <p>T Payments for tournament, contest or other promotions</p> <p>Z Other (specify)</p> |
| 264-275 | Seventh Transaction: Cash-out Amount (Item 32) | 12 | <p>Enter the Transaction Cash-out Amount associated with the Transaction Cash-out Code in the Seventh Transaction: Transaction Cash-out Code (position 263). This entry must be right justified and zero filled. If no entry is recorded, space fill this field.</p> |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|---|--------|--|
| 276 | Eighth Transaction: Transaction Cash-out Code (Item 32) | 1 | <p>Enter the appropriate code to describe the eighth Cash-out transaction. If no transaction code is entered, space fill this field. Cash-out codes for electronic submissions differ from those listed on the printed form. Electronic submissions must use the codes specified below.</p> <p><u>Code</u> <u>Description</u></p> <p>I Redemption(s) of casino chips, tokens, TITO Tickets and other gaming instruments</p> <p>J Withdrawal(s) of deposit (front money or safekeeping)</p> <p>K Advance(s) on credit (including markers)</p> <p>L Payment(s) on wager(s) (including race book and OTB or sports pool)</p> <p>M Currency paid from wire transfer in</p> <p>N Negotiable instrument(s_) cashed(including checks)</p> <p>O Currency Exchange(s)</p> <p>P Travel/complimentary expenses & gaming incentives</p> <p>T Payments for tournament, contest or other promotions</p> <p>Z Other (specify)</p> |
| 277-288 | Eighth Transaction: Cash-out Amount (Item 32) | 12 | <p>Enter the Transaction Cash-out Amount associated with the Transaction Cash-out Code in the Eighth Transaction: Transaction Cash-out Code (position 276). This entry must be right justified and zero filled. If no entry is recorded, space fill this field.</p> |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|--|--------|---|
| 289 | Ninth Transaction: Transaction Cash-out Code (Item 32) | 1 | <p>Enter the appropriate code to describe the ninth Cash-out transaction. If no transaction code is entered, space fill this field. Cash-out codes for electronic submissions differ from those listed on the printed form. Electronic submissions must use the codes specified below.</p> <p><u>Code</u> <u>Description</u></p> <p>I Redemption(s) of casino chips, tokens, TITO Tickets and other gaming instruments</p> <p>J Withdrawal(s) of deposit (front money or safekeeping)</p> <p>K Advance(s) on credit (including markers)</p> <p>L Payment(s) on wager(s) (including race book and OTB or sports pool)</p> <p>M Currency paid from wire transfer in</p> <p>N Negotiable instrument(s_) cashed(including checks)</p> <p>O Currency Exchange(s)</p> <p>P Travel/complimentary expenses & gaming incentives</p> <p>T Payments for tournament, contest or other promotions</p> <p>Z Other (specify)</p> |
| 290-301 | Ninth Transaction: Cash-out Amount (Item 32) | 12 | <p>Enter the Transaction Cash-out Amount associated with the Transaction Cash-out Code in the Ninth Transaction: Transaction Cash-out Code (position 298). This entry must be right justified and zero filled. If no entry is recorded, space fill this field.</p> |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|--|--------|---|
| 302 | Tenth Transaction: Transaction Cash-out Code (Item 32) | 1 | <p>Enter the appropriate code to describe the tenth Cash-out transaction. If no transaction code is entered, space fill this field. Cash-out codes for electronic submissions differ from those listed on the printed form. Electronic submissions must use the codes specified below.</p> <p><u>Code</u> <u>Description</u></p> <p>I Redemption(s) of casino chips, tokens, TITO Tickets and other gaming instruments</p> <p>J Withdrawal(s) of deposit (front money or safekeeping)</p> <p>K Advance(s) on credit (including markers)</p> <p>L Payment(s) on wager(s) (including race book and OTB or sports pool)</p> <p>M Currency paid from wire transfer in</p> <p>N Negotiable instrument(s_) cashed(including checks)</p> <p>O Currency Exchange(s)</p> <p>P Travel/complimentary expenses & gaming incentives</p> <p>T Payments for tournament, contest or other promotions</p> <p>Z Other (specify)</p> |
| 303-314 | Tenth Transaction: Cash-out Amount (Item 32) | 12 | Enter the Transaction Cash-out Amount associated with the Transaction Cash-out Code in the Tenth Transaction: Transaction Cash-out Code (position 302). This entry must be right justified and zero filled. If no entry is recorded, space fill this field. |
| 315-327 | Filler | 13 | Space Filled. |
| 328-351 | Other Cash-out Description (Item 32z) | 24 | REQUIRED if 'Y' is used for any Cash-out Code in positions 185-314, enter a description of the cash-out transaction. Left justify and fill space fill unused positions. |
| 352-366 | Transaction Total Amount Cash In (Item 31 total) | 15 | REQUIRED if there are cash-in transactions recorded. 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. This entry must be right justified and zero filled. If no entry is recorded, space fill this field. |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|---|--------|---|
| 367-381 | Transaction Total Amount Cash Out (Item 32 total) | 15 | REQUIRED if there are cash-out transactions recorded. 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. This entry must be right justified and zero filled. If no entry is recorded, space fill this field. |
| 382-389 | Transaction Date (Item 33) | 8 | REQUIRED. Enter the date of this transaction. Enter as a numeric 8-position field in format: month, day, century, year (MMDDCCYY). Cannot be greater than the date in Date of Signature (Item 45). |
| 390-391 | Foreign Currency | 2 | REQUIRED (if Cash-in Code is "G" and/or Cash-out Code is "O"). If foreign currency was used, enter the two-digit country code for the currency used. See http://www.fincen.gov/forms/files/country_and_state_codes.pdf . |
| 392-393 | Number of Customer Records | 2 | REQUIRED. Enter the count Customer (Part I - Section A) (2C) Records associated with this transaction (01-99). Right justify and fill unused positions with zeros. |
| 394-395 | Number of Agent Records | 2 | REQUIRED. Enter the count of Agent (Part I - Section B) (2D) Records associated with this transaction (00-99). |
| 396 | Multiple Transactions (Item 30) | 1 | Enter an 'X' if there are multiple currency transactions, none of which individually exceeds \$10,000. |
| 397-410 | Document Control Number (DCN) | 14 | REQUIRED. Enter all zeros on initial submission of this transaction. Enter the DCN assigned to the transaction by ECC-M when submitting an amended record. If this field is completed, field position 30 must contain an 'X' indicating that this transaction is an amendment to a previous transaction. |
| 411-510 | Filler | 100 | Space Filled. |
| 511-520 | User Field | 10 | Use this field for any describe information you may require; otherwise, space fill. The acknowledgment file WILL include this field. |

Customer (Part I - Section A) (2C) Record - Required

This record identifies the person(s) or organization(s) for which this transaction was completed. This record is required. There must be at least one of these records for every customer involved in this transaction. The 2C record item numbers refer to the CTR-C Form Part I.

| Field Position | Field Name | Length | Description and Remarks |
|-----------------------|---|---------------|--|
| 1-2 | Record Type | 2 | REQUIRED. Enter "2C". |
| 3-7 | Location Control Code (LCC) | 5 | REQUIRED. Enter the LCC for the submitting casino. Do not use all zeros. |
| 8-12 | Transaction Sequence Number | 5 | REQUIRED. Enter the transaction sequence number from the associated Transaction Summary (2B) Record. |
| 13 | Multiple Persons (Item 2) | 1 | Enter an 'X', if there are multiple persons. |
| 14-48 | Organization or Individual Last Name (Item 3) | 35 | REQUIRED. Enter the customer's last name. Use the standard name editing instructions in Attachment E - Field Editing Instructions. Left justify and space fill unused positions. |
| 49-67 | Individual First Name (Item 4) | 19 | REQUIRED if individual. Enter the customer's first name. Use the standard name editing instructions in Attachment E - Field Editing Instructions. Enter 'XX' if an organization. Left justify and space fill unused positions. |
| 68 | Individual's Middle Initial (Item 5) | 1 | Enter the customer's middle initial if known. Space fill if there is no middle initial. Use the standard name editing instructions in Attachment E - Field Editing Instructions. |
| 69-123 | Doing Business As (DBA) (Item 6) | 55 | Enter the customer Doing Business As (DBA) name. Use the standard name editing instructions in Attachment E - Field Editing Instructions. Left justify and space fill unused positions. |
| 124-173 | Street Address (Item 7) | 50 | REQUIRED. Enter the customer's street address. Do not enter post office box number. Do not abbreviate. Left justify and space fill unused positions. |

| Field Position | Field Name | Length | Description and Remarks | | | | | | | | |
|----------------|---|--------|--|-------------|--------------------|---|---|---|--------------------------------------|---|--------------|
| 174-198 | City (Item 9) | 25 | REQUIRED. Enter the customer's city. Do not abbreviate. Left justify and fill space fill unused positions. | | | | | | | | |
| 199-200 | State (Item 10) | 2 | REQUIRED. Enter the customer's state code. Enter "XX" if the state is unknown or the Country Code at field position 155-156 is not US, CA, or MX. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf . | | | | | | | | |
| 201-209 | ZIP Code (Item 11) | 9 | REQUIRED. Enter the customer's valid 9-digit ZIP Code. If only the first 5 digits are known, left justify and space fill the unused positions. If 5 or 9 digits, entry cannot be all zeros or all nines. If 9 digits, the last 4 cannot be all zeros or all nines. | | | | | | | | |
| 210-211 | Country Code (Item 12) | 2 | REQUIRED. Enter a valid 2-digit country code. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf . | | | | | | | | |
| 212-220 | SSN/EIN (Item 8) | 9 | REQUIRED. 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. If the customer is a nonresident alien who does not have an SSN, enter 'XX', left justified and space filled. Do not enter hyphens, slashes, or invalid entries such as all nines, all zeros, or "123456789". | | | | | | | | |
| 221-228 | Date of Birth (Item 13) | 8 | REQUIRED. Enter a valid date of birth. Enter as a numeric 8-position field in format: month, day, century, year (MMDDCCYY). Enter 'XX' in the MM field if entire date is unknown. | | | | | | | | |
| 229 | Method of Identification (Item 14) | 1 | REQUIRED. Enter the code for the method of identification used to verify the customer's identity. If more than one type of ID is used, always submit first type. <table border="0"> <tr> <td><u>Code</u></td> <td><u>Description</u></td> </tr> <tr> <td>A</td> <td>Examined identification credential/document</td> </tr> <tr> <td>B</td> <td>Known Customer - information on file</td> </tr> <tr> <td>C</td> <td>Organization</td> </tr> </table> | <u>Code</u> | <u>Description</u> | A | Examined identification credential/document | B | Known Customer - information on file | C | Organization |
| <u>Code</u> | <u>Description</u> | | | | | | | | | | |
| A | Examined identification credential/document | | | | | | | | | | |
| B | Known Customer - information on file | | | | | | | | | | |
| C | Organization | | | | | | | | | | |

| Field Position | Field Name | Length | Description and Remarks | | | | | | | | | | |
|----------------|--------------------------------------|--------|--|-------------|--------------------|---|---------------------------|---|----------|---|--------------------|---|-------|
| 230 | Describe ID Credential (Item 15) | 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. <u>If field position 229 (item 14 on the form) is coded 'C', leave this item blank.</u> <table border="0"> <tr> <td><u>Code</u></td> <td><u>Description</u></td> </tr> <tr> <td>A</td> <td>Driver's license/State ID</td> </tr> <tr> <td>B</td> <td>Passport</td> </tr> <tr> <td>C</td> <td>Alien registration</td> </tr> <tr> <td>Z</td> <td>Other</td> </tr> </table> | <u>Code</u> | <u>Description</u> | A | Driver's license/State ID | B | Passport | C | Alien registration | Z | Other |
| <u>Code</u> | <u>Description</u> | | | | | | | | | | | | |
| A | Driver's license/State ID | | | | | | | | | | | | |
| B | Passport | | | | | | | | | | | | |
| C | Alien registration | | | | | | | | | | | | |
| Z | Other | | | | | | | | | | | | |
| 231-254 | Other Description (Item 15z) | 24 | REQUIRED if 'Z' is entered in position 230. If code in ID credential above is 'Z', 'other', enter description. Left justify the entry and space fill any unused positions. <u>If field position 229 (item 14 on the form) is coded 'C', leave this item blank.</u> | | | | | | | | | | |
| 255-256 | ID Issued by State/Country (Item 15) | 2 | REQUIRED. Enter valid country code or state code from http://www.fincen.gov/forms/files/country_and_state_codes.pdf , from where the identification was issued. <u>If field position 229 (item 14 on the form) is coded 'C', leave this item blank.</u> | | | | | | | | | | |
| 257-278 | ID Number (Item 15) | 22 | REQUIRED. Enter the number from the identification. Left justify the entry and space fill any unused positions. <u>If field position 229 (item 14 on the form) is coded 'C', leave this item blank.</u> | | | | | | | | | | |
| 279-300 | Customer Account Number (Item 16) | 22 | Enter the principal account number the casino has assigned to the owner of this transaction. If the transaction does not involve an account number, enter 'XX'; left justify the entry and space fill any unused positions. | | | | | | | | | | |
| 301-510 | Filler | 210 | Space Filled. | | | | | | | | | | |
| 511-520 | User Field | 10 | Use this field for any descriptive information you may require; otherwise, space fill. The acknowledgment file WILL include this field. | | | | | | | | | | |

Agent (Part I- 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. The numbers listed on the 2D record item numbers refer to the CTR-C Form Part I (section B).

| Field Position | Field Name | Length | Description and Remarks |
|-----------------------|-------------------------------------|---------------|--|
| 1-2 | Record Type | 2 | REQUIRED. Enter "2D". |
| 3-7 | Location Control Code (LCC) | 5 | REQUIRED. Enter the LCC for the submitting casino. Do not use all zeros. |
| 8-12 | Transaction Sequence Number | 5 | REQUIRED. Enter the transaction sequence number from the associated Transaction Summary (2B) Record. |
| 13 | Multiple Agents Indicator (Item 17) | 1 | Enter an 'X', if there are multiple agents. |
| 14-48 | Agent Last Name (Item 18) | 35 | Enter the agent's last name. Use the name editing instructions in Attachment E - Field Editing Instructions. Left justify and space fill unused positions. |
| 49-67 | Agent First Name (Item 19) | 19 | Enter agent's first name. Use the name editing instructions in Attachment E - Field Editing Instructions. Left justify and space fill unused positions. |
| 68 | Agent Middle Initial (Item 20) | 1 | Enter agent's middle initial. Space fill if no middle initial. |
| 69-118 | Agent Street Address (Item 21) | 50 | Enter the agent's mailing address. Do not use Post Office Box. Left justify and space fill unused positions. |
| 119-143 | Agent City (Item 23) | 25 | Enter agent's city. Do not abbreviate. Left justify and space fill unused positions. |
| 144-145 | Agent State (Item 24) | 2 | Enter the agent's state code. Enter "XX" if the state is unknown or the Country Code at field position 155-156 is not US, CA, or MX. Use the valid abbreviation from http://www.fincen.gov/forms/files/country_and_state_codes.pdf . |

BSA Electronic Filing Requirements For The Currency Transaction Report by Casinos (CTR-C) (FinCEN Form 103)

| Field Position | Field Name | Length | Description and Remarks | | | | | | | | | | |
|----------------|---|--------|---|-------------|--------------------|---|---|---|--------------------------------------|---|--------------------|---|-------|
| 146-154 | Agent ZIP Code (Item 25) | 9 | Enter the valid 9-digit ZIP Code. If only the first 5 digits are known, left justify and space fill the unused positions. If 5 or 9 digits, entry cannot be all zeros or all nines. If 9 digits, the last 4 cannot be all zeros or all nines. | | | | | | | | | | |
| 155-156 | Country Code (Item 26) | 2 | Enter a valid 2-digit country code. Use http://www.fincen.gov/forms/files/country_and_state_codes.pdf . | | | | | | | | | | |
| 157-165 | SSN (Item 22) | 9 | Enter the agent's SSN. If that individual is a non-resident alien who does not have an SSN or ITIN, enter 'XX'; left justify the entry and space fill the unused positions. Do not enter hyphens, slashes, or invalid entries such as all nines, all zeros, or "123456789". | | | | | | | | | | |
| 166-173 | Date of Birth (Item 27) | 8 | Enter the date of birth, if it is known. Enter as a numeric 8-position field in format: month, day, century, year (MMDDCCYY). Enter 'XX' in the MM field if entire date is unknown. | | | | | | | | | | |
| 174 | Method of Identification (Item 28) | 1 | Enter the code for the method 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. <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;"><u>Code</u></td> <td style="text-align: center;"><u>Description</u></td> </tr> <tr> <td style="text-align: center;">A</td> <td>Examined identification credential/document</td> </tr> <tr> <td style="text-align: center;">B</td> <td>Known Customer - information on file</td> </tr> </table> | <u>Code</u> | <u>Description</u> | A | Examined identification credential/document | B | Known Customer - information on file | | | | |
| <u>Code</u> | <u>Description</u> | | | | | | | | | | | | |
| A | Examined identification credential/document | | | | | | | | | | | | |
| B | Known Customer - information on file | | | | | | | | | | | | |
| 175 | Describe ID Credential (Item 29) | 1 | 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. <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;"><u>Code</u></td> <td style="text-align: center;"><u>Description</u></td> </tr> <tr> <td style="text-align: center;">A</td> <td>Driver's license/State ID</td> </tr> <tr> <td style="text-align: center;">B</td> <td>Passport</td> </tr> <tr> <td style="text-align: center;">C</td> <td>Alien registration</td> </tr> <tr> <td style="text-align: center;">Z</td> <td>Other</td> </tr> </table> | <u>Code</u> | <u>Description</u> | A | Driver's license/State ID | B | Passport | C | Alien registration | Z | Other |
| <u>Code</u> | <u>Description</u> | | | | | | | | | | | | |
| A | Driver's license/State ID | | | | | | | | | | | | |
| B | Passport | | | | | | | | | | | | |
| C | Alien registration | | | | | | | | | | | | |
| Z | Other | | | | | | | | | | | | |
| 176-199 | Other Description (Item 29z) | 24 | If code in 'Describe ID Credential' in position 175 is 'Z' 'other', enter description. Left justify the entry and space fill unused positions. | | | | | | | | | | |
| 200-201 | ID Issued By State/Country (Item 29) | 2 | Enter the valid state or country code where identification was issued. Use state and country codes from http://www.fincen.gov/forms/files/country_and_state_codes.pdf . | | | | | | | | | | |
| 202-223 | ID Number (Item 29) | 22 | Enter the number from the identification. Left justify the entry and space fill unused positions. | | | | | | | | | | |

| Field Position | Field Name | Length | Description and Remarks |
|----------------|------------|--------|---|
| 224-510 | Filler | 287 | Space Filled. |
| 511-520 | User Field | 10 | Use this field for any descriptive information you may require; otherwise, space fill. The acknowledgment file WILL include this field. |

Location Summary (8A) Record - Required

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.

| Field Position | Field Name | Length | Description and Remarks |
|-----------------------|---|---------------|--|
| 1-2 | Record Type | 2 | REQUIRED. Enter "8A". |
| 3-7 | Location Control Code (LCC) | 5 | REQUIRED. Enter the LCC for the submitting casino. Do not use all zeros. |
| 8-14 | Transaction Summary Record Count for Location | 7 | REQUIRED. Enter number of Transaction Summary (2B) records for the casino location. Right justify and fill unused positions with zeros. |
| 15-21 | Filler | 7 | Space Filled. |
| 22-28 | Customer Record Count | 7 | REQUIRED. Enter the number of Customer (Part I - Section A) (2C) Records for the casino location. Right justify and fill unused positions with zeros. |
| 29-35 | Agent Record Count | 7 | REQUIRED. Enter the number of Agent (Part I - Section B) (2D) Records for the casino location. Right justify and fill unused positions with zeros. |
| 36-50 | Total Amount Cash In Reported for Location | 15 | REQUIRED. Enter the total dollar amount of cash in reported for the casino location in whole dollars. Right justify and fill unused positions with zeros. |
| 51-65 | Total Amount Cash Out Reported for Location | 15 | REQUIRED. Enter the total dollar amount of cash out reported for the casino location in whole dollars. Right justify and fill unused positions with zeros. |
| 66-510 | Filler | 445 | Space Filled. |
| 511-520 | User Field | 10 | Use this field for any descriptive information you may require; otherwise, space fill. Not included in acknowledgment file. |

Casino Summary (8B) Record - Required

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.

| Field Position | Field Name | Length | Description and Remarks |
|-----------------------|---|---------------|---|
| 1-2 | Record Type | 2 | REQUIRED. Enter "8B". |
| 3-9 | Location Record Count | 7 | REQUIRED. Enter number of Casino Location Header (2A) Records for the Casino. Right justify and fill unused positions with zeros. |
| 10-16 | Transaction Summary Record Count | 7 | REQUIRED. Enter number of Transaction Summary (2B) records for the Casino. Right justify and fill unused positions with zeros. |
| 17-23 | Filler | 7 | Space Filled. |
| 24-30 | Customer Record Count | 7 | REQUIRED. Enter number of Customer (Part I - Section A) (2C) Records for the Casino. Right justify and fill unused positions with zeros. |
| 31-37 | Agent Record Count | 7 | REQUIRED. Enter number of Agent (Part I - Section B) (2D) Records for the Casino. Right justify and fill unused positions with zeros. |
| 38-52 | Total Cash In Amount Reported for Casino | 15 | REQUIRED. Enter the total dollar amount of cash in reported for the Casino in whole dollars. Right justify and fill unused positions with zeros. |
| 53-67 | Total Cash Out Amount Reported for Casino | 15 | REQUIRED. Enter the total dollar amount of cash out reported for the Casino in whole dollars. Right justify and fill unused positions with zeros. |
| 68-510 | Filler | 443 | Space Filled. |
| 511-520 | User Field | 10 | Use this field for any descriptive information you may require; otherwise, space fill. Not included in acknowledgment file. |

File Summary (9Z) Record - Required

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.

| Field Position | Field Name | Length | Description and Remarks |
|-----------------------|-------------------------------------|---------------|--|
| 1-2 | Record Type | 2 | REQUIRED. Enter "9Z". |
| 3-9 | Casino Summary Record Count | 7 | REQUIRED. Enter number of Casino Summary (8B) records. Right justify and fill unused positions with zeros. |
| 10-16 | Location Summary Record Count | 7 | REQUIRED. Enter number of Location Summary (8A) records. Right justify and fill unused positions with zeros. |
| 17-23 | Transaction Summary Record Count | 7 | REQUIRED. Enter number of Transaction Summary (2B) Records. Right justify and fill unused positions with zeros. |
| 24-30 | Filler | 7 | Space Filled. |
| 31-37 | Customer Record Count | 7 | REQUIRED. Enter number of Customer (2C) records. Right justify and fill unused positions with zeros. |
| 38-44 | Agent Record Count | 7 | REQUIRED. Enter number of Agent (2D) records. Right justify and fill unused positions with zeros. |
| 45-59 | Total File Cash In Amount Reported | 15 | REQUIRED. Enter total dollar amount of cash in reported in whole dollars. Right justify and fill unused positions with zeros. |
| 60-74 | Total File Cash Out Amount Reported | 15 | REQUIRED. Enter total dollar amount of cash out reported in whole dollars. Right justify and fill unused positions with zeros. |
| 75-510 | Filler | 436 | Space Filled. |
| 511-520 | User Field | 10 | Use this field for any descriptive information you may require; otherwise, enter blanks. Not included in acknowledgment file. |

Acknowledgement Record Formats

Acknowledgement Transmitter (1A) Record

This record is created by ECC-M 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 ECC-M. **All records on the file will be 80 positions.**

| Field Position | Field Name | Length | Description and Remarks |
|----------------|--------------------------------|--------|--|
| 1-2 | Record Type | 2 | REQUIRED. Enter "1A". |
| 3-10 | Coverage Beginning Date | 8 | From positions 223-230 of the incoming (1A) record. Enter as a numeric 8-position field in format: month, day, century, year (MMDDCCYY). |
| 11-18 | Coverage Ending Date | 8 | From positions 231-238 of the incoming (1A) record. Enter as a numeric 8-position field in format: month, day, century, year (MMDDCCYY). |
| 19-26 | Transmitter Control Code (TCC) | 8 | From positions 239-246 of the incoming (1A) record. |
| 27-56 | Error Codes (1-10) | 30 | Error Codes are assigned by ECC-M after consistency and validity edits. The Error Code List follows later in this document. Each code is 3 digits. Unused codes are zero filled. |
| 57-60 | Format Indicator | 4 | Enter '0051'. |
| 61-80 | Filler | 20 | Space Filled. |

Acknowledgement Casino Location Header (2A) Record

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

| Field Position | Field Name | Length | Description and Remarks |
|-----------------------|-----------------------------|---------------|--|
| 1-2 | Record Type | 2 | REQUIRED. Enter "2A". |
| 3-7 | Location Control Code (LCC) | 5 | From positions 11-15 of incoming (2A) record. |
| 8-34 | Error Codes (1-9) | 27 | Error Codes are assigned by ECC-M after consistency and validity edits. The Error Code List follows later in this document. Each code is 3 digits. Unused codes are zero filled. |
| 35-80 | Filler | 46 | Space Filled. |

Acknowledgement Transaction Summary (2B) Record

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

| Field Position | Field Name | Length | Description and Remarks |
|-----------------------|-------------------------------|---------------|--|
| 1-2 | Record Type | 2 | REQUIRED. Enter "2B". |
| 3-7 | Transaction Sequence Number | 5 | From positions 16-20 of incoming (2B) record. |
| 8-21 | Document Control Number (DCN) | 14 | Assigned by ECC-M. A unique identifying number. |
| 22-31 | User Field | 10 | From positions 511-520 of the incoming (2B) record. |
| 32-33 | Filler | 2 | Space Filled. |
| 34-57 | Error Codes (1-8) | 24 | Error Codes are assigned by ECC-M after consistency and validity edits. The Error Code List follows later in this document. Each code is 3 digits. Unused codes are zero filled. |
| 58-80 | Filler | 23 | Space Filled. |

Acknowledgement Customer (Part I - Section A) Information (2C) Record

This record is created by ECC-M as part of an acknowledgment file returned to the Transmitter. This record contains identifying information and error codes pertaining to customer records for a given transaction. The transaction sequence number identifies the transaction and there will be one 2C acknowledgement record for every incoming 2C customer record in the original transaction. The ECC-M assigned DCN is returned to the transmitter for each transaction.

| Field Position | Field Name | Length | Description and Remarks |
|-----------------------|-------------------------------|---------------|--|
| 1-2 | Record Type | 2 | REQUIRED. Enter "2C". |
| 3-7 | Transaction Sequence Number | 5 | From positions 16-20 of incoming (2B) record. |
| 8-21 | Document Control Number (DCN) | 14 | Assigned by ECC-M. A unique identifying number. |
| 22-31 | User Field | 10 | From positions 511-520 of the incoming (2C) record. |
| 32-33 | Filler | 2 | Space Filled. |
| 34-57 | Error Codes (1-8) | 24 | Error Codes are assigned by ECC-M after consistency and validity edits. The Error Code List follows later in this document. Each code is 3 digits. Unused codes are zero filled. |
| 58-80 | Filler | 23 | Space Filled. |

Acknowledgement Agent (Part I - Section B) Information (2D) Record

This record is created by ECC-M as part of an acknowledgment file returned to the Transmitter. This record contains identifying information and error codes pertaining to agent records for a given transaction. The transaction sequence number identifies the transaction and there will be one 2D acknowledgement record for every incoming 2D agent record in the original transaction. The ECC-M assigned DCN is returned to the transmitter for each transaction.

| Field Position | Field Name | Length | Description and Remarks |
|-----------------------|-------------------------------|---------------|--|
| 1-2 | Record Type | 2 | REQUIRED. Enter "2D". |
| 3-7 | Transaction Sequence Number | 5 | From positions 16-20 of incoming (2B) record. |
| 8-21 | Document Control Number (DCN) | 14 | Assigned by ECC-M. A unique identifying number. |
| 22-31 | User Field | 10 | From positions 511-520 of the incoming (2D) record. |
| 32-33 | Filler | 2 | Space Filled. |
| 34-57 | Error Codes (1-8) | 24 | Error Codes are assigned by ECC-M after consistency and validity edits. The Error Code List follows later in this document. Each code is 3 digits. Unused codes are zero filled. |
| 58-80 | Filler | 23 | Space filled. |

Acknowledgement Trailer for File Summary (9Z) Record

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

| Field Position | Field Name | Length | Description and Remarks |
|-----------------------|---|---------------|--------------------------------|
| 1-2 | Record Type | 2 | REQUIRED. Enter "9Z". |
| 3-9 | Number of Locations in File | 7 | Generated by ECC-M. |
| 10-16 | Number of Transactions (CTR-Cs) in File | 7 | Generated by ECC-M. |
| 17-23 | Number of Customer (2C) Records in File | 7 | Generated by ECC-M. |
| 24-30 | Number of Agent (2D) Records in File | 7 | Generated by ECC-M. |
| 31-80 | Filler | 50 | Space Filled. |

Attachment A – Definitions

Below are the definitions for terms specific to this document. General definitions are contained in the General Specifications document.

| Term | Description |
|-----------------------------|---|
| Agent | Relates to the entries in Part I, Section B of the CTR-C. Any individual who conducts a currency transaction on behalf of another individual or organization. |
| 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 \$1,000,000.00. 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 and having gross annual gaming revenues in excess of \$1,000,000.00. 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. |
| CTR-C | 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. |
| Filer | Casino that prepares the CTR-C. |
| 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. |
| Location Control Code (LCC) | Code assigned 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 electronically. |

Attachment B - Error Code List

A file error will result in a rejection of the batch file.

| Error Code | Error Description | Record | Field Position | Form Field Number |
|-------------------|---|--------|----------------|-------------------|
| File Error | | | | |
| F00 | The Record Identification is invalid. The Transmitter Control Code (TCC), Employer Identification Code (TIN/EIN) and Location Control Code (LCC) do not match the ECC-M files. | | | |
| F01 | Non-numeric record counts were reported on the summary record. | | | |
| F02 | The number or records reported in the 9Z record 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. | | | |
| F24 | Number of forms reported on the batch form does not match the computed count of the forms found in the file. | | | |
| F25 | The number of records reported in the 9Z record 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. | | | |

| Error Code | Error Description | Record | Field Position | Form Field Number |
|--------------------------------|---|--------|----------------|-------------------|
| F28 | The number of records reported in the 9Z record does not match the computer count for the Customer (Part I, Section A) (2C) Record. | | | |
| F29 | The number of records reported in the 9Z record does not match the computer count for the Agent (Part I, 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 (9Z) Record on the file. | | | |
| F33 | The record was submitted as an Amendment Record with a DCN but no original CTR-C record was found. | | | |
| F34 | An invalid record type was present on the submitted file. | | | |
| F37 | A duplicate "Transaction Sequence" / "Transaction Sequence Number" was present on the submitted file. | | | |
| Transmitter (1A) Record | | | | |
| T01 | The Name in the Transmitter (1A) Record is blank. | 1A | 3-57 | |
| T02 | The Address in the Transmitter (1A) Record is blank. | 1A | 58-107 | |
| T03 | The City in the Transmitter (1A) Record is blank. | 1A | 108-132 | |
| T04 | The State in the Transmitter Record (1A) is blank. | 1A | 133-134 | |
| T05 | The ZIP Code in the Transmitter (1A) Record is blank. | 1A | 135-143 | |

| Error Code | Error Description | Record | Field Position | Form Field Number |
|---|---|---------------|-----------------------|--------------------------|
| T06 | The Area Code and/or Telephone Number in the Transmitter (1A) Record is blank. | 1A | 144-153 | |
| T07 | The Contact Name in the Transmitter (1A) Record is blank. | 1A | 154-208 | |
| T08 | The TCC in the Transmitter (1A) Record is blank or invalid. | 1A | 234-241 | |
| T09 | The Transmitter EIN in the Transmitter (1A) Record is blank or invalid. | 1A | 209-217 | |
| T10 | The Coverage beginning date in the Transmitter (1A) Record is blank or invalid. | 1A | 218-225 | |
| T11 | The Coverage ending date in the Transmitter (1A) Record is blank or invalid. | 1A | 226-233 | |
| Casino Location Header (2A) Record | | | | |
| L01 | The Location Control Code (LCC) in the Location Header (2A) Record is blank or invalid. | 2A | 11-15 | |
| L02 | The Resolution code in the Location Header (2A) Record is missing or invalid. | 2A | 394 | |
| L03 | The Casino Trade Name and/or Legal Name in the Location Header (2A) Record is blank. | 2A | 16-70 71-125 | 35 36 |
| L04 | The Casino Address in the Location Header (2A) Record is blank. | 2A | 135-184 | 38 |
| L05 | The Casino City in the Location Header (2A) Record is blank. | 2A | 185-209 | 39 |
| L06 | The Casino State in the Location Header (2A) Record is blank. | 2A | 210-211 | 40 |
| L07 | The Casino ZIP Code in the Location Header (2A) Record is blank or invalid. | 2A | 212-220 | 41 |

| Error Code | Error Description | Record | Field Position | Form Field Number |
|--|--|--------|----------------|-------------------|
| L08 | The EIN in the Location Header (2A) Record is blank or invalid. | 2A | 126-134 | 37 |
| Error Codes - Returned on the Acknowledgment (2B), (2C), and (2D) Records | | | | |
| C01 | The Name in the Agent (2D) Record is invalid due to one of the following reasons: a. The Name equals spaces, zeros or low values. b. The Name was not keyed in the proper format. | 2D | 14-68 | 18-20 |
| C02 | The Address in the Agent ('2D') 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 invalid if the country is equal to the U.S., Canada or Mexico. d. The Country is not a standard abbreviation. e. The ZIP Code is blank, zeros, or invalid if the country is equal to the U.S. | 2D | 69-156 | 21,23-26 |
| C03 | The Method of Identification in the Agent (2D) Record is not a valid code or is incomplete. | 2D | 174 | 28 |
| C04 | The Date of Birth in the Agent (2D) Record is blank or invalid. | 2D | 166-173 | 27 |
| C07 | The Name/ID is incomplete in the Agent (2D) Record. | 2D | 174-223 | 28-29 |
| C11 | The name in the Customer (2C) Record is invalid. | 2C | 14-68 | 3-5 |

| Error Code | Error Description | Record | Field Position | Form Field Number |
|------------|---|--------|--|--------------------------|
| 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 invalid 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, zeros, or invalid if the country is equal to the U.S. | 2C | 124-211 | 7, 9-12 |
| C13 | The Method of Identification in the Customer (2C) Record is not a valid code or is incomplete. | 2C | 229 | 14 |
| C14 | The Date of Birth in the Customer (2C) Record is blank or invalid. | 2C | 221-228 | 13 |
| C16 | The Customer's Account Number is missing in the Customer (2C) Record. | 2C | 279-300 | 16 |
| C20 | Transaction codes are missing or invalid in the Transaction Summary (2B) Record. A minimum of one of the following transaction codes must be present: a. One of the A-H or Z Transaction Cash In Codes at Field Position 31, or b. One of the I-P, T, or Z Transaction Cash Out Codes at Field Position 185. | 2B | 31,44,57, 70,83,96, 109,122, 135 185,198, 211,224, 237,250, 263,276, 289,302 | 31 32 |

| Error Code | Error Description | Record | Field Position | Form Field Number |
|------------|---|--------|-------------------------------|----------------------|
| 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. c. The Amount(s) is invalid. See Attachment D. | 2B | 352-366 367-381 | 31 Total 32 Total |
| 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. | 2B | 382-389 | 33 |
| C26 | The SSN (TIN) in the Agent (2D) Record is invalid, or the SSN is equal to spaces, zeros or is non-numeric. | 2D | 157-165 | 22 |
| C27 | The SSN does not match our file as a valid SSN for the Name shown in the Agent (2D) Record. | 2D | 157-165 | 22 |
| C28 | The Identifying EIN/SSN in the Customer (2C) Record is an invalid number, contains all zeros or is equal to all nines. | 2C | 212-220 | 8 |
| C29 | The Name in the Customer (2C) Record does not match the EIN/SSN in the ECC-M files. | 2C | 212-220 | 8 |
| C32 | The Approving Official's Title or Preparer's Name or Contact's Name in the Location Header (2A) Record is missing. | 2A | 246-265 266-320 321-375 | 43 46 47 |

| Error Code | Error Description | Record | Field Position | Form Field Number |
|------------|--|----------|----------------|-------------------|
| 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. | 2A | 386-393 | 45 |
| C36 | The Foreign Currency Country Code in the Transaction Summary (2B) Record is blank or invalid. | 2B | 390-391 | |
| C37 | The Number of Customer Records (2B) conflicts with the Multiple Persons indicator (2C). | 2B 2C | 392-393 13 | 2 |
| C38 | The Number of Agent Records (2B) conflicts with the Multiple Agents indicator (2D). | 2B 2D | 394-395 13 | 17 |
| C94 | The Other Type Description field on the Casino Location Header (2A) Record is blank when the Type of Gaming Institution field code is Z. | 2A | 222-245 | 42 - Other |
| C95 | The Type of Gaming Institution field on the Casino Location Header (2A) Record does not contain a code of A, B, C, or Z. | 2A | 221 | 42 |
| C96 | The Other Description field on the Customer (Part I - Section A) (2C) Record is blank when the Describe ID Credential field code is Z. | 2C | 231-254 | 15 - Z Other |
| C97 | The ID Number field on the Customer (Part I - Section A) (2C) Record is blank. | 2C | 257 -278 | 15 - Number |
| C98 | The ID Issued by State/Country field on the Customer (Part I - Section A) (2C) Record is blank. | 2C | 255-256 | 15 - Issued By |

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| Error Code | Error Description | Record | Field Position | Form Field Number |
|------------|---|--------|----------------|-------------------|
| C99 | The Describe ID Credential field on the Customer (Part I - Section A) (2C) Record does not contain a code of A, B, C, or Z. | 2C | 230 | 15 |

Attachment C - FAQs

| | |
|-----|---|
| Q1. | What code do we use for a location control code in records? |
| A1. | ECC-M will assign a location control code to every casino location filing electronically. Although most casinos have only one location per EIN (TIN), some casinos have multiple locations. |
| Q2. | If an error is identified in the Location (2A) records, will ECC-M still validate subsequent Location records? |
| A2. | 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. |
| Q3. | 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? |
| A3. | 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. You can also use the User Field position at the end of the record to enter an Internal Record Number (IRN) to match up acknowledgement records. |
| Q4. | The Amount of Transaction on the (2B) Record is in whole dollars. If I have a transaction for \$10,000.01, which is reportable, how should this be submitted? |
| A4. | Form instructions require that all fractional amounts be rounded up to the next whole dollar. This transaction for \$10,000.01 must be reported as \$10,001. |

Attachment D - Invalid Transaction Total Amounts

The Transaction Total Amounts of currency is invalid in the Transaction Summary (2B) Record due to one of the following reasons:

- The amount is blank.
- The amount is not numeric.
- The amount is invalid. All of the following rules are checked:
 - The Total Amount (either Cash In or Cash Out) must be $\geq \$10,000$. If multiple transactions are involved, it is the aggregate total amount that must be more than \$10,000.
 - Cash In and Cash Out are separate and are not aggregated in any fashion.
 - If Cash In is $\geq \$10,000$ and Cash Out is $= 0$ or $\geq \$10,000$, then there is no acknowledgment error
 - If Cash In is $\geq \$10,000$ and cash Out is $= 0$, then there is no acknowledgment error
 - If Cash In is $\geq \$10,000$ and Cash Out is $< \$10,000$ and > 0 , then there is an acknowledgment error
 - If cash in and Cash out amounts are both $=$ to blank, then there is an acknowledgment error
 - If Cash In and Cash Out amounts are both $=$ to 0, then there is an acknowledgment error
 - If Cash In is $< 10,000$ and Cash out is blank, then there is an acknowledgment error
 - If Cash In is $< 10,000$ and Cash Out is 0, then there is acknowledgment error
 - If Cash Out is $\geq \$10,000$ and Cash In is $= 0$ or $\geq \$10,000$, then there is no acknowledgment error

- If Cash Out is \geq \$10,000 and Cash In is = 0, then there is no acknowledgment error
- If Cash Out is \geq \$10,000 and Cash In is $<$ \$10,000 and $>$ 0, then there is an acknowledgment error
- If Cash Out is $<$ 10,000 and Cash In is blank, then there is an acknowledgment error
- If Cash Out is $<$ 10,000 and Cash In is 0, then there is an acknowledgment error
- Note: If the cash in or cash out amount is equal to zero, then that field must be left blank.

Attachment E - Field Editing Instructions

These instructions apply to all CTR-C text fields.

- A. Delete any name titles, prefixes, suffixes or other descriptive information such as Mr., Mrs., Dr., Reverend, Partner, Trustee, JR, or III.
- B. Delete all punctuation (e.g. "INC." would be entered as "INC").
- C. Do not use the following words or variations of these words in fields:
 - a. COMPUTER GENERATED
 - b. N/A
 - c. NONE
 - d. NOT APPLICABLE
 - e. OTHER
 - f. SAME
 - g. SAME AS ABOVE
 - h. SEE ABOVE
 - i. SIGNATURE CARD
 - j. T/A
 - k. UNKNOWN
 - l. VARIOUS
- D. Multiple/compound surnames. Care must be taken in formatting foreign multiple and compound surnames that consist of multiple names. Foreign multiple surnames must be entered without punctuation in the last name field. For example, Spanish names with multiple surnames are usually written in the order of first name, father's last name, and mother's last name (e.g. Juan Vega Santiago). The father and mother last names would be entered together without punctuation in the last name field (e.g. as VEGA SANTIAGO). Compound surnames are entered with spaces and without punctuation in the last name field (e.g. VON BRAUN).