



Date of Issuance: 8/16/21

Solicitation No. 8300001183

Requisition No. 8300024242

Amendment No. 1

Hour and date specified for receipt of offers is changed: No Yes, to: _____ CST

Pursuant to OAC 260:115-7-30(d), this document shall serve as official notice of amendment to the solicitation identified above. Such notice is being provided to all suppliers to which the original solicitation was sent.

Suppliers submitting bids or quotations shall acknowledge receipt of this solicitation amendment prior to the hour and date specified in the solicitation as follows:

- (1) Sign and return a copy of this amendment with the solicitation response being submitted; or,
- (2) If the supplier has already submitted a response, this acknowledgement must be signed and returned prior to the solicitation deadline. All amendment acknowledgements submitted separately shall have the solicitation number and bid opening date printed clearly on the front of the envelope.

ISSUED BY and RETURN TO:

U.S. Postal Delivery or Personal or Common

Carrier Delivery:

OMES Central Purchasing
Will Rogers Building
ATTN: Teresa Terry
2401 N. Lincoln Blvd., Ste. 116
Oklahoma City, OK 73105

Teresa Terry
Contracting Officer

(405) 521-2432
Phone Number

Teresa.terry@omes.ok.gov
E-Mail Address

Description of Amendment:

a. This is to incorporate the following:

On behalf of the State of Oklahoma, the Office of Management and Enterprise Services (OMES) gives notice of Appendix 1.6 Current File Formats (Data Files) on the procurement page. The link within the solicitation is not working.

b. All other terms and conditions remain unchanged.

Supplier Company Name (**PRINT**)

Date

Authorized Representative Name (**PRINT**) Title

Authorized Representative Signature

Appendix 1.6
Current File Formats (Data Files)

Food Stamp Activity Field Data Elements

<u>Field</u>	<u>Position</u>	<u>Length</u>	<u>Type</u>	<u>Description</u>	<u>Remarks</u>
1	001-002	2	A	RECORD-TYPE	“DT” indicates detail Record
2	003-015	13	A	STATE-ID	Case Number
3	016-027	12	N	EBT-ACCT-NUM	Vendor Account Number
4	028-046	19	A	EBT-CARD-NUM	Card number performing transaction
5	047-048	2	A	PRI-ALT-IND	01 THRU 99
6	049-051	3	A	TRANS-TYPE	Transaction Type - See List below
7	052-059	8	D	TRANS-DATE	CCYYMMDD
8	060-067	8	N	TRANS-TIME	HHMMSSMS
9	068-069	2	A	TRANS-RESP	Response Code - See List below
10	070-071	2	A	REV-CODE	ACS will set to “00”
11	072-077	6	A	BENEFIT-TYPE	‘FSPA ’ = Food stamp Participating ‘FSNPA ’ = Food stamp Non-Participating ‘DFSPA ’ = Disaster FS Participating ‘DFSNPA ’ = Disaster FS Non-Participating ‘SMFP’ = Senior Farmers Market FSO = Food Stamps Online NSLC = Non SNAP Lunch COVID SNAPLC = SNAP Lunch COVID
12	078-079	2	A	CR-DB-IND	“CR” – Credit, “DR” – Debit
13	080-086	7	N	REQ-AMOUNT	9(5)V99 Amount of transaction.
14	087-093	7	N	COMP-AMOUNT	9(5)V99 Completed amount of transaction impacting this Benefit Authorization (document number)
15	094-100	7	A	FILLER	VALUE SPACES
16	101-107	7	N	ACCOUNT-BAL	9(5)V99 Amount of funds available on account after transaction.
17	108-114	7	N	Authorization Balance	9(5)V99 Amount of funds available on authorization after transaction.
18	115-117	3	A	COUNTY-OFFICE	
19	118-124	7	A	FCS-NUMBER	Supplied for all FS transactions
20	125-130	6	A	FILLER	VALUE SPACES
21	131-145	15	A	POS-ATM-NO	POS/ATM ID where transaction occurred
22	146-161	16	A	AUTH-NO	Document Number impacted by transaction
23	162-167	6	A	BEN-MONTH	CCYYMM - Benefit Month of impacted Benefit Authorization
24	168-175	8	D	POST-DATE	CCYYMMDD = Settlement date
25	176-191	16	A	DCN	Contains the Client number if available, Zeros if not available
26	192-193	2	N	CARD ENTRY METHOD	“00” = Not a card swipe transaction “01” = Manually Keyed PAN “02” = Card Swiped in Terminal
27	194-241	48	A	FILLER	VALUE SPACES

Child Care Activity Field Data Elements

ALL ACTIVITY MESSAGE LAYOUT

Field Name:	Field #	Description:	Edits:	110	120	130	140	150	160	200	300	350	400	500	600	650	800
Record Type	1	The type of the record	110 – Swipes 120 – Manual Back Swipes 130 – Manual PAN Swipe 140 – Manual Claim Swipe 150 – Voids 160 – Manual Voids 200 – AT Adjustment Payment 300 – Payment to Provider 350 – Absence Payments 400 – Inactivity Record 500 – Card Status Entries 600 – Declined Transactions 650 – Pending Transactions 800 – Manual Claims Payment	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Authorization Number	2	A Unique authorization number for each client and daycare		X	X	X	X	X	X			X	X	X	X	X	X
Authorization Case Number	3	The case number		X	X	X	X	X	X	X		X	X	X	X	X	X
Authorization Person Number	4	The person number on the case for which the authorization is for		X	X	X	X	X	X	X		X	X	X	X	X	X
Contract Number	5	The contract number of the provider for which services are contracted for		X	X	X	X	X	X	X	X	X	X	X	X	X	X
Transaction Number	6	The transaction number for the transaction		X	X	X	X	X	X						X	X	

Field Name:	Field #	Description:	Edits:	110	120	130	140	150	160	200	300	350	400	500	600	650	800
Swipe Date	7	The date the swipe is for	CCYYMDD	X	X	X	X	X	X						X	X	
Swipe Time	8	The time the swipe is for	HHMMSSMM	X	X	X	X	X	X						X	X	
Swipe Type	9	This is the type of swipe	IN/OUT	X	X	X	X	X	X						X	X	
Current Date	10	The date of the swipe	CCYYMMDD	X	X	X	X	X	X		X	X	X	X	X	X	X
Current Time	11	The time of the swipe	HHMMSSMM	X	X	X	X	X	X		X	X	X	X	X	X	X
Complétion Code	12	The completion code of the transaction		X	X	X	X	X	X						X	X	
Paid Amount	13	The amount this authorization was paid for		X	X	X	X	X	X	X	X	X	X		X	X	X
Paid Date	14	The Date the authorization was paid	CCYYMMDD	X	X	X	X	X	X	X	X	X	X		X	X	X
Card #	15	The card number that made the swipe		X	X	X		X	X			X		X	X	X	
User Number	16	If swipe entered by User, the user ID					X			X				X			
Co-pay Amount	17	This is the amount of co-payment applied to this swipe		X	X	X	X	X	X						X	X	
Pay Source	18	This is the pay source from the authorization record		X	X	X	X	X	X						X	X	
Reason Code	19	This is the reason the transaction was done or rejected					X							X			
Deduction	20	This is the amount								X	X						

Field Name:	Field #	Description:	Edits:	110	120	130	140	150	160	200	300	350	400	500	600	650	800
Part Time Rate	43	Rate of a part time payment		X	X	X	X	X	X								
Full Time Rate	44	Rate of a full time payment		X	X	X	X	X	X								
Co-Pay Flag	45	Define if a co-pay is to be taken or not		X	X	X	X	X	X								
Last Modified Date	46	Identifies the date the case record was last modified	CCYYMMDD	X	X	X	X	X	X								
Last Modified By	47	Identifies the user who changed the case table		X	X	X	X	X	X								

Records needed in Activity files:

Description	Frequency AAF	Frequency PAAF
110 - Swipes	Weekly	Daily x2
120 - Manual Override Swipes - Back dated swipes using the cards	Weekly	Daily x2
130 - Manual Swipes - Swipes not using a card	Weekly	Daily x2
140 - Administrative Terminal swipes	Daily	Daily x2
150 - Voids	Weekly	Daily x2
160 - Manual Voids	Weekly	Daily x2
200 - Administrative Terminal Adjustment	Weekly	
300 - Payment to Provider	Weekly	
350 - Absence Payments	Weekly	
400 - Client Inactivity Report	Daily	
500 - Card Status Entries	Daily	
600 - Declined Transactions	Daily	Daily x2
650 - Pending Transactions	Daily	Daily x2
800 - Payment to Provider for manual entry claims	Weekly	

Pending transactions are all pending swipes and corresponding reason codes for the previous day.

Provider email addresses shall be returned as a part of the 300 record. The email address will be the address in the database at the time the file is generated. If there is no payment to the provider for a given week, an email address will not be transmitted. This will true in event of an email update during the reporting timeframe

Current Available Child Care File Formats

Provider Record File Header

Field Reference ID	Field Name	Data Type	Copy Member Data Type	Field Position in Record	Format
1	Record Type	A/N	PIC XX	1-2	
2	Source	A/N	PIC X(08)	3-10	
3	Batch Date	Date	PIC 9(08)	11-18	CCYYMMDD
4	Batch Number	N	PIC 9(10)	19-28	
5	File Name	A/N	PIC X(10)	29-38	
6	Sequence Number	N	PIC 9(06)	39-44	
7	Action	N	PIC 9(02)	45-46	
8	Pad	A/N	PIC X(557)	47-603	

Provider Record File Detail Record

Field Reference ID	Data Type	Copy Member Data Type	Field Position in Record	Format
1	A/N	X(10)	1-10	
2	DATE	9(8)	11-18	CCYYMMDD
3	DATE	9(8)	19-26	CCYYMMDD
4	A/N	X(30)	27-56	
5	A/N	X(30)	57-86	
6	A/N	X(30)	87-116	
7	A/N	X(30)	117-146	
8	A	X(2)	147-148	
9	N	X(9)	149-157	
10	N	9(9)	158-166	
11	A/N	X(30)	167-196	
12	N	9(10)	197-206	
13	A/N	X(30)	207-236	
14	A/N	9(11)v99	237-249	
15	N	9(3)	250-252	
16	A/N	X(30)	253-282	
17	A/N	X(30)	283-312	
18	A/N	X(30)	313-342	
19	A	X(2)	343-344	
20	N	X(9)	345-353	
21	N	9(5)	354-358	
22	A/N	X(10)	359-368	
23	A/N	X(2)	369-370	
24	N	9(10)	371-380	
25	A/N	X(9)	382-389	
26	A/N	X(9)	390-398	
27	Date	9(8)	399-406	
28	Date	9(8)	407-414	
29	Date	9(8)	415-422	

Field Reference ID	Data Type	Copy Member Data Type	Field Position in Record	Format
30	N	9(11)v99	423-435	
31	A/N	X(31)	436-466	
32	A/N	X(137)	467-603	

Provider Record File Trailer

Field Reference ID	Data Type	Copy Member Data Type	Field Position in Record	Format
1	A/N	PIC XX	1-2	
2	A/N	PIC X(08)	3-10	
3	Date	PIC 9(08)	11-18	CCYYMMDD
4	N	PIC 9(10)	19-28	
5	A/N	PIC X(10)	29-38	
6	N	PIC 9(06)	39-44	
7	N	PIC 9(02)	45-46	
8. (not in header)	N	PIC 9(06)	47-52	
9. (8 for header).	A/N	PIC X(551)	53-603	

On-line Provider Record Header

Field Reference ID	Data Type	Copy Member Data Type	Field Position in Record	Format
1	A/N	PIC X(02)	1-2	
2	A/N	PIC 9(08)	3-10	
3	Date	PIC 9(8)	11-18	CCYYMMDD
4	N	PIC 9(10)	19-28	
5	A/N	PIC X(10)	29-38	
6	N	PIC 9(06)	39-44	
7	N	PIC 9(02)	45-46	
8	A /N	PIC X(4)	47-50	
9	A/N	PIC x(03)	51-53	

Provider Record Attribute Flags

Byte	Default Value	Display Value
1	D	Detail or Summary
2		
3	C	C=Center, Home=H, I=In-Home
4	N	Yes or No
5	N	Yes or No
6-11		
12 - 15	1	"1", "2" or "3"
16-31		

Client Record File Header

Field Reference ID	Data Type	Copy Member Data Type	Field Position in Record	Format
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Field Reference ID	Data Type	Copy Member Data Type	Field Position in Record	Format
1	A/N	PIC XX	1-2	
2	A/N	PIC X(08)	3-10	
3	Date	PIC 9(08)	11-18	CCYYMMDD
4	N	PIC 9(10)	19-28	
5	A/N	PIC X(10)	29-38	
6	N	PIC 9(06)	39-44	
7	N	PIC 9(02)	45-46	
8	A/N	PIC X(06)	47-50	
9	A/N	PIC 9(03)	51-53	
10	A/N	PIC X(550)	54-603	

Client Record File Detail Record

Field Reference ID	Data Type	Copy Member Data Type	Field Position in Record	Format
1	A/N	X(10)	1-10	
2	N	9(3)	11-13	
3	N	X(1)	14	
4	N	X(9)	15-23	
5	N	9(10)	24-33	
6	FCS	X(10)	34-43	
7	FCS	X(19)	44-62	
8	A	X(1)	63	
9	FCS	x(30)	64-93	
10	FCS	x(30)	94-123	
11	FCS	X(20)	124-143	
12	A	X(2)	144-145	
13	N	9(9)	146-154	
14	A/N	X(3)	155-157	
15	DATE	9(8)	158-165	CCYYMMDD
16	A	X(1)	166	
17	N	9(11)v99	167-179	
18	N	9(3)	180-182	
19	DATE	9(8)	183-190	CCYYMMDD
20	N	X(19)	191-209	
21	A/N	X(394)	210-603	

Client Record File Trailer

Field Reference ID	Data Type	Copy Member Data Type	Field Position in Record	Format
1	A/N	PIC XX	1-2	
2	A/N	PIC X(08)	3-10	
3	Date	PIC 9(08)	11-18	CCYYMMDD
4	N	PIC 9(10)	19-28	
5	A/N	PIC X(10)	29-38	

Field Reference ID	Data Type	Copy Member Data Type	Field Position in Record	Format
6	N	PIC 9(06)	39-44	
7	N	PIC 9(02)	45-46	
8	N	PIC 9(06)	47-52	
9	A/N	PIC X(551)	53-603	

On-line Client Record Transmission

Authorization Record File

Reference ID	Data Type	Copy Member Data Type	Field Position in Record	Format
1	A/N	PIC XX	1-2	
2	A/N	PIC X(08)	3-10	
3	Date	PIC 9(08)	11-18	CCYYMMDD
4	N	PIC 9(10)	19-28	
5	A/N	PIC X(10)	29-38	
6	N	PIC 9(06)	39-44	
7	N	PIC 9(02)	45-46	
8	A/N	PIC X(557)	47-603	

Authorization Record File Detail Record

Field Reference ID	Data Type	Copy Member Data Type	Field Position in Record	Format
1	A/N	X(12)	1-12	
2	A/N	X(10)	15-22	
3	N	9(3)	23-25	
4	N	9(10)	26-35	
5	DATE	9(8)	36-43	CCYYMMDD
6	DATE	9(8)	44-51	CCYYMMDD
7	N	9(11)v99	52-64	
8	N	9(11)v99	65-77	
9	A/N	X(2)	78-79	
10	A	X(2)	80-81	
11	N	9(6)	82-87	
12	N	9(6)	88-93	
13	N	9(6)	94-99	
14	A/N	X(3)	100-102	
15	DATE	9(8)	103-110	CCYYMMDD
16	N	9(9)	111-119	
17	FCS	X(19)	120-138	
18	FCS	X(10)	139-148	
19	A	X(1)	149	
20	A	X(1)	150	
21	A	X(1)	151	
22	A/N	X(9)	152-160	

Authorization Record File Trailer

Field Reference ID	Data Type	Copy Member Data Type	Field Position in Record	Format
1	A/N	PIC XX	1-2	
2	A/N	PIC X(08)	3-10	
3	Date	PIC 9(08)	11-18	CCYYMMDD
4	N	PIC 9(10)	19-28	
5	A/N	PIC X(10)	29-38	
6	N	PIC 9(06)	39-44	
7	N	PIC 9(02)	45-46	
8	N	PIC 9(06)	47-52	
9	N	Pic(9)19	53- 71	
10	A/N	PIC X(108)	71-160	

On-line Authorization Record Transmission

On-line Authorization Record Header

Field Reference ID	Data Type	Copy Member Data Type	Field Position in Record	Format
1	A/N	PIC X(08)	1-8	
2	A/N	PIC 9(08)	9-16	
3	N	PIC 9(8)	17-24	CCYYMMDD
4	N	PIC 9(8)	25-34	HHMMSSmm
5	A/N	PIC X(10)	35-44	
6	N	PIC 9(06)	45-50	
7	N	PIC 9(02)	51-53	

Summary Error File Header Record

Field ID	Data Type	Copy Member Data Type	Field Position	Format	Valid Values
1	A		Delimited		ErrorHeader
2	Date	9(8)		mm/dd/yyyy hh:mm:ss:ms	
3	N	9(10)			> 0
4	N	9(10)			> 0
5	N	9(10)			

Summary Error File Detail Record

Field ID	Data Type	Copy Member Data Type	Field Position	Format	Valid Values
1	N	9(10)	Delimited		> 0
2	N	9(10)			
3	A	X			
4	A	X			

Daily Activity Header Record

	Data Type	Copy Member Data Type	Field Position in Record	Format	Valid Values
1	A/N	PIC XX	1-2		BT or RT
2	A/N	PIC X(08)	3-10		OK
3	Date	PIC 9(08)	11-18	CCYYMMDD	
4	N	PIC 9(10)	19-28		
5	A/N	PIC X(10)	29-38		used for BT only – blank fill for on-line message
6	N	PIC 9(09)	39-47		
7	N	PIC 9(02)	48-49		01-03
8	N	PIC 9(06)	50-55		
9	A/N	PIC X(263)	56-316		Pad with blanks to match length of detail record(s) that follow.

All Activity Detail Record

Field Reference ID	Data Type	Copy Member Data Type	Field Position in Record	Format	Valid Values
1	N	PIC X(3)	1-3		110, 120, 130, 140, 150, 160, 200, 300, 350, 400, 500, 600, 650, 800
2	A/N	PIC X(12)	4-15		
3	A/N	PIC X(10)	16-25		
4	A/N	PIC X(3)	26-28		
5	A/N	PIC X(10)	29-38		
6	N	PIC 9(12)	39-50		
7	Date	PIC 9(8)	51-58	CCYYMMDD	
8	N	PIC 9(8)	59-66	HHMMSSMM	
9	A/N	PIC X(5)	67-71		'IN' or 'OUT'
10	Date	PIC 9(8)	72-79	CCYYMMDD	
11	N	PIC 9(8)	80-87	HHMMSSMM	
12	A/N	PIC X(2)	88-89		
13	N	PIC 9(11)v99	90-102		
14	Date	PIC 9(8)	103-110	CCYYMMDD	
15	A/N	PIC X(19)	111-129		
16	A/N	PIC X(10)	130-139		
17	N	PIC 9(7)v99	140-148		
18	A/N	PIC X(3)	149-151		
19	A/N	PIC X(2)	152-153		
20	N	PIC 9(11)v99	154-166		
21	N	PIC 9(10)	167-176		
22	N	PIC 9(10)	177-186		
23	N	PIC 9(8)	187-194	CCYYMMDD	
24	A/N	PIC X(10)	195-204		

Field Reference ID	Data Type	Copy Member Data Type	Field Position in Record	Format	Valid Values
25	N	PIC 9(2)	205-206		
26	N	PIC 9(2)	207-208		
27	N	PIC 9(2)	209-210		
28	N	PIC 9(2)	211-212		
29	N	PIC 9(2)	213-214		
30	N	PIC 9(2)	215-216		
31	N	PIC 9(2)	217-218		
32	N	PIC 9(2)	219-220		
33	N	PIC 9(2)	221-222		
34	N	PIC 9(2)	223-224		
35	N	PIC 9(2)	225-226		
36	N	PIC 9(7)v99	227-235		
37	N	PIC 9(7)v99	236-244		
38	N	PIC 9(7)v99	245-253		
39	N	PIC 9(3)	254-256		
40	N	PIC 9(8)	257-264	CCYYMMDD	
41	N	PIC 9(7)v99	265-273		
42	N	PIC 9(7)v99	274-282		
43	N	PIC 9(7)v99	283-291		
44	N	PIC 9(7)v99	292-300		
45	A/N	PIC X(1)	301		Value "Y" or "N"
46	N	PIC 9(8)	302-309	CCYYMMDD	
47	A/N	PIC X(10)	310-319		

Daily Activity Trailer Record

#	Position	Description	Length	Type	Comments
1	001-001	Record Type	1	String	"T" - Trailer
2	002-010	Total Detail Records	9	Int	Total Number of Detail Records
3	011-020	Total Credits	10	Int	Total dollar value of Credits
4	021-030	Total Debits	10	Int	Total dollar value of Debits
5	030-048	Checksum	19	Int	Check Sum
6	031-314	Pad	260	String	Spaces

Header/Trailer Record Data Element Descriptions

Field Reference ID	Field Name	Description
1	Record Type	Type of processing: BT=Batch; RT=real-time
2	Source	State or ACS
3	Batch Date	Date batch or on-line message generated
4	Batch Number	Number of the batch being processed
5	File Name	Name of file being processed (batch only)
6	Sequence Number	Sequence number to differentiate files if more than one batch is sent on a given day.

Field Reference ID	Field Name	Description
7	Action	Type of change: 01 = Add 03 = Update 05 = Delete
8	Record Count(Trailer Only)	Number of detail records in the file
9	Pad	Blank fill to match length of detail record

Demographic Maintenance Real Time Messaging Record

Item	Position	Description	Length	Type	Comment	Action
1.	001-002	Record Type Indicator	02	S	“RT” Indicates Real time Record	M
2.	003-006	Batch ID	04	S	“OKPP” Note: PP represents program type SS – State Supplemental Payments CS – Child Support TA – Temporary Assistance for Needy Families AD – Adoption Services FC – Foster Care ST – Sales Tax Rebate FA-Family Assistance EN- Energy Assistance GF- General Finance (Miscellaneous Finance Payments)	M
3.	007-014	File Create Date	08	I	CCYYMMDD	M
4.	015-023	File Create Time	09	I	HHMMSSmmm	M
5.	024-033	File Indicator	10	S	“DEMOMAIN” Demographic Maintenance File	M
6.	034-043	File Extension	10	S	Production = .PROD Test= .TEST Remaining = spaces	M
7.	044-053	Control Number	10	I	Real time will always send zeros	M
8.	054-57	RT – Response Code	4	S	‘0000’ = Successful response	M
9.	058-100	Filler	43			
10.	101-102	Detail Record ID	02	S	“DT” – Indicates start of detail record	M

Item	Position	Description	Length	Type	Comment	Action
11.	103-104	Agency ID	02	I	Agency ID for Case. 20 - CS 21 - SS 22 – TA 23 – AD 24 – FC 25 – ST 26 –FA 27 - EN 28- GF	M
12.	105-106	Client Action Code	02	I	Identifies the client operation type. 01 – Create Account and add access to Account. 02 – Update person demographic data 03 – Indicates Deceased Cardholder EPPIC™ will ignore the Client Action Code unless it is '03' and determine if the record is an add or an update based on whether the DCN/Program combination exist on EPPIC.	M
13.	107-107	Account Processing Code	01	I	State will default to "1". EPPIC™ will ignore due to processing rules for Client Action Code	M
14.	108-109	Access Type	02	S	Flag indicating whether client is primary account holder, first alternate or second alternate account access. 00 – Primary	M
15.	110-113	Account Access	04	I	Bit-wise indicator to turn access on/off for each Account in the account. 0002 – Cash only access	M

Item	Position	Description	Length	Type	Comment	Action
16.	114-115	Program	02	S	<p>Program ID for the record.</p> <p>(C*) - CS</p> <p>(S*) - SSP</p> <p>(T*) - TANF</p> <p>(A*) – Adoption Services</p> <p>(F*) – Foster Care</p> <p>(R*) – Sales Tax Rebate</p> <p>(D*) – Family Assistance</p> <p>(E*) – Energy Assistance</p> <p>(G*) – General Finance (miscellaneous finance payments)</p> <p>*Note that the second character must be a space.</p>	M
17.	116-131	Department Client Number	16	S	<p>The DCN number for each program will be the same and will be used for combining account. The State assigned DCN number is less than 16 in length then the field will be left justified right-spaced filled.</p>	M
18.	132-140	SSN	09	I	<p>Client Social Security Number. If no SSN available, zero-fill.</p>	M
19.	141-144	Birth Date – Year	04	I	<p>Year of birth _(used to match and combine account with other agency)</p> <p>Min: 1880, Max: (Current date or date in the past).</p> <p>Field will meet the above min/max criteria or be sent as all 0s.</p>	M
20.	145-146	Birth Date – Month	02	I	<p>Month of birth</p> <p>Min: 01, Max: 12</p> <p>Field will meet the above min/max criteria or be sent as all 0s.</p>	M
21.	147-148	Birth Date – Day	02	I	<p>Day of birth</p> <p>Min: 01, Max: 31</p> <p>Field will meet the above min/max criteria or be sent as all 0s.</p>	M

Item	Position	Description	Length	Type	Comment	Action
22.	149-149	Sex	01	S	<p>Gender of the client</p> <p>Valid values include:</p> <p>M - male</p> <p>F - female</p> <p>U – unknown</p>	M
23.	150-174	Last Name	25	S	<p>Last Name of the Client. Uppercase or Lowercase – will convert to upper – Some special chars allowed except Percent (%), double quote (“”), dollar sign (\$), asterisk (*), close parenthesis ()), pound sign (#), at sign (@), comma (,), rt brace (}), colon (:), quotation mark (“), percent sign (%), caret (^), semicolon (;), plus sign (+) or the & sign .</p> <p>Special characters will cause the record to reject.</p>	M
24.	175-199	First Name	25	S	<p>First Name of the Client. Uppercase or Lowercase – will convert to upper – Some special chars allowed except Percent (%), double quote (“”), dollar sign (\$), asterisk (*), close parenthesis ()), pound sign (#), at sign (@), comma (,), rt brace (}), colon (:), quotation mark (“), percent sign (%), caret (^), semicolon (;) plus sign (+) or the & sign .</p> <p>Special characters will cause the record to reject .</p>	M
25.	200-200	Middle Initial	01	S	<p>Middle Initial of the Client. Uppercase or Lowercase – will convert to upper – Some special chars allowed except Percent (%), double quote (“”), dollar sign (\$), asterisk (*), close parenthesis ()), pound sign (#), at sign (@), comma (,), rt brace (}), colon (:), quotation mark (“), percent sign (%), caret (^), semicolon (;) plus sign (+) or the & sign . .</p> <p>Special characters will cause the record to reject . .</p>	O

Item	Position	Description	Length	Type	Comment	Action
26.	201-230	Mailing Street Address 1	30	S	<p>Street address. Uppercase or Lowercase – ACS will convert to upper –Some special chars allowed except Percent (%) and double quote (“”), dollar sign (\$), asterisk (*), close parenthesis ()), pound sign (#), at sign (@), comma (,), rt brace (}), colon (:), quotation mark (“), percent sign (%), caret (^), semicolon (;) plus sign (+) or the & sign . .</p> <p>Special characters will cause the record to reject .</p> <p>Note that this field should not include city, state or zip code. If Address 1 and 2 are blank, the record will reject.</p>	O
27.	231-260	Mailing Street Address 2	30	S	<p>Street address. Uppercase or Lowercase – will convert to upper – Some special chars allowed except Percent (%) and double quote (“”), dollar sign (\$), asterisk (*), close parenthesis ()), pound sign (#), at sign (@), comma (,), rt brace (}), colon (:), quotation mark (“), percent sign (%), caret (^), semicolon (;) plus sign (+) or the & sign .</p> <p>Note that this field should not include city, state or zip code. If Address 1 and 2 are blank, the record will reject.</p>	O
28.	261-280	City	20	S	<p>Uppercase or Lowercase – will convert to upper – Some special chars allowed except Percent (%), double quote (“”), dollar sign (\$), asterisk (*), close parenthesis ()), pound sign (#), at sign (@), comma (,), rt brace (}), colon (:), quotation mark (“), percent sign (%), caret (^), semicolon (;) plus sign (+) or the & sign . .</p> <p>Military Post Office Clearinghouse (See Table in section 2.3.4)</p>	M
29.	281-282	State	02	S	<p>Uppercase or Lowercase – will convert to upper</p> <p>Mandatory if Country Code is USA</p>	C
30.	283-291	Zip	09	S	<p>Use 0000 if last 4 digits are unavailable.</p> <p>Mandatory if Country Code is USA</p>	C

Item	Position	Description	Length	Type	Comment	Action
31.	292-294	Country Code	03	S	<p>This field will contain the Country Code for international addresses. See Appendix D for valid values. Uppercase or Lowercase – ACS will convert to upper.</p> <p>Note: The State will send zeros in this field and update via AT.</p>	M
32.	295-304	Telephone Number	10	S	<p>This field should not include extraneous characters such as () or – and includes area code.</p>	O
33.	305-305	Family Violence Indicator	01	S	<p>Special Needs field. Valid Values: Y, N</p> <p>If set to 'Y' signifies a violence indicator, the Family Violence Indicator flag will be turned on. The address will not be masked, but the flag denotes those cases whose address information shall be protected.</p> <p>This field will be ignored if the Program (field 7) is not "C". If update is from a non-child support the field will not be updated.</p>	M
34.	306-307	Language ID	02	S	<p>Language ID. This field is currently unused but exists for compatibility purposes. Valid value is numeric "00".</p>	M

Item	Position	Description	Length	Type	Comment	Action
35	308-308	Card Issuance Indicator	01	I	<p>Flag indicating if a card should be issued. The PAN will be generated in the creation process. Valid Values:</p> <p>1 – Issue Card</p> <p>0 - Do Not Issue Card</p> <p>ACS will ignore card issuance indicator.</p> <p>EPPIC™ will issue a card in the following conditions:</p> <p>EPPIC™ determines the DCN/Program combo establishes a new account on EPPIC.</p> <p>EPPIC™ determines the record is an update and the existing card on the account is stasured as “returned”.</p> <p>EPPIC™ will NOT issue a card in the following conditions:</p> <p>EPPIC™ determines the DCN/Program combo adds a program to an existing account.</p> <p>EPPIC™ determines the record is an update and the existing card is not in a “returned” status.</p> <p>Note: For international addresses with item 22 populated with zeros the State may set the card issuance flag to 0 “do not issue card”. Card will not be issued on cases that have the country code as “000”.</p>	M
36	309-325	ABA Routing Number	17	S	<p>Bank Routing Number</p> <p><i>* Only used during conversion of new program</i></p>	O Note: If less
37	326-342	Bank Account Number	17	S	<p>Client Account Number</p> <p><i>* Only used during conversion of new program</i></p>	O
38	343-344	Bank Account Type	02	S	<p>Bank Account Type:</p> <p>CK – Checking</p> <p>SV – Savings</p> <p><i>* Only used during conversion of new program</i></p>	O
39.	345-386	Reserved for State Use	42	S	<p>EPPIC™ will ignore and not load to database. This is data for the State to retrieve from the error file generated by EPPIC.</p>	O
40	387-603	Filler	217	S	Spaces	M

Note: Attributes are defined as:

- S is String – Alphabetic and numeric characters, and/or spaces
- I is Integer – Numeric digits only
- C is Character

Detail Account Record (Fields Marked “M” are Mandatory)

#	Position	Description	Length	Type	Comments	M/C/O/I fields for Action Codes:
						01
1.	001-002	Record Type	02	S	“DT”	DT
2.	003-004	Action Code	02	S	“01” – Deposit Add	01
3.	005-020	Department Client Number	16	S	DCN is a length of 16. Left-justify, right space filled.	M
4.	021-024	Deposit Type	04	S	SS – State Supplemental Payments CS – Child Support TA – Temporary Assistance for Needy Families AD – Adoption Services FC – Foster Care ST – Sales Tax Rebate FA – Family Assistance EN – Energy Assistance GF – General Finance (miscellaneous finance payments)	M
5.	025-035	Deposit Amount	11	I	\$\$\$\$\$\$\$\$\$CC Amount of Deposit	M
6.	036-065	Deposit Document ID Number	30	S	The Deposit Document ID Number must be unique for each deposit. Child Support Format: Case Number (12) Warrant Number (7) Issue Date (6) Voucher code (2) CP Number (3)	M
7.	066-073	Deposit Available Date	08	I	CCYYMMDD May be a date in the past.	M
8.	074-079	Effective Month	06	I	CCYYMM - Month of Deposit Payment. This date does not affect	M

					deposit availability.	
9.	080-085	Deposit Available Time	06	I	HHMMSS ACS will ignore – EPPIC™ will default available time to 9:00 am CST. Time will not be set on Direct Deposit authorizations.	M
10.	086-115	Reserved For State	30	S	EPPIC™ will ignore and not load to database. This is data for the State to retrieve from the error file generated by EPPIC.	I
11.	116-175	Filler	60	S	Spaces	I

Record Length – 175

DEPOSIT MAINTENANCE TRAILER

#	Position	Description	Length	Type	Comments	M/C/O/I
1.	001-002	Record Type	02	S	“TR”	M
2.	003-006	Batch ID	04	S	“OKPP” Note: PP represents program type – Valid Values SS – State Supplemental Payments CS – Child Support TA – Temporary Assistance for Needy Families AD – Adoption Services FC – Foster Care ST – Sales Tax Rebate FA – Family Assistance EN – Energy Assistance GF – General Finance (miscellaneous finance payments) File Name for Deposit Summary Report will be consistent with the original Deposit File DSN.	M
3.	007-014	File Create Date	08	I	CCYYMMDD	M
4.	015-023	File Create Time	09	I	HHMMSSmmm	M
5.	024-033	File Identifier	10	S	DEPOSIT	M

6.	034-043	File Extension	10	S	Production = .PROD Test = .TEST Remaining = spaces	M
7.	044-053	Control Number	10	I	Must match header	M
8.	054-062	Total Detail Records	09	I	Total Number of Detail records.	M
9.	063-071	Number of Deposit Adds	09	I	Count of Add records in the batch.	M
10.	072-082	Amount of Adds	11	I	\$\$\$\$\$\$\$CC Total Dollar Value of Add Records in the batch.	M
11.	083-175	Filler	93	S	Spaces	I