

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

HEADER RECORD

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	001	HEADER
PAY TYPE	4	A1	A	
LOCATION NUMBER	5-10	N6	BLANK	
INVOICE DATE / PAY EFFECT DAY	11-12	N2	BLANK	
INVOICE DATE / PAY EFFECT MONTH	13-14	N2	BLANK	
INVOICE DATE / PAY EFFECT QTR	15	N1	BLANK	
INVOICE DATE / PAY EFFECT YEAR	16-19	N4	BLANK	
INVOICE NUMBER	20-25	N6	BLANK	
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2	BLANK	
PAYMENT AMOUNT 2	45-55	N9.2	BLANK	
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	
TOTAL PAYMENT	78-89	N10.2	BLANK	
TRANSACTION COUNT	90-94	N5	BLANK	
REFERENCE NUMBER	95-103	N9	BLANK	
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	
ADJUSTMENT REASON CODE	112-114	A3	BLANK	
CALL DATE	115-122	N8	BLANK	
CALL TIME	123-128	N6	BLANK	
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5	JJNN	JULIAN DATE + 2 DIGIT
				SEQUENCE NUMBER
STATE NAME	148-174	A27	ST OF NJ DIV OF PENS & BENE	
FILLER	175-225	A50		FILLER

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CASH RECORD:
TRANSMITTAL**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	10	TRANSMITTAL MONEY
PAY TYPE	4	A1	C	CASH PAYMENT
LOCATION NUMBER	5-10	N6		1st POSITION FUND #
				LAST 5 LOCATION #
INVOICE DATE / PAY EFFECT DAY	11 - 12	N2	BLANK	BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2	1 - 12	EFFECTIVE MONTH
INVOICE DATE / PAY EFFECT QTR	15	N1	1 - 4	PAY EFFECTIVE QTR
INVOICE DATE / PAY EFFECT YEAR	16-19	N4	YYYY	PAY EFFECT YEAR
INVOICE NUMBER	20-25	N6	BLANK	BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		PENSIONS CONTRIB
PAYMENT AMOUNT 2	45-55	N9.2		CONTRIB INSURANCE
PAYMENT AMOUNT 3	56-66	N9.2		SACT
PAYMENT AMOUNT 4	67-77	N9.2		TSA
TOTAL PAYMENT	78-89	N10.2		TOTAL FOR:
				PEN+INS+SACT+TSA
TRANSACTION COUNT	90-94	N5	BLANK	BLANK
REFERENCE NUMBER	95-103	N9		BANK REFERENCE #
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	YYYYMMDD	DATE OF CALL
CALL TIME	123-128	N6	HHMMSS	TIME OF CALL
TRANSMIT DATE	129-136	N8	BLANK	BLANK
TRANSMIT TIME	137-142	N6	BLANK	BLANK
BANK TRANSMISSION ID	143-147	N5	BLANK	BLANK
STATE NAME	148-174	A27	BLANK	BLANK
FILLER	177-223	A48	FILLER	FILLER

DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout

EXHIBIT O

CASH RECORD:
SHORTAGE

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	20	SHORTAGE MONEY
PAY TYPE	4	A1	C	CASH PAYMENT
LOCATION NUMBER	5-10	N6		1st POSITION FUND #
				LAST 5 LOCATION #
INVOICE DATE / PAY EFFECT DAY	11-12	N2	BLANK	BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2	BLANK	BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1	1 - 4	PAY EFFECTIVE QTR
INVOICE DATE / PAY EFFECT YEAR	16-19	N4	YYYY	PAY EFFECT YEAR
INVOICE NUMBER	20-25	N6	NNNN	INVOICE NUMBER
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		PENSIONS CONTRIB
PAYMENT AMOUNT 2	45-55	N9.2		CONTRIB INSURANCE
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2		TOTAL (PEN+INS)
TRANSACTION COUNT	90-94	N5	BLANK	BLANK
REFERENCE NUMBER	95-103	N9		BANK REFERENCE #
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	YYYYMMDD	DATE OF CALL
CALL TIME	123-128	N6	HHMMSS	TIME OF CALL
TRANSMIT DATE	129-136	N8	BLANK	BLANK
TRANSMIT TIME	137-142	N6	BLANK	BLANK
BANK TRANSMISSION ID	143-147	N5	BLANK	BLANK
STATE NAME	148-174	A27	BLANK	BLANK
FILLER	175-225	A50	FILLER	FILLER

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CASH RECORD:
EMPLOYER APPROPRIATIONS**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	30	EMPL. APPROP MONEY
PAY TYPE	4	A1	C	CASH PAYMENT
LOCATION NUMBER	5-10	N6		1st POSITION FUND #
				LAST 5 LOCATION #
INVOICE DATE / PAY EFFECT DAY	11-12	N2	DD	INVOICE DUE DAY
INVOICE DATE / PAY EFFECT MONTH	13-14	N2	1 - 12	INVOICE DUE MONTH
INVOICE DATE / PAY EFFECT QTR	15	N1	BLANK	BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4	YYYY	INVOICE DUE YEAR
INVOICE NUMBER	20-25	N6	BLANK	BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		APPROPRIATION
PAYMENT AMOUNT 2	45-55	N9.2	BLANK	BLANK
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2		TOTAL (APPROP)
TRANSACTION COUNT	90-94	N5	BLANK	BLANK
REFERENCE NUMBER	95-103	N9		BANK REFERENCE #
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	YYYYMMDD	DATE OF CALL
CALL TIME	123-128	N6	HHMMSS	TIME OF CALL
TRANSMIT DATE	129-136	N8	BLANK	BLANK
TRANSMIT TIME	137-142	N6	BLANK	BLANK
BANK TRANSMISSION ID	143-147	N5	BLANK	BLANK
STATE NAME	148-174	A27	BLANK	BLANK
FILLER	175-225	A50	FILLER	FILLER

DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout

EXHIBIT O

CASH RECORD:
RETRO SALARY

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	40	RETRO MONEY
PAY TYPE	4	A1	C	CASH PAYMENT
LOCATION NUMBER	5-10	N6		1st POSITION FUND #
				LAST 5 LOCATION #
INVOICE DATE / PAY EFFECT DAY	11 - 12	N2	DD	RETRO EFFECTIVE DAY
INVOICE DATE / PAY EFFECT MONTH	13-14	N2	1 - 12	RETRO EFFECTIVE MONTH
INVOICE DATE / PAY EFFECT QTR	15	N1	BLANK	BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4	YYYY	RETRO EFFECT YEAR
INVOICE NUMBER	20-25	N6	BLANK	BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		PENSIONS CONTRIB
PAYMENT AMOUNT 2	45-55	N9.2		CONTRIB INSURANCE
PAYMENT AMOUNT 3	56-66	N9.2		BLANK
PAYMENT AMOUNT 4	67-77	N9.2		BLANK
TOTAL PAYMENT	78-89	N10.2		TOTAL (PEN+INS)
TRANSACTION COUNT	90-94	N5	BLANK	BLANK
REFERENCE NUMBER	95-103	N9		BANK REFERENCE #
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	YYYYMMDD	DATE OF CALL
CALL TIME	123-128	N6	HHMMSS	TIME OF CALL
TRANSMIT DATE	129-136	N8	BLANK	BLANK
TRANSMIT TIME	137-142	N6	BLANK	BLANK
BANK TRANSMISSION ID	143-147	N5	BLANK	BLANK
STATE NAME	148-174	A27	BLANK	BLANK
FILLER	175-225	A48	FILLER	FILLER

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CASH RECORD:
HB LOCAL ACTIVE CASH**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	110	HB LOCAL ACTIVE MONEY
PAY TYPE	4	A1	C	CASH MONEY
LOCATION NUMBER	5-10	N6		6 DIGIT LOCATION #
INVOICE DATE / PAY EFFECT DAY	11-12	N2	DD	INVOICE DATE DAY
INVOICE DATE / PAY EFFECT MONTH	13-14	N2	MM	INVOICE DATE MONTH
INVOICE DATE / PAY EFFECT QTR	15	N1	BLANK	BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4	YYYY	INVOICE DATE YEAR
INVOICE NUMBER	20-25	N6	BLANK	BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		HB LOCAL ACTIVE
PAYMENT AMOUNT 2	45-55	N9.2	BLANK	BLANK
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2		TOTAL:HB LOCAL ACTIVE
TRANSACTION COUNT	90-94	N5	BLANK	BLANK
REFERENCE NUMBER	95-103	N9		BANK REFERENCE #
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	YYYYMMDD	DATE OF CALL
CALL TIME	123-128	N6	HHMMSS	TIME OF CALL
TRANSMIT DATE	129-136	N8	BLANK	BLANK
TRANSMIT TIME	137-142	N6	BLANK	BLANK
BANK TRANSMISSION ID	143-147	N5	BLANK	BLANK
STATE NAME	148-174	A27	BLANK	BLANK
FILLER	175-225	A50	FILLER	FILLER

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CASH RECORD:
Delayed Enrollment**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	10	TRANSMITTAL MONEY
PAY TYPE	4	A1	C	CASH PAYMENT
LOCATION NUMBER	5-10	N6		1st POSITION FUND #
				LAST 5 LOCATION #
INVOICE DATE / PAY EFFECT DAY	11 - 12	N2	BLANK	BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2	1 - 12	EFFECTIVE MONTH
INVOICE DATE / PAY EFFECT QTR	15	N1	1 - 4	PAY EFFECTIVE QTR
INVOICE DATE / PAY EFFECT YEAR	16-19	N4	YYYY	PAY EFFECT YEAR
INVOICE NUMBER	20-25	N6	BLANK	BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2	Delayed Enrollment	PENSIONS CONTRIB
PAYMENT AMOUNT 2	45-55	N9.2	Delayed Approp	CONTRIB INSURANCE
PAYMENT AMOUNT 3	56-66	N9.2		SACT
PAYMENT AMOUNT 4	67-77	N9.2		TSA
TOTAL PAYMENT	78-89	N10.2	Total	TOTAL FOR:
				PEN+INS+SACT+TSA
TRANSACTION COUNT	90-94	N5	BLANK	BLANK
REFERENCE NUMBER	95-103	N9		BANK REFERENCE #
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	YYYYMMDD	DATE OF CALL
CALL TIME	123-128	N6	HHMMSS	TIME OF CALL
TRANSMIT DATE	129-136	N8	BLANK	BLANK
TRANSMIT TIME	137-142	N6	BLANK	BLANK
BANK TRANSMISSION ID	143-147	N5	BLANK	BLANK
STATE NAME	148-174	A27	BLANK	BLANK
FILLER	177-223	A48	FILLER	FILLER

**CASH RECORD:
HB LOCAL RETIRED CASH**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES**

EXHIBIT O

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PAY CODE	1-3	N3	120	HB LOCAL RETIRE MONEY
PAY TYPE	4	A1	C	CASH MONEY
LOCATION NUMBER	5-10	N6		6 DIGIT LOCATION #
INVOICE DATE / PAY EFFECT DAY	11-12	N2	DD	INVOICE DATE DAY
INVOICE DATE / PAY EFFECT MONTH	13-14	N2	MM	INVOICE DATE MONTH
INVOICE DATE / PAY EFFECT QTR	15	N1	BLANK	BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4	YYYY	INVOICE DATE YEAR
INVOICE NUMBER	20-25	N4	BLANK	BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		HB LOCAL RETIRED
PAYMENT AMOUNT 2	45-55	N9.2	BLANK	BLANK
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2		TOTAL:HB LOCAL ACTIVE
TRANSACTION COUNT	90-94	N5	BLANK	BLANK
REFERENCE NUMBER	95-103	N9		BANK REFERENCE #
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	YYYYMMDD	DATE OF CALL
CALL TIME	123-128	N6	HHMMSS	TIME OF CALL
TRANSMIT DATE	129-136	N8	BLANK	BLANK
TRANSMIT TIME	137-142	N6	BLANK	BLANK
BANK TRANSMISSION ID	143-147	N5	BLANK	BLANK
STATE NAME	148-174	A27	BLANK	BLANK
FILLER	175-225	A50	FILLER	FILLER

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CASH RECORD:
HB STATE MONTHLY CASH**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	200	HB ST.MONTHLY MONEY
PAY TYPE	4	A1	C	CASH PAYMENT
LOCATION NUMBER	5-10	N6		6 DIGIT LOCATION #
INVOICE DATE / PAY EFFECT DAY	11-12	N2	DD	INVOICE DATE DAY
INVOICE DATE / PAY EFFECT MONTH	13-14	N2	MM	INVOICE DATE MONTH
INVOICE DATE / PAY EFFECT QTR	15	N1	BLANK	BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4	YYYY	INVOICE DATE YEAR
INVOICE NUMBER	20-25	N4	BLANK	BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		HB PAYMENT
PAYMENT AMOUNT 2	45-55	N9.2	BLANK	DENTAL PAYMENT
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	RX PAYMENT
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2		TOTAL:HB LOCAL ACTIVE
TRANSACTION COUNT	90-94	N5	BLANK	BLANK
REFERENCE NUMBER	95-103	N9		BANK REFERENCE #
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	YYYYMMDD	DATE OF CALL
CALL TIME	123-128	N6	HHMMSS	TIME OF CALL
TRANSMIT DATE	129-136	N8	BLANK	BLANK
TRANSMIT TIME	137-142	N6	BLANK	BLANK
BANK TRANSMISSION ID	143-147	N5	BLANK	BLANK
STATE NAME	148-174	A27	BLANK	BLANK
FILLER	175-225	A50	FILLER	FILLER

Delayed Enrollment

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	50	RETRO SALARY MONEY
PAY TYPE	4	A1	C	FUND 1
LOCATION NUMBER	5-10	N6	000000	1st POSITION FUND #
INVOICE DATE / PAY EFFECT DAY	11-12	N2	01-31	BLANK

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES**

EXHIBIT O

EFT File Layout

INVOICE DATE / PAY EFFECT MONTH	13-14	N2	01-12	BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1	BLANK	BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4	YYYYMMDD	BLANK
INVOICE NUMBER	20-25	N6	000000	BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2	Delayed Enrollment	TOTAL:FUND 1 ALL
				CODE 40 C + D
PAYMENT AMOUNT 2	45-55	N9.2	Delayed Appropriations	TOTAL:FUND 1 ALL
				CODE 40 C + D
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2	Total of Both	TOTAL:FUND 1 ALL
				CODE 40 C + D
TRANSACTION COUNT	90-94	N5		TOTAL:FUND 1 ALL
				CODE 40 C + D
REFERENCE NUMBER	95-103	N9	000000	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	YYYYMMDD	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5	000000	BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CASH RECORD:
Employer Retro Salary**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	60	TRANSMITTAL MONEY
PAY TYPE	4	A1	C	CASH PAYMENT
LOCATION NUMBER	5-10	N6		1st POSITION FUND #
				LAST 5 LOCATION #
INVOICE DATE / PAY EFFECT DAY	11 - 12	N2	1-31	BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2	1 - 12	EFFECTIVE MONTH
INVOICE DATE / PAY EFFECT QTR	15	N1	1 - 4	PAY EFFECTIVE QTR
INVOICE DATE / PAY EFFECT YEAR	16-19	N4	YYYY	PAY EFFECT YEAR
INVOICE NUMBER	20-25	N6	BLANK	BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		PENSIONS CONTRIB
PAYMENT AMOUNT 2	45-55	BLANK	BLANK	CONTRIB INSURANCE
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	SACT
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	TSA
TOTAL PAYMENT	78-89	N10.2		TOTAL FOR:
				PEN+INS+SACT+TSA
TRANSACTION COUNT	90-94	N5	BLANK	BLANK
REFERENCE NUMBER	95-103	N9		BANK REFERENCE #
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	YYYYMMDD	DATE OF CALL
CALL TIME	123-128	N6	HHMMSS	TIME OF CALL
TRANSMIT DATE	129-136	N8	BLANK	BLANK
TRANSMIT TIME	137-142	N6	BLANK	BLANK
BANK TRANSMISSION ID	143-147	N5	BLANK	BLANK
STATE NAME	148-174	A27	BLANK	BLANK
FILLER	177-223	A48	FILLER	FILLER

**ADJUSTMENT (RETURN) RECORD:
FOR ALL CASH PAYMENTS**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	10,20,30,40,50 60,110,120,200	FROM ORIGINAL TRANS
PAY TYPE	4	A1	D	ADJUSTMENT MONEY

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES**

EXHIBIT O

EFT File Layout

LOCATION NUMBER	5-10	N6		1st POSITION FUND #
				5 LOCATION #
INVOICE DATE / PAY EFFECT DAY	11 - 12	N2		FROM ORIGINAL TRANS
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		FROM ORIGINAL TRANS
INVOICE DATE / PAY EFFECT QTR	15	N1		FROM ORIGINAL TRANS
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		FROM ORIGINAL TRANS
INVOICE NUMBER	20-25	N6		FROM ORIGINAL TRANS
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		ADJUSTMENT AMOUNT
PAYMENT AMOUNT 2	45-55	N9.2		ADJUSTMENT AMOUNT
PAYMENT AMOUNT 3	56-66	N9.2		ADJUSTMENT AMOUNT
PAYMENT AMOUNT 4	67-77	N9.2		ADJUSTMENT AMOUNT
TOTAL PAYMENT	78-89	N10.2		TOTAL FOR:
				ADJ1+ADJ2+ADJ3+ADJ4
TRANSACTION COUNT	90-94	N5		BLANK
REFERENCE NUMBER	95-103	N9		BANK REFERENCE #
ORIGINAL DEPOSIT DATE	104-111	N8	YYYYMMDD	FROM ORIGINAL TRANS
ADJUSTMENT REASON CODE	112-114	A3		RETURN CODE
CALL DATE	115-122	N8	YYYYMMDD	DATE OF CALL
CALL TIME	123-128	N6	HHMMSS	TIME OF CALL
TRANSMIT DATE	129-136	N8	BLANK	BLANK
TRANSMIT TIME	137-142	N6	BLANK	BLANK
BANK TRANSMISSION ID	143-147	N5	BLANK	BLANK
STATE NAME	148-174	A27	BLANK	BLANK
FILLER	175-225	A48	FILLER	FILLER

DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout

EXHIBIT O

CONTROL RECORD:
TRANSMITTAL FUND 1

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	10	TRANSMITTAL MONEY
PAY TYPE	4	A1	W	FUND 1
LOCATION NUMBER	5-10	N6	100000	1st POSITION FUND #
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2	PENSION	TOTAL:FUND 1 ALL
				CODE 10 C + D
PAYMENT AMOUNT 2	45-55	N9.2	INS.	TOTAL:FUND 1 ALL
				CODE 10 C + D
PAYMENT AMOUNT 3	56-66	N9.2	SACT	TOTAL:FUND 1 ALL
				CODE 10 C + D
PAYMENT AMOUNT 4	67-77	N9.2	TSA	TOTAL:FUND 1 ALL
				CODE 10 C + D
TOTAL PAYMENT	78-89	N10.2		TOTAL:FUND 1 ALL
				CODE 10 C + D
TRANSACTION COUNT	90-94	N5		TOTAL:FUND 1 ALL
				CODE 10 C + D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CONTROL RECORD:
TRANSMITTAL FUND 2**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	10	TRANSMITTAL MONEY
PAY TYPE	4	A1	X	FUND 2
LOCATION NUMBER	5-10	N6	200000	1st POSITION FUND #
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2	PENSION	TOTAL:FUND 2 ALL
				CODE 10 C + D
PAYMENT AMOUNT 2	45-55	N9.2	INS.	TOTAL:FUND 2 ALL
				CODE 10 C + D
PAYMENT AMOUNT 3	56-66	N9.2	SACT	TOTAL:FUND 2 ALL
				CODE 10 C + D
PAYMENT AMOUNT 4	67-77	N9.2	TSA	TOTAL:FUND 2 ALL
				CODE 10 C + D
TOTAL PAYMENT	78-89	N10.2		TOTAL:FUND 2 ALL
				CODE 10 C + D
TRANSACTION COUNT	90-94	N5		TOTAL:FUND 2 ALL
				CODE 10 C + D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CONTROL RECORD:
TRANSMITTAL FUND 3**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	10	TRANSMITTAL MONEY
PAY TYPE	4	A1	Y	FUND 3
LOCATION NUMBER	5-10	N6	300000	1st POSITION FUND #
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2	PENSION	TOTAL:FUND 3 ALL
				CODE 10 C + D
PAYMENT AMOUNT 2	45-55	N9.2	INS.	TOTAL:FUND 3 ALL
				CODE 10 C + D
PAYMENT AMOUNT 3	56-66	N9.2	SACT	TOTAL:FUND 3 ALL
				CODE 10 C + D
PAYMENT AMOUNT 4	67-77	N9.2	TSA	TOTAL:FUND 3 ALL
				CODE 10 C + D
TOTAL PAYMENT	78-89	N10.2		TOTAL:FUND 3 ALL
				CODE 10 C + D
TRANSACTION COUNT	90-94	N5		TOTAL:FUND 3 ALL
				CODE 10 C + D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

DIVISION OF PENSIONS AND BENEFITS
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EFT File Layout

EXHIBIT O

CONTROL RECORD:
SHORTAGE FUND 1

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	20	SHORTAGE MONEY
PAY TYPE	4	A1	W	FUND 1
LOCATION NUMBER	5-10	N6	100000	1st POSITION FUND #
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2	PENSION	TOTAL:FUND 1 ALL
				CODE 20 C + D
PAYMENT AMOUNT 2	45-55	N9.2	INS.	TOTAL:FUND 1 ALL
				CODE 20 C + D
PAYMENT AMOUNT 3	56-66	N9.2	SACT	TOTAL:FUND 1 ALL
				CODE 20 C + D
PAYMENT AMOUNT 4	67-77	N9.2	TSA	TOTAL:FUND 1 ALL
				CODE 20 C + D
TOTAL PAYMENT	78-89	N10.2		TOTAL:FUND 1 ALL
				CODE 20 C + D
TRANSACTION COUNT	90-94	N5		TOTAL:FUND 1 ALL
				CODE 20 C + D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CONTROL RECORD:
SHORTAGE FUND 2**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	20	SHORTAGE MONEY
PAY TYPE	4	A1	X	FUND 2
LOCATION NUMBER	5-10	N6	200000	1st POSITION FUND #
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2	PENSION	TOTAL:FUND 2 ALL
				CODE 20 C + D
PAYMENT AMOUNT 2	45-55	N9.2	INS.	TOTAL:FUND 2 ALL
				CODE 20 C + D
PAYMENT AMOUNT 3	56-66	N9.2	SACT	TOTAL:FUND 2 ALL
				CODE 20 C + D
PAYMENT AMOUNT 4	67-77	N9.2	TSA	TOTAL:FUND 2 ALL
				CODE 20 C + D
TOTAL PAYMENT	78-89	N10.2		TOTAL:FUND 2 ALL
				CODE 20 C + D
TRANSACTION COUNT	90-94	N5		TOTAL:FUND 2 ALL
				CODE 20 C + D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CONTROL RECORD:
SHORTAGE FUND 3**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	20	TRANSMITTAL MONEY
PAY TYPE	4	A1	Y	FUND 3
LOCATION NUMBER	5-10	N6	300000	1st POSITION FUND #
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2	PENSION	TOTAL:FUND 3 ALL
				CODE 20 C + D
PAYMENT AMOUNT 2	45-55	N9.2	INS.	TOTAL:FUND 3 ALL
				CODE 20 C + D
PAYMENT AMOUNT 3	56-66	N9.2	SACT	TOTAL:FUND 3 ALL
				CODE 20 C + D
PAYMENT AMOUNT 4	67-77	N9.2	TSA	TOTAL:FUND 3 ALL
				CODE 20 C + D
TOTAL PAYMENT	78-89	N10.2		TOTAL:FUND 3 ALL
				CODE 20 C + D
TRANSACTION COUNT	90-94	N5		TOTAL:FUND 3 ALL
				CODE 20 C + D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**DIVISION OF PENSIONS AND BENEFITS
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EXHIBIT O

**CONTROL RECORD:
APPROPRIATION FUND 1**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	30	APPROP. MONEY
PAY TYPE	4	A1	W	FUND 1
LOCATION NUMBER	5-10	N6	100000	1st POSITION FUND #
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2	APPROP.	TOTAL:FUND 1 ALL
				CODE 30 C + D
PAYMENT AMOUNT 2	45-55	N9.2	BLANK	BLANK
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2	BLANK	BLANK
TRANSACTION COUNT	90-94	N5		TOTAL:FUND 1 ALL
				CODE 30 C + D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CONTROL RECORD:
APPROPRIATION FUND 2**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	30	APPROP. MONEY
PAY TYPE	4	A1	X	FUND 2
LOCATION NUMBER	5-10	N6	200000	1st POSITION FUND #
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2	APPROP.	TOTAL:FUND 2 ALL
				CODE 30 C + D
PAYMENT AMOUNT 2	45-55	N9.2	BLANK	BLANK
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2	BLANK	BLANK
TRANSACTION COUNT	90-94	N5		TOTAL:FUND 2 ALL
				CODE 30 C + D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**DIVISION OF PENSIONS AND BENEFITS
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EXHIBIT O

**CONTROL RECORD:
APPROPRIATION FUND 3**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	30	APPROP. MONEY
PAY TYPE	4	A1	Y	FUND 3
LOCATION NUMBER	5-10	N6	300000	1st POSITION FUND #
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2	APPROP.	TOTAL:FUND 3 ALL
				CODE 30 C + D
PAYMENT AMOUNT 2	45-55	N9.2	BLANK	BLANK
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2	BLANK	BLANK
TRANSACTION COUNT	90-94	N5		TOTAL:FUND 3 ALL
				CODE 30 C + D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

DIVISION OF PENSIONS AND BENEFITS
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EXHIBIT O

CONTROL RECORD:
RETRO SALARY FUND 1

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	40	RETRO SALARY MONEY
PAY TYPE	4	A1	W	FUND 1
LOCATION NUMBER	5-10	N6	100000	1st POSITION FUND #
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2	PENSION	TOTAL:FUND 1 ALL
				CODE 40 C + D
PAYMENT AMOUNT 2	45-55	N9.2	INS.	TOTAL:FUND 1 ALL
				CODE 40 C + D
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2		TOTAL:FUND 1 ALL
				CODE 40 C + D
TRANSACTION COUNT	90-94	N5		TOTAL:FUND 1 ALL
				CODE 40 C + D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**DIVISION OF PENSIONS AND BENEFITS
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EXHIBIT O

**CONTROL RECORD:
RETRO SALARY FUND 2**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	40	RETRO SALARY MONEY
PAY TYPE	4	A1	X	FUND 2
LOCATION NUMBER	5-10	N6	200000	1st POSITION FUND #
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2	PENSION	TOTAL:FUND 2 ALL
				CODE 40 C + D
PAYMENT AMOUNT 2	45-55	N9.2	INS.	TOTAL:FUND 2 ALL
				CODE 40 C + D
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2		TOTAL:FUND 2 ALL
				CODE 40 C + D
TRANSACTION COUNT	90-94	N5		TOTAL:FUND 2 ALL
				CODE 40 C + D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CONTROL RECORD:
RETRO SALARY FUND 3**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	40	RETRO SALARY MONEY
PAY TYPE	4	A1	Y	FUND 3
LOCATION NUMBER	5-10	N6	300000	1st POSITION FUND #
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2	PENSION	TOTAL:FUND 3 ALL
				CODE 40 C + D
PAYMENT AMOUNT 2	45-55	N9.2	INS.	TOTAL:FUND 3 ALL
				CODE 40 C + D
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2		TOTAL:FUND 3 ALL
				CODE 40 C + D
TRANSACTION COUNT	90-94	N5		TOTAL:FUND 3 ALL
				CODE 40 C + D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**CONTROL RECORD:
Delayed Enrollment**

FORMAT

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES**

EXHIBIT O

EFT File Layout

<u>FIELD NAME</u>	<u>POSITION</u>	<u>LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	50	RETRO SALARY MONEY
PAY TYPE	4	A1	W	FUND 1
LOCATION NUMBER	5-10	N6	000000	1st POSITION FUND #
INVOICE DATE / PAY EFFECT DAY	11-12	N2	01-31	BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2	01-12	BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1	BLANK	BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4	YYYYMMDD	BLANK
INVOICE NUMBER	20-25	N6	000000	BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2	PENSION	TOTAL:FUND 1 ALL CODE 40 C + D
PAYMENT AMOUNT 2	45-55	N9.2	blank	TOTAL:FUND 1 ALL CODE 40 C + D
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2		TOTAL:FUND 1 ALL CODE 40 C + D
TRANSACTION COUNT	90-94	N5		TOTAL:FUND 1 ALL CODE 40 C + D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

CONTROL RECORD:
Employer RETRO SALARY

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	60	RETRO SALARY MONEY
PAY TYPE	4	A1	W	
LOCATION NUMBER	5-10	N6	BLANK	1st POSITION FUND #
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES**

EXHIBIT O

EFT File Layout

PAYMENT AMOUNT 1	34-44	N9.2	Delayed Enrollment	TOTAL:FUND ALL
				CODE 40 C + D
PAYMENT AMOUNT 2	45-55	N9.2	Delayed Appropriation	TOTAL:FUND ALL
			BLANK	CODE 40 C + D
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2	Total	TOTAL:FUND ALL
				CODE 40 C + D
TRANSACTION COUNT	90-94	N5		TOTAL:FUND ALL
				CODE 40 C + D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**CONTROL RECORD:
HB LOCAL ACTIVE CASH**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	110	HB LOCAL ACT.MONEY
PAY TYPE	4	A1	W	CASH ONLY
LOCATION NUMBER	5-10	N6	BLANK	BLANK
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		TOTAL: ALL
				CODE 110 C
PAYMENT AMOUNT 2	45-55	N9.2	BLANK	BLANK
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES**

EXHIBIT O

EFT File Layout

PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2	BLANK	BLANK
TRANSACTION COUNT	90-94	N5		TOTAL:ALL
				CODE 110 C
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CONTROL RECORD:
HB LOCAL ACTIVE ADJUSTMENTS**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	110	HB LOCAL ACT.MONEY
PAY TYPE	4	A1	X	ADJUSTMENTS ONLY
LOCATION NUMBER	5-10	N6		BLANK
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		TOTAL: ALL
				CODE 110 D
PAYMENT AMOUNT 2	45-55	N9.2	BLANK	BLANK
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2	BLANK	BLANK
TRANSACTION COUNT	90-94	N5		TOTAL:ALL
				CODE 110 D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout

EXHIBIT O

CONTROL RECORD:
HB LOCAL ACTIVE NET TOTAL

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	110	HB LOCAL ACT.MONEY
PAY TYPE	4	A1	Y	NET TOTAL
LOCATION NUMBER	5-10	N6		BLANK
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		TOTAL: ALL
				CODE 110 C + D
PAYMENT AMOUNT 2	45-55	N9.2	BLANK	BLANK
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2	BLANK	BLANK
TRANSACTION COUNT	90-94	N5		TOTAL:ALL
				CODE 110 C + D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CONTROL RECORD:
HB LOCAL RETIRED CASH**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	120	HB LOCAL RET.MONEY
PAY TYPE	4	A1	W	CASH ONLY
LOCATION NUMBER	5-10	N6	BLANK	BLANK
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		TOTAL: ALL
				CODE 120 C
PAYMENT AMOUNT 2	45-55	N9.2	BLANK	BLANK
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2	BLANK	BLANK
TRANSACTION COUNT	90-94	N5		TOTAL:ALL
				CODE 120 C
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CONTROL REPORT
HB LOCAL RETIRED ADJUSTMENTS**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	120	HB LOCAL RET.MONEY
PAY TYPE	4	A1	X	ADJUSTMENTS ONLY
LOCATION NUMBER	5-10	N6		BLANK
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		TOTAL: ALL
				CODE 120 D
PAYMENT AMOUNT 2	45-55	N9.2	BLANK	BLANK
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2	BLANK	BLANK
TRANSACTION COUNT	90-94	N5		TOTAL:ALL
				CODE 120 D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout

EXHIBIT O

CONTROL RECORD:
HB LOCAL RETIRED NET TOTAL

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	120	HB LOCAL RET.MONEY
PAY TYPE	4	A1	Y	NET TOTAL
LOCATION NUMBER	5-10	N6		BLANK
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		TOTAL: ALL
				CODE 120 C + D
PAYMENT AMOUNT 2	45-55	N9.2	BLANK	BLANK
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2	BLANK	BLANK
TRANSACTION COUNT	90-94	N5		TOTAL:ALL
				CODE 120 C + D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CONTROL RECORD:
HB ST. MONTHLY CASH**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	200	HB ST.MON. MONEY
PAY TYPE	4	A1	W	CASH ONLY
LOCATION NUMBER	5-10	N6	BLANK	BLANK
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		TOTAL: ALL
				CODE 200 C
PAYMENT AMOUNT 2	45-55	N9.2	BLANK	BLANK
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2	BLANK	BLANK
TRANSACTION COUNT	90-94	N5		TOTAL:ALL
				CODE 200 C
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CONTROL RECORD:
HB ST. MONTHLY ADJUSTMENTS**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	200	HB ST.MON.MONEY
PAY TYPE	4	A1	X	ADJUSTMENTS ONLY
LOCATION NUMBER	5-10	N6		BLANK
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		TOTAL: ALL
				CODE 200 D
PAYMENT AMOUNT 2	45-55	N9.2	BLANK	BLANK
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2	BLANK	BLANK
TRANSACTION COUNT	90-94	N5		TOTAL:ALL
				CODE 200 D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

**CONTROL RECORD:
HB ST.MONTHLY NET TOTAL**

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	200	HB ST.MON. MONEY
PAY TYPE	4	A1	Y	NET TOTAL
LOCATION NUMBER	5-10	N6		BLANK
INVOICE DATE / PAY EFFECT DAY	11-12	N2		BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2		BLANK
INVOICE DATE / PAY EFFECT QTR	15	N1		BLANK
INVOICE DATE / PAY EFFECT YEAR	16-19	N4		BLANK
INVOICE NUMBER	20-25	N6		BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		TOTAL: ALL
				CODE 200 C + D
PAYMENT AMOUNT 2	45-55	N9.2	BLANK	BLANK
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	BLANK
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	BLANK
TOTAL PAYMENT	78-89	N10.2	BLANK	BLANK
TRANSACTION COUNT	90-94	N5		TOTAL:ALL
				CODE 200 C + D
REFERENCE NUMBER	95-103	N9	BLANK	BLANK
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	BLANK	BLANK
CALL TIME	123-128	N6	FILLER	FILLER
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5		BLANK
STATE NAME	148-174	A27		BLANK
FILLER	175-225	A50		BLANK

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES
EFT File Layout**

EXHIBIT O

Total RECORD:
Employer Retro Salary

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	60	TRANSMITTAL MONEY
PAY TYPE	4	A1	W	
LOCATION NUMBER	5-10	N6		1st POSITION FUND #
				LAST 5 LOCATION #
INVOICE DATE / PAY EFFECT DAY	11 - 12	N2	1-31	BLANK
INVOICE DATE / PAY EFFECT MONTH	13-14	N2	1 - 12	EFFECTIVE MONTH
INVOICE DATE / PAY EFFECT QTR	15	N1	1 - 4	PAY EFFECTIVE QTR
INVOICE DATE / PAY EFFECT YEAR	16-19	N4	YYYY	PAY EFFECT YEAR
INVOICE NUMBER	20-25	N6	BLANK	BLANK
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		PENSIONS CONTRIB
PAYMENT AMOUNT 2	45-55	BLANK	BLANK	CONTRIB INSURANCE
PAYMENT AMOUNT 3	56-66	N9.2	BLANK	SACT
PAYMENT AMOUNT 4	67-77	N9.2	BLANK	TSA
TOTAL PAYMENT	78-89	N10.2		TOTAL FOR:
				PEN+INS+SACT+TSA
TRANSACTION COUNT	90-94	N5	BLANK	BLANK
REFERENCE NUMBER	95-103	N9		BANK REFERENCE #
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	BLANK
ADJUSTMENT REASON CODE	112-114	A3	BLANK	BLANK
CALL DATE	115-122	N8	YYYYMMDD	DATE OF CALL
CALL TIME	123-128	N6	HHMMSS	TIME OF CALL
TRANSMIT DATE	129-136	N8	BLANK	BLANK
TRANSMIT TIME	137-142	N6	BLANK	BLANK
BANK TRANSMISSION ID	143-147	N5	BLANK	BLANK
STATE NAME	148-174	A27	BLANK	BLANK
FILLER	177-223	A48	FILLER	FILLER

TOTAL RECORD

<u>FIELD NAME</u>	<u>POSITION</u>	<u>FORMAT LENGTH</u>	<u>VALUE</u>	<u>DESCRIPTION</u>
PAY CODE	1-3	N3	999	TOTAL

**DIVISION OF PENSIONS AND BENEFITS
ACH COLLECTION SERVICES**

EXHIBIT O

EFT File Layout

PAY TYPE	4	A1	Z	
LOCATION NUMBER	5-10	N6	BLANK	
INVOICE DATE / PAY EFFECT DAY	11-12	N2	BLANK	
INVOICE DATE / PAY EFFECT MONTH	13-14	N2	BLANK	
INVOICE DATE / PAY EFFECT QTR	15	N1	BLANK	
INVOICE DATE / PAY EFFECT YEAR	16-19	N4	BLANK	
INVOICE NUMBER	20-25	N6	BLANK	
DEPOSIT DATE	26-33	N8	YYYYMMDD	DATE OF DEPOSIT
PAYMENT AMOUNT 1	34-44	N9.2		TOTAL: COL 1
PAYMENT AMOUNT 2	45-55	N9.2		TOTAL: COL 2
PAYMENT AMOUNT 3	56-66	N9.2		TOTAL: COL 3
PAYMENT AMOUNT 4	67-77	N9.2		TOTAL: COL 4
TOTAL PAYMENT	78-89	N10.2		TOTAL:ALL
TRANSACTION COUNT	90-94	N5	BLANK	TOTAL:ALL
REFERENCE NUMBER	95-103	N9	BLANK	
ORIGINAL DEPOSIT DATE	104-111	N8	BLANK	
ADJUSTMENT REASON CODE	112-114	A3	BLANK	
CALL DATE	115-122	N8	BLANK	
CALL TIME	123-128	N6	BLANK	
TRANSMIT DATE	129-136	N8	YYYYMMDD	DATE FILE SENT
TRANSMIT TIME	137-142	N6	HHMMSS	TIME FILE SENT
BANK TRANSMISSION ID	143-147	N5	BLANK	
STATE NAME	148-174	A27	BLANK	
FILLER	175-225	A50	BLANK	FILLER