DEPARTMENT OF LABOR AND WORKFORCE DEVELOPMENT REQUEST FOR PROPOSAL

CANCELLATION FILE LAYOUT

Family Leave Account #6
State Plan Disability Account #7
Pandemic Unemployment Assistance (PUA) Account #11
Trade Re-Adjustment Act (TRA) Account #13
Unemployment Compensation Benefit (UC) Account #15
Extended Benefits (EB) Account #16
Federal Pandemic Unemployment Compensation (FPUC) Account #17
Pandemic Extended Unemployment Assistance (PEUA) Account #18

1-CONTROL HEADER RECORD

FIELD	FIELD DESCRIPTION	POS	LENGTH	FORMAT	GENERAL COMMENTS
1	Record Type	1	3		"CCH"
2	File Creation Date	4	8	N	YYYYMMDD
3	File Creation Time	12	6	N	HHMMSS
	Total Maximum Record Length		17		

2-CARDS CANCELLED RECORD

FIELD	FIELD DESCRIPTION	POS	LENGTH	FORMAT	GENERAL COMMENTS
1	Record Type	1	3		"CCR"
2	Account Number	4	16	N	
3	Cardholder First Name	20	30		
4	Cardhlolder Middle Name	50	30		
5	Cardholder Last Name	80	30		
6	Reason for Closure of Card	110	30		
7	SSN	140	9		
8	Routing and Transit Number	149	9		
9	Source System DDA Number Text	158	13		
	Total Maximum Record Length		170		

6-CONTROL TRAILER RECORD

FIELD	FIELD DESCRIPTION	POS	LENGTH	FORMAT	GENERAL COMMENTS
1	Record Type	1	3		"CCT"
2	File Creation Date	4	8	N	Same as value within the "CCH" Record
3	File Creation Time	12	6	N	Same as value within the "CCH" Record
4	Control Total (# of Records)	18	10	N	Total count of all "2" (CCR) Records
	Total Maximum Record Length		27		