

(LOSS TOTAL RECORD - TYPE 20)

Format/Edits

Field No.	Field Name	Begin Pos	Size	Picture	Field Edits
1	Record Type	1	2	9(02)	Required. Must be 20.
2	Reporting Organization	3	2	X(02)	Required. Edit with RO/Company table.
3	Location State	5	2	9(02)	Required. Edit with FIPS State table.
4	Company	7	3	9(03)	For Reinsured edit with company table; for FSA edit with the county table.
5	Policy Number	10	7	9(07)	Required. Must be > zeros.
6	Crop Year	17	4	9(04)	Required. Must be the crop year of the crops reported under the policy. This will equal the Reinsurance Year +/- 1.
7	Type 20 Key Reserve	21	21	X(21)	Space Reserved for other record types.
8	Claim Number	42	8	9(08)	Required. Must be > zeros.
9	Reinsurance Year	50	4	9(04)	Required. Must be 1998.
10	Type 20 Key Reserve	54	22	X(22)	Space Reserved for Additional key data required in the future or for other record types.
11	Record Number	76	3	9(03)	Must be > zero and unique within a Crop Policy (Location State/Location County/Crop).
12	1 st Total Reinsurance Year	79	4	9(04)	If 1 st Total = 'R', Must = Recovery Year Otherwise must = zeros.
13	1 st Total Payment/Credit Memo Company	83	3	9(03)	If 1 st Total <> Spaces, must be a valid company. Otherwise must = zeros.
14	1 st Total	86	1	X(01)	Must be: D = Draft Issued E = Escrow Funded F = Administrative Fees M = Credit Memo this Policy O = Other (e.g. Hail, Interest, etc.) P = Credit Memo - Loss Applied to another Policy R = Recovery of Premium or Overpaid Indemnity Blank = No Total
15	1 st Escrow Check/Draft Number -or- P/C Memo State P/C Memo Policy	87	9	9(09)	If 1 st Total = D or E, must be > zero. Enter escrow check/draft # or if = "P" enter credit memo number.
16	1 st Total Date Draft Issued	96	8	9(08)	If 1 st Total = Blank, must be zeros. Otherwise, if > 0 must be a valid date. Format is MMDDCCYY.
17	1 st Total Amount	104	10	S9(08)V(02)	If 1 st Total = Blank, must be zero. Otherwise, must be > 0 or < 0. Sum of all Total Amounts must be > zero.
18	2 nd Total Reinsurance Year	114	4	9(04)	If 2 nd Total = 'R', Must = Recovery Year Otherwise must = zeros.
19	2 nd Total Payment/Credit Memo Company	118	3	9(03)	If 2 nd Total <> Spaces, must be a valid company. Otherwise must = zeros.

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20	2 nd Total	121	1	X(01)	See 1 st Total for permitted values.
21	2 nd Escrow Check/Draft Number -or- P/C Memo State P/C Memo Policy	122	9	9(09)	If 2 nd Total = D or E, must be > zero. Enter escrow check/draft # if = "P" enter credit memo number.
22	2 nd Total Date Draft Issued	131	8	9(08)	If 2 nd Total = Blank, must be zeros. Otherwise, if > 0 must be a valid date. Format is MMDDCCYY.
23	2 nd Total Amount	139	10	S9(08)V(02)	If 2 nd Total = Blank, must be zero. Otherwise, must be > 0 or < 0.
24	3 rd Total Reinsurance Year	149	4	9(04)	If 3 rd Total = 'R', Must = Recovery Year Otherwise must = zeros.
25	3 rd Total Payment/Credit Memo Company -or- P/C Memo State P/C Memo Policy	153	3	9(03)	If 3 rd Total <> Spaces, must be a valid company. Enter escrow check/draft # or if = "P" enter credit memo number.
26	3 rd Total	156	1	X(01)	See 1 st Total for permitted values.
27	3 rd Escrow Check/Draft Number	157	9	9(09)	If 3 rd Total = D or E, must be > zero. Otherwise, must be zero.
28	3 rd Total Date Draft Issued	166	8	9(08)	If 3 rd Total = Blank, must be zeros. Otherwise, if > 0 must be a valid date. Format is MMDDCCYY.
29	3 rd Total Amount	174	10	S9(08)V(02)	If 3 rd Total = Blank, must be zero. Otherwise, must be > 0 or < 0.
30	4 th Total Reinsurance Year	184	4	9(04)	If 4 th Total = 'R', Must = Recovery Year Otherwise must = zeros.
31	4 th Total Payment/Credit Memo Company -or- P/C Memo State P/C Memo Policy	188	3	9(03)	If 4 th Total <> Spaces, must be a valid company. Enter escrow check/draft # or if = "P" enter credit memo number.
32	4 th Total	191	1	X(01)	See 1 st Total for permitted values.
33	4 th Escrow Check/Draft Number	192	9	9(09)	If 4 th Total = D or E, must be > zero. Otherwise, must be zero.
34	4 th Total Date Draft Issued	201	8	9(08)	If 4 th Total = Blank, must be zeros. Otherwise, if > 0 must be a valid date. Format is MMDDCCYY.
35	4 th Total Amount	209	10	S9(08)V(02)	If 4 th Total = Blank, must be zero. Otherwise, must be > 0 or < 0.
36	Filler	219	115	X(115)	Must be Blanks.
37	Valid for Escrow Flag	334	1	X(01)	Internal Use. Will be 'Y' if the record passes edits necessary for escrow processing (numeric checks). Will be 'N' if the record is not acceptable for escrow.
38	Filler	335	16	9(16))	Internal Use.

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39	FCIC Control Time	351	8	9(08)	Internal Use. The time the transaction batch file was received. (From when transmission started) HHMMSSMM Format.
40	FCIC Control Date	359	8	9(08)	Internal Use. The date the transaction batch file was received. (From when transmission started) CCYYMMDD Format.
41	Reinsurance Year	367	4	9(04)	Internal Use. The Reinsurance Year. CCYY format.
42	Batch Number	371	4	9(04)	Internal Use. The sequential number identifying the file that was submitted by the RO to FCIC/RMA.
43	Transaction Sequence Number	375	8	9(08)	Internal Use. The sequential number assigned to each transaction number processed by DAS <u>after it has been sorted.</u>
44	Transaction Rejected Flag	383	1	X(01)	Internal. Will be: 'Y' if the transaction was rejected. 'N' if the transaction was not rejected.
45	Transaction Source Flag	384	1	X(01)	Internal Use. Will be: 'I' if the transaction is from the input file. 'G' if the transaction was generated by DAS. 'D' if the transaction came from a transaction database.
46	Filler	385	16	X(16)	Internal Use.

Notes: