

**(RECORD 5 OUTPUT FORMAT for PHONE)**

Format/Edits

Field No.	Field Name	Begin Pos	Size	Picture	Field Edits
1	Incoming Filename	1	20	X(20)	
2	Request Record Type	21	2	9(02)	Required. Must be 05.
3	Reinsurance Year	23	4	9(04)	
4	Approved Insurance Provider	27	2	X(02)	
5	Policy Location State	29	2	9(02)	
6	Policy Issuing Company	31	3	9(03)	
7	Policy Number	34	7	9(07)	
8	Crop Year	41	4	9(04)	
9	Crop Code	45	4	9(04)	
10	Insurance Plan Code	49	2	9(02)	
11	Policy Location County	51	3	9(03)	
12	Record Type	54	4	X(04)	Must be PHON.
13	Policy Primary or SBI Indicator	58	3	X(03)	
14	Policy Primary or SBI Records Number	61	3	9(03)	
15	SCIMS Phone Record Number	64	3	9(03)	
16	SCIMS Phone Number	67	15	X(15)	
17	SCIMS Phone Extension	82	6	9(06)	
18	SCIMS Phone Primary	88	1	X(01)	
19	SCIMS Phone Type Code	89	2	X(02)	
20	SCIMS Phone Type Name	91	15	X(15)	
21	SCIMS Phone Unlisted	106	1	X(01)	
22	CIMS SCIMS FSA Producer Info As of Date	107	8	9(08)	

**NOTE: Grey Highlighted areas represent data that is returned from the CIMS process. This includes CIMS Status Codes, RMA Policy Data, FSA Producer Data, and FSA Acreage Data**