

**Application Source: CIMS**

**File Group: Output**

**Exhibit Name: RECORD 5 OUTPUT FORMAT  
for PHONE**

**File Type: Delimited**

**Reinsurance Year: 2027**

**Version: Comment**

**Release Date: 3/12/2026**

| <u>Field<br/>Number</u>                                                                                                                                                               | <u>Field Name</u>                           | <u>Begin<br/>Pos</u> | <u>Size</u> | <u>Picture</u> | <u>Field Edits</u>               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|----------------------|-------------|----------------|----------------------------------|
| 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)          |                                  |
| <b>NOTE: Gray 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.</b> |                                             |                      |             |                |                                  |
| 12                                                                                                                                                                                    | Record Type                                 | 54                   | 4           | X(04)          | Must be PHON.                    |
| 13                                                                                                                                                                                    | Policy Primary or SBI/Spousal Indicator     | 58                   | 3           | X(03)          | PRI, SBI, or SP1, SP2, SP3, etc. |
| 14                                                                                                                                                                                    | Policy Primary or SBI/Spousal Record 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)          |                                  |