

Expanded Federal Parent Locator Service

**Federal Case Registry**  
**Release 02-01 – Minor**

May 10, 2002

**Appendix B – SVES Data Dictionary**  
**Release Specifications**

April 30, 2002

## B. SVES DATA DICTIONARY

This appendix includes the data definitions and descriptions for the data fields that are contained in the four SVES Output Transaction Layouts.

This appendix lists the data fields in alphabetic order. The following information is provided for each data field:

1. **Name** – The name of the field as it appears on the output transaction layout.
2. **Type** – If the field is an input field, output field or both.
3. **Condition** – Fields on input or output transactions are required or conditional.
4. **Length** – The size of the field on the record layout.
5. **Format** – If the field is alphabetic, numeric, or alphanumeric.
6. **Values** – The acceptable values for the field.
7. **Description** – A narrative explanation of the field.

The following pages include the data fields that are accepted, stored, calculated or returned by SVES.

<p>Name:          Type:          Condition:            Length:          Format:          Values:            Description:</p>	<p><b>BLACK LUNG ENTITLEMENT CODE</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>         1          Alphanumeric          D – Death termination          E – Entitled          N – Nonpayment          P – Pending entitlement          T – Terminated (other than death)          Space – No Black Lung entitlement          The Title II recipient’s Black Lung entitlement code.</p>
<p>Name:          Type:          Condition:            Length:          Format:          Values:          Description:</p>	<p><b>BLACK LUNG PAYMENT AMOUNT</b>          Output Field          Required for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>         6          Numeric in COBOL format 9(4)V99          0 through 9          The Title II recipient’s Black Lung payment amount.</p>
<p>Name:          Type:          Condition:            Length:          Format:          Values:</p>	<p><b>CAN AND BIC</b>          Output field          Required for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>         12          Alphanumeric          The first nine characters contain the Claim Account Number (CAN). The last three-characters contain the Beneficiary Identification Code (BIC), or spaces.          BIC codes are:          &amp; and O Combined A and B beneficiary in the same payment          A Primary claimant          B Aged wife, age 62 or over (1<sup>st</sup> claimant)          B1 Aged husband, age 62 or over (1<sup>st</sup> claimant)          B2 Young wife, with a child in her care (1<sup>st</sup> claimant)          B3 Aged wife (2<sup>nd</sup> claimant)          B4 Aged husband (2<sup>nd</sup> claimant)          B5 Young wife (2<sup>nd</sup> claimant)          B6 Divorced wife, age 62 or over (1<sup>st</sup> claimant)          B7 Young wife (3<sup>rd</sup> claimant)          B8 Aged wife (3<sup>rd</sup> claimant)          B9 Divorced wife (2<sup>nd</sup> claimant)</p>

BA	Aged wife (4 <sup>th</sup> claimant)
BD	Aged wife (5 <sup>th</sup> claimant)
BG	Aged husband (3 <sup>rd</sup> claimant)
BH	Aged husband (4 <sup>th</sup> claimant)
BJ	Aged husband (5 <sup>th</sup> claimant)
BK	Young wife (4 <sup>th</sup> claimant)
BL	Young wife (5 <sup>th</sup> claimant)
BN	Divorced wife (3 <sup>rd</sup> claimant)
BP	Divorced wife (4 <sup>th</sup> claimant)
BQ	Divorced wife (5 <sup>th</sup> claimant)
BR	Divorced husband, age 62 or older (1 <sup>st</sup> claimant)
BT	Divorced husband (2 <sup>nd</sup> claimant)
BW	Young husband (2 <sup>nd</sup> claimant)
BY	Young husband, with a child in his care (1 <sup>st</sup> claimant)
C1-C9	Child (includes minor, student or disabled child)
CA-CK	Child (includes minor, student or disabled child)
D	Aged widow, age 60 or over (1 <sup>st</sup> claimant)
D1	Aged widow, age 60 or over (1 <sup>st</sup> claimant)
D2	Aged widow (2 <sup>nd</sup> claimant)
D3	Aged widower (2 <sup>nd</sup> claimant)
D4	Widow (remarried after attainment of age 60) (1 <sup>st</sup> claimant)
D5	Widower (remarried after attainment of age 60) (1 <sup>st</sup> claimant)
D6	Surviving divorced wife, age 60 or over (1 <sup>st</sup> claimant)
D7	Surviving divorced wife (2 <sup>nd</sup> claimant)
D8	Aged widow (3 <sup>rd</sup> claimant)
D9	Remarried widow (2 <sup>nd</sup> claimant)
DA	Remarried widow (3 <sup>rd</sup> claimant)
DC	Surviving divorced husband, age 60 or over (1 <sup>st</sup> claimant)
DD	Aged widow (4 <sup>th</sup> claimant)
DG	Aged widow (5 <sup>th</sup> claimant)
DH	Aged widower (3 <sup>rd</sup> claimant)
DJ	Aged widower (4 <sup>th</sup> claimant)
DK	Aged widower (5 <sup>th</sup> claimant)
DL	Remarried widow (4 <sup>th</sup> claimant)
DM	Surviving divorced husband (2 <sup>nd</sup> claimant)
DN	Remarried widow (5 <sup>th</sup> claimant)
DP	Remarried widower (2 <sup>nd</sup> claimant)
DQ	Remarried widower (3 <sup>rd</sup> claimant)
DR	Remarried widower (4 <sup>th</sup> claimant)
DS	Surviving divorced husband (3 <sup>rd</sup> claimant)
DT	Remarried (5 <sup>th</sup> claimant)
DV	Surviving divorced wife (3 <sup>rd</sup> claimant)
DW	Surviving divorced wife (4 <sup>th</sup> claimant)
DX	Surviving divorced husband (4 <sup>th</sup> claimant)
DY	Surviving divorced wife (5 <sup>th</sup> claimant)
DZ	Surviving divorced husband (5 <sup>th</sup> claimant)

E	Mother (widow) (1 <sup>st</sup> claimant)
E1	Surviving divorced mother (1 <sup>st</sup> claimant)
E2	Mother (widow) (2 <sup>nd</sup> claimant)
E3	Surviving divorced mother (2 <sup>nd</sup> claimant)
E4	Father (widower) (1 <sup>st</sup> claimant)
E5	Surviving divorced father (widower) (1 <sup>st</sup> claimant)
E6	Father (widower) (2 <sup>nd</sup> claimant)
E7	Mother (widow) (3 <sup>rd</sup> claimant)
E8	Mother (widow) (4 <sup>th</sup> claimant)
E9	Surviving divorced father (widower) (2 <sup>nd</sup> claimant)
EA	Mother (widow) (5 <sup>th</sup> claimant)
EB	Surviving divorced mother (3 <sup>rd</sup> claimant)
EC	Surviving divorced mother (4 <sup>th</sup> claimant)
ED	Surviving divorced mother (5 <sup>th</sup> claimant)
EF	Father (widower) (3 <sup>rd</sup> claimant)
EG	Father (widower) (4 <sup>th</sup> claimant)
EH	Father (widower) (5 <sup>th</sup> claimant)
EJ	Surviving divorced father (3 <sup>rd</sup> claimant)
EK	Surviving divorced father (4 <sup>th</sup> claimant)
EM	Surviving divorced father (5 <sup>th</sup> claimant)
F1	Parent (father)
F2	Parent (mother)
F3	Parent (stepfather)
F4	Parent (stepmother)
F5	Parent (adopting father)
F6	Parent (adopting mother)
F7	Parent (2 <sup>nd</sup> alleged father)
F8	Parent (2 <sup>nd</sup> alleged mother)
J1	Primary Prouty entitled to HIB (less than three qualifying quarters (QQs)) (General Fund)
J2	Primary Prouty entitled to HIB (more than two QQs) (Retirement and Survivors Insurance (RSI) Trust Fund)
J3	Primary Prouty not entitled to HIB (less than three QQs) (General Fund)
J4	Primary Prouty not entitled to HIB (more than two QQs) (RSI Trust Fund)
K1	Prouty wife entitled to HIB (less than three QQs) (General Fund)
K2	Prouty wife entitled to HIB (more than two QQs) (RSI Trust Fund) (1 <sup>st</sup> claimant)
K3	Prouty wife not entitled to HIB (less than three QQs) (General Fund)
K4	Prouty wife not entitled to HIB (more than two QQs) (RSI Trust Fund) (1 <sup>st</sup> claimant)
K5	Prouty wife entitled to HIB (less than three QQs) (General Fund) (2 <sup>nd</sup> claimant)
K6	Prouty wife entitled to HIB (more than two QQs) (RSI Trust Fund) (2 <sup>nd</sup> claimant)

K7	Prouty wife not entitled to HIB (less than three QQs) (General Fund) (2 <sup>nd</sup> claimant)
K8	Prouty wife not entitled to HIB (less than three QQs) (General Fund) (3 <sup>rd</sup> claimant)
KA	Prouty wife entitled to HIB (more than two QQs) (RSI Trust Fund) (3 <sup>rd</sup> claimant)
KB	Prouty wife not entitled to HIB (less than three QQs) (General Fund) (3 <sup>rd</sup> claimant)
KC	Prouty wife not entitled to HIB (more than two QQs) (RSI Trust Fund) (3 <sup>rd</sup> claimant)
KD	Prouty wife entitled to HIB (less than three QQs) (General Fund) (4 <sup>th</sup> claimant)
KE	Prouty wife entitled to HIB (more than two QQs) (RSI Trust Fund) (4 <sup>th</sup> claimant)
KF	Prouty wife not entitled to HIB (less than three QQs) (General Fund) (4 <sup>th</sup> claimant)
KG	Prouty wife not entitled to HIB (more than two QQs) (RSI Trust Fund) (4 <sup>th</sup> claimant)
KH	Prouty wife entitled to HIB (less than three QQs) (General Fund) (5 <sup>th</sup> claimant)
KJ	Prouty wife entitled to HIB (more than two QQs) (RSI Trust Fund) (5 <sup>th</sup> claimant)
KL	Prouty wife not entitled to HIB (less than three QQs) (General Fund) (5 <sup>th</sup> claimant)
KM	Prouty wife not entitled to HIB (more than two QQs) (RSI Trust Fund) (5 <sup>th</sup> claimant)
M	Uninsured beneficiary (not qualified for automatic HIB)
M1	Uninsured beneficiary (qualified for automatic HIB but requests only SMIB)
T	This code means: <ul style="list-style-type: none"> <li>• Fully insured beneficiaries who have elected entitlement only to HIB (usually, but not always, with SMIB) or</li> <li>• Uninsured beneficiary or renal disease beneficiary only or</li> <li>• Deemed insured (hospital insurance only)</li> </ul>
T2	MQGE(*CDB) (2 <sup>nd</sup> claimant)
T3	MQGE(CDB) (3 <sup>rd</sup> claimant)
T4	MQGE(CDB) (4 <sup>th</sup> claimant)
T5	MQGE(CDB) (5 <sup>th</sup> claimant)
T6	MQGE(CDB) (6 <sup>th</sup> claimant)
T7	MQGE(CDB) (7 <sup>th</sup> claimant)
T8	MQGE(CDB) (8 <sup>th</sup> claimant)
T9	MQGE(CDB) (9 <sup>th</sup> claimant)
TA	Medicare Qualified Government Employment (MQGE) primary beneficiary
TB	MQGE aged spouse (1 <sup>st</sup> claimant)
TC	MQGE childhood disability benefits (CDB) (1 <sup>st</sup> claimant)

<p>Description:</p>	<p>TD MQGE aged widow(er) (1<sup>st</sup> claimant)          TE MQGE young widow(er)(1<sup>st</sup> claimant)          TF MQGE parent (male)          TG MQGE aged spouse (2<sup>nd</sup> claimant)          TH MQGE aged spouse (3<sup>rd</sup> claimant)          TJ MQGE aged spouse (4<sup>th</sup> claimant)          TK MQGE aged spouse (5<sup>th</sup> claimant)          TL MQGE aged widow(er) (2<sup>nd</sup> claimant)          TM MQGE aged widow(er) (3<sup>rd</sup> claimant)          TN MQGE aged widow(er) (4<sup>th</sup> claimant)          TP MQGE aged widow(er) (5<sup>th</sup> claimant)          TQ MQGE parent (female)          TR MQGE young widow(er) (2<sup>nd</sup> claimant)          TS MQGE young widow(er) (3<sup>rd</sup> claimant)          TT MQGE young widow(er) (4<sup>th</sup> claimant)          TU MQGE young widow(er) (5<sup>th</sup> claimant)          TV MQGE disabled widow(er) (1<sup>st</sup> claimant)          TW MQGE disabled widow(er) (1<sup>st</sup> claimant)          TX MQGE disabled widow(er) (2<sup>nd</sup> claimant)          TY MQGE disabled widow(er) (3<sup>rd</sup> claimant)          TZ MQGE disabled widow(er) (4<sup>th</sup> claimant)          W Disabled widow, age 50 or over (1<sup>st</sup> claimant)          W1 Disabled widower, age 50 or over (1<sup>st</sup> claimant)          W2 Disabled widow (2<sup>nd</sup> claimant)          W3 Disabled widower (2<sup>nd</sup> claimant)          W4 Disabled widow (3<sup>rd</sup> claimant)          W5 Disabled widower (3<sup>rd</sup> claimant)          W6 Disabled surviving divorced wife (1<sup>st</sup> claimant)          W7 Disabled surviving divorced wife (2<sup>nd</sup> claimant)          W8 Disabled surviving divorced wife (3<sup>rd</sup> claimant)          W9 Disabled widow (4<sup>th</sup> claimant)          WB Disabled widower (4<sup>th</sup> claimant)          WC Disabled surviving divorced wife (4<sup>th</sup> claimant)          WF Disabled widow (5<sup>th</sup> claimant)          WG Disabled widower (5<sup>th</sup> claimant)          WJ Disabled surviving divorced wife (5<sup>th</sup> claimant)          WR Disabled surviving divorced husband (1<sup>st</sup> claimant)          WT Disabled surviving divorced husband (2<sup>nd</sup> claimant)  <u>NOTE:</u> Some BICs may be displayed as a three-position code (e.g., 'B01', 'C01', etc.)          The Claim Account Number and Beneficiary Identification Code that are assigned to the Title II recipient.</p>
<p>Name:          Type:          Condition:</p>	<p><b>CATEGORY OF ASSISTANCE</b>          Output field          Conditional for the following output record:</p>

<p>Length: 1          Format: Alphanumeric          Values: A – Aged          B – Blind          C – AFDC          D – Disabled          F – Food Stamps          H – Health Maintenance          I – Income Maintenance          J – AFDC and Food Stamps          K – Food Stamps and Medicaid          N – Title XIX Medicaid Eligibility          P – Child Support Enforcement          S – Statement of Consent          U – Unemployment Compensation          Space – None</p> <p>Description: The Title II recipient’s State exchange categorical assistance code.</p>	<ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>
<p>Name: <b>COUNTY CODE</b>          Type: Output field          Condition: Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>         Length: 3          Format: Alphanumeric          Values: The three-character county FIPS Code for the county that is responsible for any mandatory or optional supplemental payment. The code represents the Title II recipient’s county of residence unless another county has jurisdiction.</p> <p>Description: The Title II recipient’s county code for the jurisdiction responsible for payment.</p>	
<p>Name: <b>CURRENT PAYMENT STATUS CODE</b>          Type: Output field          Condition: Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title XVI Locate Response Record</li> </ul>         Length: 3          Format: Alphanumeric          Values: The current SSI code from the values in the Payment Status Code field</p> <p>Description: The Title XVI recipient’s current payment status code.</p>	
<p>Name: <b>CUSTODY CODE</b>          Type: Output field          Condition: Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES XVI Locate Response Record</li> </ul>         Length: 3          Format: Alphanumeric</p>	



<p>Values:</p>	<p>AGY – Social agency          CHD – Natural, adopted or stepchild (as payee for a parent)          ESP – Essential person is payee          FDM – Federal mental institution          FDO – Federal non-mental institution          FIN – Financial organization          FTH – Natural or adoptive father          GPR – Grandparent          MTH – Natural or adoptive mother          NPM – Nonprofit mental institution          NPO – Nonprofit non-mental institution          OFF – Public official          OTH – Other          PRM – Proprietary mental institution          PRO – Proprietary non-mental institution          PYE – Payee has custody          REL – Other relative (includes in-laws)          RPD – Representative payee is being developed          SEL – Living by self          SFT – Stepfather          SLM – State/local mental institution          SLO – State/local non-mental institution          SMT – Stepmother          SPO – Spouse          Spaces – Not applicable</p>
<p>Description:</p>	<p>The indicator of who has physical custody of the Title XVI recipient.</p>
<p>Name:</p>	<p><b>DATE OF CONFINEMENT</b></p>
<p>Type:</p>	<p>Output field</p>
<p>Condition:</p>	<p>Required for the following output record:</p> <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul>
<p>Length:</p>	<p>8</p>
<p>Format:</p>	<p>Alphanumeric</p>
<p>Values:</p>	<p>A valid date in CCYYMMDD format</p>
<p>Description:</p>	<p>The prisoner's initial date of confinement, as reported to SVES by the prison.</p>
<p>Name:</p>	<p><b>DATE OF CURRENT TITLE II ENTITLEMENT</b></p>
<p>Type:</p>	<p>Output field</p>
<p>Condition:</p>	<p>Conditional for the following output record:</p> <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>
<p>Length:</p>	<p>6</p>
<p>Format:</p>	<p>Alphanumeric</p>
<p>Values:</p>	<p>A valid date in CCYYMM format, or spaces</p>
<p>Description:</p>	<p>The date that the Title II recipient was initially eligible for Title II benefits for the current period of entitlement.</p>

<p>Name:          Type:          Condition:            Length:          Format:          Values:            Description:</p>	<p><b>DATE OF DEATH SOURCE CODE</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title XVI Locate Response Record</li> </ul>         1          Alphanumeric          1 – SSA District Office (DO) notification or manual adjustment          2 – Health insurance (HI) notification          3 – Master Beneficiary Record (MBR) Notification          4 – Treasury returned check notification          5 – Returned check from Treasury with no date of death shown (Date of Death field will contain the date of transaction)          6 – State notification          Space – Not applicable          The source of the Title XVI recipient’s date of death.</p>
<p>Name:          Type:          Condition:            Length:          Format:          Values:          Description:</p>	<p><b>DATE OF INITIAL TITLE II ENTITLEMENT</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>         6          Alphanumeric          A valid date in CCYYMM format, or spaces          The date that the Title II recipient was initially eligible for Title II benefits.</p>
<p>Name:          Type:          Condition:            Length:          Format:          Values:          Description:</p>	<p><b>DATE OF TITLE II SUSPENSION OR TERMINATION</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>         6          Alphanumeric          A valid date in CCYYMM format, or spaces          The date that the event which caused the suspension or termination of Title II benefits for this recipient occurred.</p>
<p>Name:          Type:          Condition:            Length:          Format:          Values:          Description:</p>	<p><b>DATE OF TITLE XVI APPEAL</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES XVI Locate Response Record</li> </ul>         8          Alphanumeric          A valid date in CCYYMMDD format, or spaces          If applicable, this field will contain the most recent appeal action date for the Title XVI recipient.</p>

<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>DATE OF TITLE XVI ELIGIBILITY</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES XVI Locate Response Record</li> </ul>         6          Alphanumeric          A valid date in CCYYMM format, or spaces          If applicable, this field will contain the application date, final onset date or date the Title XVI recipient attained the age of 65 years, whichever is later.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>DEFERRED PAYMENT DATE</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>         6          Alphanumeric          A valid date in CCYYMM format, or spaces          The Title II recipient's initial date on which the first or next deferred payment can be made.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>DIRECT DEPOSIT INDICATOR</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES XVI Locate Response Record</li> </ul>         1          Alphabetic          C – Checking          S – Savings          Space – None          The method that is used to send direct deposit payments to the Title II or Title XVI beneficiary.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>ESTIMATED SELF EMPLOYMENT AMOUNT</b>          Output field          Required for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES XVI Locate Response Record</li> </ul>         6          Numeric in COBOL format 9999V99          0 through 9          The Title XVI recipient's self-employment estimated net income.</p>
<p>Name:          Type:</p>	<p><b>FIPS COUNTY CODE</b>          Output field</p>

<p>Condition:   Length: Format: Values: Description:</p>	<p>Optional for the following output records:</p> <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> <li>• FCR SVES Prison Locate Response Record</li> <li>• FCR SVES Not Found Locate Response Record</li> </ul> <p>3          Alphanumeric          001 through 999, or spaces.          Positions 3 through 5 of the FIPS Code for the county within the submitting State where the FCR case is managed. Refer to the Department of Commerce FIPS Code Manual, National Institute of Standards and Technology FIPS PUB 6-4, titled, <i>Counties and Equivalent Entities of the United States, its Possessions, and Associated Areas</i>, for a list of these codes. FIPS Codes may also be found on the Internet at <a href="http://www.itl.nist.gov">http://www.itl.nist.gov</a>.</p>
<p>Name: Type: Condition:  Length: Format: Values:          Description:</p>	<p><b>HI OPTION CODE</b>          Output field          Conditional for the following output record:</p> <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul> <p>1          Alphanumeric</p> <p>C – None (Cessation)          D – None (Denied)          E – Yes (Automatic)          F – None (Invalid enrollment)          G – Yes (Good cause)          H – None (Not eligible or did not enroll)          P – Railroad          R – None (Refused)          S – None - No longer under renal disease provision          T – None - Terminated for nonpayment of premiums          W – None - Withdrawal          X – None - Title II termination          Y – Supplemental insurance (Part B) is payable          Space – Not applicable</p> <p>The Title II recipient's Health Insurance (HI) Option code.</p>
<p>Name: Type: Condition:  Length: Format: Values: Description:</p>	<p><b>HI START DATE</b>          Output field          Conditional for the following output record:</p> <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul> <p>6          Alphanumeric          A valid date in CCYYMM format, or spaces          The date that the Title II recipient became eligible for health insurance (HI).</p>

<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>HI STOP DATE</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>         6          Alphanumeric          A valid date in CCYYMM format, or spaces          The date that the Title II recipient's health insurance (HI) benefits ended.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:</p>	<p><b>LAF CODE</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>         2          Alphanumeric          This field contains a value for the Ledger Account File Code (LAF), which reflects the MBR payment status for this beneficiary. LAF values are:          A Withdrawal for adjustment          AA Adjusted to split PICs in advance file status          AC PIA Correction          AD Adjusted for dual entitlement          AE Withdrawn for recomputation under Section 142 (Japanese internment credits)          AF Transferred to another program service center or OIO          AJ Worker's compensation offset/public disability benefits cancelled          AM Withdrawn from HIB-only status          AP Withdrawn for change of PIC or post-entitlement action          AR Withdrawal of a beneficiary from LAF-S or T to place in current payment status          AW Withdrawn to impose worker's compensation offset/public disability benefits          A&amp; Withdrawn from suspense or deferred status to be placed in current payment status          A Withdrawn from current payment status to be placed in suspense or deferred status          A0 Withdrawn to adjust reduction factor          A1 Withdrawn for recomputation under Section 229          A2 Withdrawn for 1965 or 1968 recomputation          A3 Withdrawn for recomputation under Sections 217 and 229          A4 Withdrawn for disability offset recomputation          A5 Withdrawn for recomputation not separately defined          A6 Withdrawn to recalculate PIA to include disability freeze          A7 Withdrawn for recomputation under Section 217          A8 Record transferred from OIO to another program service center</p>

A9	Withdrawn for adjustment action not separately defined
B	Abatement status
C	Current payment status (except railroad payment)
D	Deferred payment status
DP	Deferred because of Public Assistance
DW	Deferred for Worker's Compensation/public disability benefit offset
D1	Deferred for Foreign work test
D2	Deferred for annual retirement test
D3	Deferred as an auxiliary because the primary beneficiary is LAF-D2
D4	Deferred for no child-in-care
D5	Deferred as an auxiliary because the primary beneficiary is in LAF-D1
D6	Deferred to recover overpayments not separately defined
D9	Deferred for reasons not separately defined
E	Current payment certified to Railroad Retirement Board (RRB)
F	Advanced filing for current payment through RRB
J	Advance file current pay case
K	Advanced filing for deferred payment
L	Advanced filing for conditional payment
N	Disallowed claim
ND	Denied claim
P	Delayed claim (adjudication pending)
PB	Delayed claim – beneficiary's claim not finally adjudicated
PT	Claim has been terminated from delayed claims status
R	Kill Credit
SX	Conditional status
SB	Benefits due but not paid (less than \$1.00)
SD	Technical entitlement, either the beneficiary is entitled on another claim, or the disability family maximum provision has reduced the MBA to zero
SF	Prouty beneficiary fails to meet residency requirement
SH	Prouty beneficiary receiving government pension
SJ	Alien suspension
SK	Deportation
SL	Beneficiary is in a barred payment country
SP	Prouty beneficiary receiving public assistance
SS	Nonpayment to post secondary students during summer months
SW	Worker's Compensation/public disability benefit offset
S0	Pending determination of continuing disability
S1	Worked outside the United States
S2	Worked inside the United States
S3	Suspended because the primary beneficiary worked in the United States
S4	Failed to have child-in-care
S5	Primary beneficiary worked outside the United States
S6	Development of a better (correct) address for mail or direct deposit, as appropriate
S7	Prisoner suspension, suspension due to extended trial work period (EPE SGA); or suspension for refusing vocational rehabilitation (VR)

<p>Description:</p>	<p>services</p> <p>S8 Payee is being determined</p> <p>S9 Miscellaneous suspension</p> <p>TX Terminated status</p> <p>TA Advance filing claim terminated before maturity</p> <p>TB Mother, father terminated – entitled to disabled widow(er)s benefits</p> <p>TC Disabled widow attained age 62 and is not entitled as an aged widow</p> <p>TJ Advance filed claim terminated after maturity</p> <p>TL Termination of post-secondary student</p> <p>TP Terminated for change of payment identification code (PIC) on post-entitlement actions</p> <p>T&amp; Claim was withdrawn</p> <p>T- Disability benefits terminated because of conversion to retirement benefits upon attainment of age 65</p> <p>T0 Benefits payable by some other agency</p> <p>T1 Death of beneficiary</p> <p>T2 Dependent terminated due to death of primary beneficiary</p> <p>T3 Divorce, marriage, remarriage</p> <p>T4 Attainment of age 18 or 19 and not disabled; mother/father terminated based on last child’s attainment of age 16</p> <p>T5 Entitled to other benefits</p> <p>T6 Child beneficiary is no longer attending school on full-time basis and is between ages 18 and 19, or a disabled child is no longer under a disability. Termination of a mother because of death or marriage of the last remaining child entitled to receive benefits</p> <p>T7 Adoption of child; mother terminated, last entitled child adopted</p> <p>T8 DIB no longer disabled; mother/father terminated, child no longer disabled</p> <p>T9 Terminated for reasons not separately defined</p> <p>U Active uninsured status</p> <p>W Withdrawal before entitlement</p> <p>XX Adjusted/suspended/terminated/uninsured status</p> <p>XD Withdrawal for adjustment</p> <p>XF Entitlement transferred to another program service center or OIO</p> <p>XK Beneficiary deported</p> <p>X+ SMI withdrawn; beneficiary entitled only to SMI</p> <p>X0 Claim transferred to RRB</p> <p>X1 Death of beneficiary</p> <p>X5 Entitled to other benefits</p> <p>X7 Health insurance benefits (HIB)/SMIB terminated</p> <p>X8 Payee being developed</p> <p>X9 Entitlement has been interrupted for reasons not separately defined</p> <p>The Title II recipient’s Ledger Account File Code.</p>
<p>Name:</p>	<p><b>LOCATE CLOSED INDICATOR</b></p>

<p>Type:          Condition:           Length:          Format:          Values:           Description:</p>	<p>Output field          Required for the following output records:</p> <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> <li>• FCR SVES Prison Locate Response Record</li> <li>• FCR SVES Not Found Locate Response Record</li> </ul> <p>1          Alphanumeric          C – This is the last Locate Response for this person for this requestor.          Spaces – This is not the last Locate Response for this person for this requestor.          This code indicates if this Locate response is the last response for this Locate Request.</p>
<p>Name:          Type:          Condition:           Length:          Format:          Values:           Description:</p>	<p><b>LOCATE REQUEST TYPE</b>          Output field          Required for the following output records:</p> <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> <li>• FCR SVES Prison Locate Response Record</li> <li>• FCR SVES Not Found Locate Response Record</li> </ul> <p>2          Alphanumeric          AD – Request for Adoption or Foster Care purposes          CS – Request for IV-D purposes          CV – Request for Custody and Visitation Establishment or Enforcement purposes          LC – Request for Locate Only for Child Support purposes          PK – Request for Parental Kidnapping purposes          This code indicates the purpose for the Locate Request. This code determines the information that can be returned to the submitter from SVES. Refer to <i>FCR IGD</i> Chart 6-14, “Types of Locate Requests” for an explanation of the authorization required for each locate type and the information available.</p>
<p>Name:          Type:          Condition:           Length:          Format:          Values:</p>	<p><b>LOCATE RESPONSE CODE</b>          Output field          Required for the following output records:</p> <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> <li>• FCR SVES Prison Locate Response Record</li> <li>• FCR SVES Not Found Locate Response Record</li> </ul> <p>2          Alphanumeric          06 – FCR Case Type changed to Non IV-D, person deleted from case or case closed by submitter</p>



<p>Description:</p>	<p>09 – The source’s database is off-line or in maintenance status and is not accessible          10 – Locate source does not have the SSN on file          39 – Disclosure prohibited, person associated with family violence          Space – Address returned to State          This code is used to further clarify the SVES response.</p>
<p>Name:          Type:          Condition:            Length:          Format:          Values:            Description:</p>	<p><b>LOCATE SOURCE RESPONSE AGENCY CODE</b>          Output field          Required for the following output records:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> <li>• FCR SVES Prison Locate Response Record</li> <li>• FCR SVES Not Found Locate Response Record</li> </ul>         3          Alphanumeric          E05 – FCR SVES Title II Locate Response Record          E06 – FCR SVES Title XVI Locate Response Record          E07 – FCR SVES Prisoner Locate Response Record          E10 – FCR SVES No Response Locate Response Record          This code identifies the type of SVES Locate Response Record.</p>
<p>Name:          Type:          Condition:            Length:          Format:          Values:          Description:</p>	<p><b>MBC AMOUNT 1 through MBC AMOUNT 8</b>          Output Field          Required for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>         6          Numeric in COBOL format 9999V99          0 through 9          The Title II Recipient’s first through eighth Monthly Benefit Credited (MBC) amounts. The monthly Title II benefit is due after any appropriate dollar rounding but prior to the actual collection of any obligation of the beneficiary. This amount may appear after an individual dies. States must check the LAF CODE and MBC TYPE to determine if payment was issued. If not applicable, this field is spaces.</p>
<p>Name:          Type:          Condition:            Length:          Format:          Values:          Description:</p>	<p><b>MBC DATE 1 through MBC DATE 8</b>          Output Field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>         6          Alphanumeric          A valid date in CCYYMM format, or spaces          The Title II Recipient’s first through eighth Monthly Benefit Credited (MBC) dates. The MBC Amount is paid in the month after this date.</p>

<p>Name:          Type:          Condition:            Length:          Format:          Values:          Description:</p>	<p><b>MBC NUMBER OF ENTRIES</b>          Output Field          Required for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>         1          Numeric          0 through 8          The Title II recipient's number of MBC amount, date, and type fields.</p>
<p>Name:          Type:          Condition:            Length:          Format:          Values:            Description:</p>	<p><b>MBC TYPE 1 through MBC TYPE 8</b>          Output Field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>         1          Alphanumeric          C – Benefits Paid          E – Benefits not paid, due to delayed/pending or suspense          N – Benefits not Paid          Space – Benefits not paid or not applicable          The Title II Recipient's first through eighth Monthly Benefit Credited (MBC) benefit type.</p>
<p>Name:          Type:          Condition:            Length:          Format:          Values:          Description:</p>	<p><b>MEMBER ID</b>          Output field          Conditional for the following output records:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> <li>• FCR SVES Prison Locate Response Record</li> <li>• FCR SVES Not Found Locate Response Record</li> </ul>         15          Alphanumeric          Any alphanumeric characters          The submitter's unique identifier for a person who is a participant in a case that is presently on, or is being added to, the FCR or who is the subject of a Locate Request.</p>
<p>Name:          Type:          Condition:            Length:          Format:</p>	<p><b>MULTIPLE SSN</b>          Conditional for the following output records:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> <li>• FCR SVES Prison Locate Response Record</li> <li>• FCR SVES Not Found Locate Response Record</li> </ul>         9</p>

Values: Description:	Alphanumeric 000000001 through 999999998 (not all sixes) Spaces – The original SSN was used for this Locate Request. The multiple SSN, as provided by the FCR, used for this Locate Request.
Name: Type: Condition:  Length: Format: Values:  Description:	<b>MULTIPLE SSN INDICATOR</b> Conditional for the following output records: <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> <li>• FCR SVES Prison Locate Response Record</li> <li>• FCR SVES Not Found Locate Response Record</li> </ul> 1 Alphanumeric M – Additional/Multiple SSN X – Multiple SSN from a corrected SSN Space – The original SSN was used for this search This code indicates if a multiple SSN was used for this Locate Request. If this field is a 'M' or 'X', the SSN that was used in the match will be in the Multiple SSN field.
Name: Type: Condition:  Length: Format: Values: Description:	<b>NET MONTHLY TITLE II BENEFIT</b> Output field Required for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul> 6 Numeric in COBOL format 9999V99 0 through 9 The Title II recipient's net (of all deductions) monthly benefit.
Name: Type: Condition:  Length: Format: Values: Description:	<b>OTHER NAME</b> Output Field Conditional for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Title XVI Locate Response Record</li> </ul> 6 Alphanumeric A through Z, or spaces The other name that is used by the Title XVI recipient.
Name: Type: Condition:  Length: Format: Values:	<b>PAYEE COUNTY OF JURISDICTION</b> Output field Conditional for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Title XVI Locate Response Record</li> </ul> 3 Alphanumeric A three-character FIPS county code, or spaces

Description:	The Title XVI recipient's county of jurisdiction responsible for payment. The code represents the Title XVI recipient's county of residence unless another county has jurisdiction.
Name:	<b>PAYEE DISTRICT OFFICE CODE</b>
Type:	Output field
Condition:	Required for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Title XVI Locate Response Record</li> </ul>
Length:	3
Format:	Alphaumeric
Values:	Alphanumeric characters
Description:	The code for the SSA District office (DO) that services the Title XVI recipient's claim.
Name:	<b>PAYEE MAILING ADDRESS CITY</b>
Type:	Output field
Condition:	Conditional for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Title XVI Locate Response Record</li> </ul>
Length:	16
Format:	Alphanumeric
Values:	This field will contain the city that is associated with the payee's mailing address. If not applicable, this field will contain spaces.
Description:	The Title II payee's city of residence.
Name:	<b>PAYEE MAILING ADDRESS LINE 1 through PAYEE MAILING ADDRESS LINE 3</b>
Type:	Output field
Condition:	Conditional for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Title XVI Locate Response Record</li> </ul>
Length:	40
Format:	Alphanumeric
Values:	Alphanumeric characters
Description:	This field will contain the payee name and mailing address that appears for the recipient or their representative payee. This field will contain the edited street address that was supplied by SVES. The three edited street address lines are top justified as follows: <ul style="list-style-type: none"> <li>• Payee name and non-standard address lines (if present in the input address) followed by:</li> <li>• The urbanization name for Puerto Rican addresses (if present in the input address and if requiring URB) followed by:</li> <li>• The standardized and scrubbed street address line.</li> </ul> If no address is being returned, these fields will be spaces.
Name:	<b>PAYEE MAILING ADDRESS STATE</b>
Type:	Output field

<p>Condition:</p> <p>Length:</p> <p>Format:</p> <p>Values:</p> <p>Description:</p>	<p>Conditional for the following output record:</p> <ul style="list-style-type: none"> <li>FCR SVES Title XVI Locate Response Record</li> </ul> <p>2</p> <p>Alphanumeric</p> <p>A two-character alphabetic FIPS State Code</p> <p>This field will contain the two-character alphabetic FIPS State code that is associated with the payee's mailing address. If not applicable, this field will contain spaces.</p>
<p>Name:</p> <p>Type:</p> <p>Condition:</p> <p>Length:</p> <p>Format:</p> <p>Values:</p> <p>Description:</p>	<p><b>PAYEE STATE OF JURISDICTION</b></p> <p>Output field</p> <p>Conditional for the following output record:</p> <ul style="list-style-type: none"> <li>FCR SVES Title XVI Locate Response Record</li> </ul> <p>2</p> <p>Alphanumeric</p> <p>A two-character FIPS State code, or spaces</p> <p>The Title XVI recipient's State of jurisdiction responsible for payment. The code represents the Title XVI recipient's State of residence unless another State has jurisdiction.</p>
<p>Name:</p> <p>Type:</p> <p>Condition:</p> <p>Length:</p> <p>Format:</p> <p>Values:</p> <p>Description:</p>	<p><b>PAYEE ZIP CODE</b></p> <p>Output field</p> <p>Required for the following output records:</p> <ul style="list-style-type: none"> <li>FCR SVES Title XVI Locate Response Record</li> </ul> <p>9</p> <p>Alphanumeric</p> <p>Nine numerics, or five numeric characters followed by spaces</p> <p>A five-character numeric Zip Code containing the Title XVI recipient's mailing address Zip Code. If available, the last four positions will be the Zip Plus Four portion. Otherwise, the last four positions will be spaces.</p>
<p>Name:</p> <p>Type:</p> <p>Condition:</p> <p>Length:</p> <p>Format:</p> <p>Values:</p>	<p><b>PAYMENT STATUS CODE</b></p> <p>Output field</p> <p>Conditional for the following output record:</p> <ul style="list-style-type: none"> <li>FCR SVES Title XVI Locate Response Record</li> </ul> <p>3</p> <p>Alphanumeric</p> <p>The following descriptions, 'C' through 'T' apply to the first position of the code:</p> <p>C Indicates the recipient is eligible for SSI/State Supplement payments</p> <p>E Indicates eligibility for Federal and/or State benefits based on the Eligibility computation, but no payment is due based on the Payment computation</p> <p>H Indicates a case in "hold" status, final disposition is pending</p> <p>M Indicates a case is under manual control. Case is known as "forced</p>

	Payment” although payment may not be involved
N	Indicates the applicant is not eligible for SSI/State Supplement payments or that a previously eligible recipient is no longer eligible
S	Indicates recipient may still be eligible for SSI/State Supplement payments, but payment is being withheld
T	Indicates SSI/State Supplement eligibility is terminated
	Second and Third positions are the reason for the status:
C01	Current Pay
E01	Eligible for Federal and/or State benefits based on the eligibility computation, but no payment is due based on the payment computation
E02	First month of eligibility for claims filed on or after 08/22/96. claimant is eligible for a payment in that month but is <i>not</i> due a payment
H10	Living arrangement change is in progress
H20	Marital status change is in progress
H30	Resource change is in progress
H40	Student status change is in progress
H50	Head of household change is in progress
H60	Hold pending receipt of date of death
H70	Hold pending transmission of one-time payment data
H80	Early input
H90	Systems limitation involved. DO must manually compute and input payment amounts
M01	Force Payment – Recipient may be in payment or non-payment status
N01	Non-pay – Countable income exceeds Title XVI Federal benefit rate
N02	Non-pay – Recipient is inmate of public institution
N03	Non-pay – Recipient is outside of the U.S.
N04	Non-pay – Recipient’s non-excludable resources exceed Title XVI limitations
N05	Non-pay – Unable to determine if eligibility exists
N06	Non-pay – Recipient failed to file for other benefits
N07	Non-pay – Cessation of the recipient’s disability
N08	Non-pay – Cessation of the recipient’s blindness
N09	Non-pay – Recipient refused vocational rehabilitation without good cause
N10	Non-pay – Recipient refused treatment for drug addiction
N11	Non-pay – Recipient refused treatment for alcoholism
N12	Non-pay – Recipient voluntarily withdrew from program
N13	Non-pay – Not a citizen or an eligible alien
N14	Non-pay – Aged claim denied for age
N15	Non-pay – Blind claim denied. Applicant not blind
N16	Non-pay – Disability claim denied. Applicant not disabled
N17	Non-pay – Failure to pursue claim by the applicant
N18	Non-pay – Failure to cooperate

N19	Non-pay – Recipient has voluntarily terminated participation in the SI program
N20	Non-pay – Recipient fails to furnish a required report
N22	Non-pay – Inmate of a penal institution
N23	Non-pay – Not a U.S. resident
N24	Non-pay – Convicted of felony of fraudulently misrepresenting residence in two or more States (effective through 11/99). Non-pay – Administrative sanctions penalty imposed because claimant has provided false or misleading statements to obtain benefits (effective 12/99 until present)
N25	Non-pay – Claimant is fleeing to avoid prosecution for, or custody or confinement after conviction for, a crime which is a felony (or in New Jersey a high misdemeanor) under the laws of the place from which he/she flees, or is violating a condition of probation or parole imposed under Federal or State law
N27	Non-pay – Disability terminated due to a substantial gainful activity
N30	Non-pay – Slight impairment – medical consideration alone, no visual impairment
N31	Non-pay – Capacity for substantial gainful activity – customary past work, no visual impairment
N32	Non-pay – Capacity for substantial gainful activity – other work, no visual impairment
N33	Non-pay – Engaging in substantial gainful activity despite impairment, no visual impairment
N34	Non-pay – Before 03/09/91: Impairment no longer severe at time of adjudication and did not last 12 months, no visual impairment effective 03/09/91: Child under age 18, impairment(s) disabling for a period of less than 12 months
N35	Non-pay – Impairment is severe at time of adjudication but not expected to last twelve months, no visual impairment
N36	Non-pay – Insufficient or no medical data furnished
N37	Non-pay – Failure or refusal to submit to consultative examination
N38	Non-pay – Applicant does not want to continue development of the claim
N39	Non-pay – Applicant willfully fails to follow prescribed treatment
N40	Non-pay – Impairment(s) does not meet or equal listing (disabled child under age 18 only), no visual impairment
N41	Non-pay – Slight impairment – medical condition alone, visual impairment
N42	Non-pay – Capacity for substantial gainful activity – customary work, visual impairment
N43	Non-pay – Capacity for substantial gainful activity other work, visual impairment
N44	Non-pay – Before 03/09/91: Engaging in SGA despite impairment, visual impairment Effective 03/09/91: Child under 18, impairment not severe
N45	Non-pay – Impairment no longer severe at time of adjudication and did not last twelve months, visual impairment or denial of child’s claim

N46	Non-pay – Impairment is severe at time of adjudication but not expected to last twelve months, visual impairment
N47	Non-pay – Insufficient, or no, medical evidence furnished, visual impairment
N48	Non-pay – Failure, or refusal, to submit consultative examination, visual impairment
N49	Non-pay – Applicant does not want to continue development of the claim, visual impairment
N50	Non-pay – Applicant willfully fails to follow prescribed treatment, visual impairment
N51	Non-pay – Before 03/09/91: Impairment does not meet or equal listing (disabled child under age 18 only), visual impairment effective 03/09/91: Child under 18. Individual Functional Assessment (IFA) shows impairment(s) not of comparable severity, visual impairment
N52	Non-pay – Deleted from the State rolls before 01/73 payment
N53	Non-pay – Deleted from the State rolls after 01/73 payment
N54	Non-pay – DO unable to locate applicant
N55	Impairment due to DAA (non-visual impairment)
N56	Impairment due to DAA (visual impairment)
S01	Suspended – Suspension of payments due to report of death by Treasury, potential automated death case
S04	Suspended – System is awaiting disability determination (system generated)
S05	Suspended – Substantial gainful activity decision pending
S06	Suspended – Recipient’s address unknown
S07	Suspended – Returned check for other than death, address, payee change, or death of representative payee
S08	Suspended – Representative payee development pending
S09	Suspended – Temporary Institutionalized Suspense (system-generated)
S10	Suspended – Recipient has a bank account and refuses to receive payments via direct deposit
S20	Suspended – Potential rollback case or disability decision made prior to July 1973
S21	Suspended – The recipient is presumptively disabled or blind and has received six months payments (system-generated)
S90	Suspended – PR1 change in process because SSR was established under the incorrect SSN (this condition is extremely rare)
S91	Suspended – PR1 change in process because SSR was established under the incorrect SSN (this condition is extremely rare)
T01	Terminated – Death of the recipient
T20	Terminated – received payment under two different account numbers
T22	Terminated – received payment under two different accounts, Termination resulted from electronic screening
T30	Terminated – Manual termination (payment previously made), change in record composition requires termination of existing record
T31	Terminated – System-generated termination (payment previously



<p>Description:</p>	<p>Made or refund on record)          T50 Terminated – Manual termination (no previous payment made)          T51 Terminated – System-generated termination (no previous payment made)          * Data transmitted in error          This is a three-position alphanumeric display comprised of two elements; the first position of which reflects the status of the Title XVI recipient’s SSI/State Supplement payment, the second (the second and third positions) of which reflects the reason for the status. If not applicable, this field will contain spaces.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>PAYMENT STATUS DATE</b>          Output field          Required for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title XVI Locate Response Record</li> </ul>         6          Alphanumeric          A valid date in CCYYMM format, or spaces          If applicable, the date of the last change to the Title XVI recipient’s Payment Status Code.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>PHIST – NUMBER OF ENTRIES</b>          Output field          Required for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES XVI Locate Response Record</li> </ul>         1          Numeric          0 through 8          The number of occurrences of the Title XVI recipient’s payment history (PHIST). These fields, PHIST – Number Of Entries, PHIST – Payment Date 1 through PHIST – Payment Date 8, and PHIST – Payment Pay Flag 1 through PHIST – Payment Pay Flag 8, comprise the payment history table.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>PHIST – PAYMENT DATE 1 through PHIST – PAYMENT DATE 8</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES XVI Locate Response Record</li> </ul>         8          Alphanumeric          A valid date in CCYYMMDD format, or spaces          If applicable, the first through eighth dates of payment to, or recovery from, the Title XVI recipient.</p>
<p>Name:          Type:          Condition:</p>	<p><b>PHIST – PAYMENT PAY FLAG 1 through PHIST – PAYMENT PAY FLAG 8</b>          Output field          Conditional for the following output record:</p>

<p>Length:          Format:          Values:</p>	<ul style="list-style-type: none"> <li>• FCR SVES XVI Locate Response Record</li> </ul> <p>1          Alphanumeric</p> <p>0 No payment made          1 Recurring payment dated the first of the month          2 Regular daily payment (underpayment)          3 Supplemental payment dated the first of the month          4 One-time payment          5 Advance payment or overpayment recovered (amount recovered shown in check amount column)          6 No receipt indicator for recurring payment (overlays code 1)          7 No receipt indicator for regular daily payment (underpayment) (overlays code 2)          8 No receipt indicator for special supplemental payment (overlays code 3)          9 Replacement check issued as a result of no receipt claim for original check with the same date, and code 6 or 8. For checks issued prior to 11/01/86, both the original check and substitute have been cashed. For checks issued after 11/01/86, both original and substitute checks have been cashed if Pay Flag 3 = spaces or 'U'          A Recurring payment returned by FO and Treasury          B Regular daily payment (underpayment) returned by FO and Treasury          C Special supplemental payment returned by FO and Treasury          D OTP returned by FO and Treasury          J Recurring payment returned by FO only          K Regular daily payment (underpayment) returned by FO only          L Special supplemental payment returned by FO only          M OTP returned by FO only          S Regular daily payment (underpayment) returned by Treasury only          T Special supplemental payment returned by Treasury only          U OTP returned by Treasury only          V Recovery action voided          / Recurring payment returned by Treasury only</p> <p>Description: If applicable, the first through ninth payment codes for the Title XVI recipient.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>PRISON REPORTED DATE OF BIRTH</b></p> <p>Output field</p> <p>Conditional for the following output record:</p> <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul> <p>8          Alphanumeric</p> <p>A valid date in CCYYMMDD format, or spaces</p> <p>The prisoner's date of birth as reported to SVES by the prison.</p>
<p>Name:          Type:</p>	<p><b>PRISON REPORTED FIRST NAME</b></p> <p>Output field</p>

Condition: Length: Format: Values: Description:	Required for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul> 15 Alphanumeric A through Z The first name of the prisoner as reported to SVES by the prison.
Name: Type: Condition: Length: Format: Values: Description:	<b>PRISON REPORTED LAST NAME</b> Output field Required for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul> 20 Alphanumeric A through Z, hyphen The last name of the prisoner as reported to SVES by the prison.
Name: Type: Condition: Length: Format: Values: Description:	<b>PRISON REPORTED MIDDLE NAME OR MIDDLE INITIAL</b> Output field Conditional for the following output records: <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul> 15 Alphabetic A through Z, or spaces The middle initial or name of the prisoner as reported to SVES by the prison.
Name: Type: Condition: Length: Format: Values: Description:	<b>PRISON REPORTED SEX CODE</b> Output field Required for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul> 1 Alphabetic F – Female M – Male U – Unknown The prisoner's gender as reported to SVES by the prison.
Name: Type: Condition: Length: Format: Values: Description:	<b>PRISON REPORTED SUFFIX</b> Output field Conditional for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul> 4 Alphanumeric A through Z, or spaces The suffix name of the prisoner as reported to SVES by the prison.

Name: Type: Condition: Length: Format: Values: Description:	<b>PRISON/FACILITY ADDRESS LINE 1</b> Output field Required for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul> 40 Alphanumeric Valid alphanumeric characters The first line of the address of the prison/facility where the prisoner is confined.
Name: Type: Condition: Length: Format: Values: Description:	<b>PRISON/FACILITY ADDRESS LINE 2 through PRISON/FACILITY ADDRESS LINE 4</b> Output field Conditional for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul> 40 Alphanumeric Valid alphanumeric characters, or spaces If applicable, additional lines of the address of the prison/facility where the prisoner is confined.
Name: Type: Condition: Length: Format: Values: Description:	<b>PRISON/FACILITY CITY</b> Output field Required for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul> 19 Alphanumeric Valid alphabetic characters The city associated with the prison/facility address.
Name: Type: Condition: Length: Format: Values: Description:	<b>PRISON/FACILITY CONTACT NAME</b> Output field Conditional for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul> 35 Alphanumeric Alphanumeric characters, or spaces The name of the contact person for the prison/facility.
Name: Type: Condition: Length: Format: Values:	<b>PRISON/FACILITY FAX NO.</b> Output field Conditional for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul> 10 Alphanumeric 0 through 9, or spaces

Description:	The area code and phone number for the prison/facility FAX machine. If unavailable, this field will contain spaces.
Name:	<b>PRISON/FACILITY NAME</b>
Type:	Output field
Condition:	Required for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul>
Length:	60
Format:	Alphanumeric
Values:	Valid alphanumeric characters
Description:	The name of the prison/facility where the prisoner is confined.
Name:	<b>PRISON/FACILITY PHONE</b>
Type:	Output field
Condition:	Conditional for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul>
Length:	10
Format:	Alphanumeric
Values:	0 through 9, or spaces
Description:	The area code and phone number for the prison/facility.
Name:	<b>PRISON/FACILITY STATE</b>
Type:	Output field
Condition:	Required for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul>
Length:	2
Format:	Alphabetic
Values:	A valid two-character alphabetic FIPS alphabetic code
Description:	The State that is associated with the prison/facility address.
Name:	<b>PRISON/FACILITY TYPE</b>
Type:	Output field
Condition:	Required for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul>
Length:	2
Format:	Alphanumeric
Values:	01 – State Prison 02 – County Prison 03 – Federal Correctional Institute 04 – Mental Correctional Institute 05 – Boot Camp 06 – Medical Correctional Institute 07 – Work Camp 08 – Detention Center 09 – Juvenile Detention Center

<p>Description:</p>	<p>10 – Half-way House          11 – City Prison          The type of prison or facility where the prisoner is confined.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>PRISON/FACILITY ZIP CODE</b>          Output field          Required for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul>         9          Alphanumeric          Numeric, or five numeric characters followed by spaces          A five-character numeric Zip Code. If available, the last four positions will be the Zip Plus Four portion. Otherwise, the last four positions will be spaces.          The Zip Code that is associated with the prison/facility address.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>PRISONER ID NUMBER</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul>         10          Alphanumeric          Alphanumeric characters (including hyphens or periods), or spaces          The prisoner’s ID number as reported to SVES by the prison.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>PRISONER REPORTER NAME</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul>         60          Alphanumeric          A-Z, 0 through 9, or spaces          The name of the source that provided the prisoner information to SSA.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:</p>	<p><b>RACE CODE</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title XVI Locate Response Record</li> </ul>         1          Alphanumeric          A – Asian          B – Black          H – Hispanic          I – North American Indian          N – Negro          O – Other</p>

<p>Description:</p>	<p>U – Not determined          W – White          Space – Not Provided          The Title XVI recipient’s race.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>RAILROAD INDICATOR</b>          Output Field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>         1          Alphanumeric          A – Active claim          T – Terminated claim          S – Currently suspended          Space – No railroad claim          The Title II recipient’s railroad claim indicator.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>RECORD ESTABLISHMENT DATE</b>          Output field          Required for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES XVI Locate Response Record</li> </ul>         8          Alphanumeric          A valid date in CCYYMMDD format          The date that the SSI record was established for this Title XVI recipient.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>RECORD IDENTIFIER</b>          Output field          Required for the following output records:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> <li>• FCR SVES Prison Locate Response Record</li> <li>• FCR SVES Not Found Locate Response Record</li> </ul>         2          Alphanumeric          ‘FK’          The identification code for the type of output record being sent by the FCR.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:</p>	<p><b>RELEASE DATE</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul>         8          Alphanumeric          A valid date in CCYYMMDD format, or spaces</p>

Description:	The date that the prisoner was released, as reported to SVES by the prison. If the prisoner is still confined, this field will contain spaces.
Name:	<b>REPORT DATE</b>
Type:	Output field
Condition:	Required for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul>
Length:	8
Format:	Alphanumeric
Values:	A valid date in CCYYMMDD format
Description:	The date that this prisoner's information was reported to SVES by the prison.
Name:	<b>REPRESENTATIVE PAYEE INDICATOR</b>
Type:	Output field
Condition:	Conditional for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES XVI Locate Response Record</li> </ul>
Length:	1
Format:	Alphanumeric
Values:	Y – There is a representative payee N – There is not a representative payee Space – Not applicable
Description:	A code that indicates the presence or absence of a representative payee for the Title XVI recipient's benefits.
Name:	<b>RESIDENCE ADDRESS CITY</b>
Type:	Output field
Condition:	Conditional for the following output records: <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> </ul>
Length:	16
Format:	Alphanumeric
Values:	The Title II or Title XVI recipient's city of residence
Description:	This field will contain the city that is associated with the Title II or Title XVI recipient's residence address. If not applicable, this field will contain spaces.
Name:	<b>RESIDENCE ADDRESS LINE 1</b> through <b>RESIDENCE ADDRESS LINE 3</b>
Type:	Output field
Condition:	Conditional for the following output records: <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> </ul>
Length:	40
Format:	Alphanumeric
Values:	Alphanumeric characters
Description:	These fields will contain the edited street address supplied by SVES. They are top-justified as follows:



	<p>Recipient's name and non-standard address information (if present in the input address) followed by:          The urbanization name for Puerto Rican addresses (if present in the input address and if requiring URB) followed by:          The standardized and scrubbed street address line.          If no address is being returned, these fields will be spaces.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>RESIDENCE ADDRESS STATE</b>          Output field          Conditional for the following output records:</p> <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> </ul> <p>2          Alphanumeric          A two-character alphabetic FIPS State code, or spaces          The Title II or Title XVI recipient's State of residence. This field will contain the two-character alphabetic FIPS State code that is associated with the Title II recipient's residence address. If not applicable, this field will contain spaces.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>RESIDENCE ZIP CODE</b>          Output field          Conditional for the following output records:</p> <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> </ul> <p>9          Alphanumeric          Numeric, or five numeric characters followed by spaces          The Title II or Title XVI residence Zip Code. If applicable, a five-character numeric Zip Code. If available, the last four positions will be the Zip Plus Four portion. Otherwise, the last four positions will be spaces.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:</p>	<p><b>SMI OPTION CODE</b>          Output field          Conditional for the following output record:</p> <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul> <p>1          Alphanumeric</p> <p>C – No: Cessation          D – No: Denied          F – No: Terminated          G – Yes: Good cause          N – No: No response          P – Railroad          R – No: Refused          S – No: No longer under the renal disease provision</p>

Description:	<p>T – No: Terminated for non-payment          W – No: Withdrawal          Y – Yes          Space – Not applicable          The Title II recipient’s Supplemental Medical Insurance (SMI) code.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>SMI START DATE</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>         6          Alphanumeric          A valid date in CCYYMM format, or spaces          The first month that the Title II recipient became eligible for SMI.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>SMI STOP DATE</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>         6          Alphanumeric          A valid date in CCYYMM format, or spaces          The last month of coverage for the Title II recipient’s SMI benefits.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>SORT STATE CODE</b>          Output field          Required for the following output records:  <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> <li>• FCR SVES Prison Locate Response Record</li> <li>• FCR SVES Not Found Locate Response Record</li> </ul>         2          Alphanumeric          A two-digit numeric FIPS State Code          The two-digit numeric FIPS Code of the State or territory that is receiving data from the FCR. The FCR uses the Sort State Code to sort all of the response records so that each response record is returned to the correct State.</p>
<p>Name:          Type:          Condition:          Length:          Format:</p>	<p><b>SSI MONTHLY ASSISTANCE AMOUNT 1 through SSI MONTHLY ASSISTANCE AMOUNT 8</b>          Output field          Required for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES XVI Locate Response Record</li> </ul>         7          Numeric in COBOL format S9(5)V99</p>

<p>Values:          Description:</p>	<p>Zero or a signed numeric value that can be a positive or negative value          The first through eighth SSI Monthly Assistance Amounts paid to the Title XVI recipient.</p>
<p>Name:          Type:          Condition:            Length:          Format:          Values:          Description:</p>	<p><b>SSN</b>          Output field          Required for the following output records:</p> <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> <li>• FCR SVES Prison Locate Response Record</li> <li>• FCR SVES Not Found Locate Response Record</li> </ul> <p>9          Alphanumeric          000000001 through 999999998 (not all sixes), or spaces          The SSN of the person that was submitted to SVES on a Locate Request. The FCR verifies the SSN by using SSA SSN verification routines. If an SSN is not present on the FCR Input Person/Locate Request Record, the FCR will attempt to identify an SSN for the person by using other information on the input record. If a verified SSN cannot be found for a person, the input record will be rejected and returned to the submitter.</p>
<p>Name:          Type:          Condition:            Length:          Format:          Values:          Description:</p>	<p><b>SSN REPORTED BY PRISON</b>          Output Field          Required for the following output record:</p> <ul style="list-style-type: none"> <li>• FCR SVES Prison Locate Response Record</li> </ul> <p>9          Alphanumeric          000000001 through 999999998 (not all sixes), or spaces          The Prisoner's SSN as reported to SVES by the prison.</p>
<p>Name:          Type:          Condition:            Length:          Format:          Values:          Description:</p>	<p><b>STATE CODE</b>          Output field          Conditional for the following output record:</p> <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul> <p>2          Alphanumeric          A two-character FIPS State code          The Title II recipient's State code for the jurisdiction responsible for payment. The two-character State FIPS Code for the State that is responsible for any mandatory or optional supplementation payment. The code represents the Title II recipient's State of residence unless another State has jurisdiction.</p>
<p>Name:          Type:          Condition:</p>	<p><b>SUBMITTED DATE OF BIRTH</b>          Output field          Required for the following output records:</p>

<p>Length:        Format:        Values:        Description:</p>	<ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> <li>• FCR SVES Not Found Locate Response Record</li> </ul> <p>8        Alphanumeric        A valid date in CCYYMMDD format        The date of birth of the person that was submitted to SVES on a Locate Request.</p>
<p>Name:        Type:        Condition:          Length:        Format:        Values:        Description:</p>	<p><b>SUBMITTED FIRST NAME</b>        Output field        Required for the following output records:</p> <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> <li>• FCR SVES Prison Locate Response Record</li> <li>• FCR SVES Not Found Locate Response Record</li> </ul> <p>12        Alphanumeric        A through Z        The characters of the first name of the person that was submitted to SVES on a Locate Request.</p>
<p>Name:        Type:        Condition:          Length:        Format:        Values:        Description:</p>	<p><b>SUBMITTED LAST NAME</b>        Output field        Required for the following output records:</p> <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> <li>• FCR SVES Prison Locate Response Record</li> <li>• FCR SVES Not Found Locate Response Record</li> </ul> <p>19        Alphanumeric        A through Z, hyphen        The characters of the last name of the person that was submitted to SVES on a Locate Request.</p>
<p>Name:        Type:        Condition:          Length:        Format:        Values:</p>	<p><b>SUBMITTED MIDDLE INITIAL</b>        Output field        Conditional for the following output records:</p> <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> <li>• FCR SVES Prison Locate Response Record</li> <li>• FCR SVES Not Found Locate Response Record</li> </ul> <p>1        Alphanumeric</p>

Description:	A through Z, or spaces The characters of the middle initial of the person that was submitted to SVES on a Locate Request.
Name:	<b>TELEPHONE NUMBER</b>
Type:	Output field
Condition:	Conditional for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Title XVI Locate Response Record</li> </ul>
Length:	10
Format:	Alphanumeric
Values:	0 through 9, or spaces
Description:	This is the Title XVI recipient's telephone number.
Name:	<b>THIRD PARTY INSURANCE INDICATOR</b>
Type:	Output field
Condition:	Conditional for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES XVI Locate Response Record</li> </ul>
Length:	1
Format:	Alphanumeric
Values:	A – Third party liability does exist but applicant refuses to assign rights N – Third party liability does not exist (1634 State only) Q – Medicaid qualifying trust may exist R – Failure to cooperate in providing third party Y – Third party liability does exist (1634 State only) and applicant agrees to assign rights Space – Not applicable
Description:	The indicator of third party liability for the Title XVI recipient's health care expenses. This field is not updated after the initial posting.
Name:	<b>TITLE II DATE OF BIRTH</b>
Type:	Output field
Condition:	Required for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>
Length:	8
Format:	Alphanumeric
Values:	A valid date in CCYYMMDD format
Description:	The Title II recipient's date of birth.
Name:	<b>TITLE II DATE OF DEATH</b>
Type:	Output field
Condition:	Conditional for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>
Length:	8
Format:	Alphanumeric
Values:	A valid date in CCYYMMDD format, or spaces

Description:	The Title II recipient's date of death. The FCR returns '01' in the day portion of the Title II Date of Death field if SSA's records contain '00' in the day portion of the date.
Name:	<b>TITLE II FIRST NAME</b>
Type:	Output field
Condition:	Required for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>
Length:	10
Format:	Alphabetic
Values:	A through Z
Description:	The first name of the Title II recipient.
Name:	<b>TITLE II LAST NAME</b>
Type:	Output field
Condition:	Required for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>
Length:	12
Format:	Alphabetic
Values:	A through Z, hyphen
Description:	The last name of the Title II recipient.
Name:	<b>TITLE II MIDDLE INITIAL</b>
Type:	Output field
Condition:	Conditional for the following output records: <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>
Length:	1
Format:	Alphabetic
Values:	A through Z, or spaces
Description:	The middle initial of the Title II recipient.
Name:	<b>TITLE II SEX CODE</b>
Type:	Output field
Condition:	Required for the following output record: <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> </ul>
Length:	1
Format:	Alphabetic
Values:	F – Female M – Male U – Unknown
Description:	The Title II recipient's gender.
Name:	<b>TITLE XVI APPEAL CODE</b>
Type:	Output field
Condition:	Conditional for the following output record:

<p>Length: 1          Format: Alphanumeric          Values: A – Appeal Council Review          C – Court Case          H – Hearing          O – Class Action          R – Reconsideration          Space – Not applicable</p> <p>Description: A code that indicates the Title XVI recipient’s level of appeal.</p>	<ul style="list-style-type: none"> <li>• FCR SVES XVI Locate Response Record</li> </ul>
<p>Name: <b>TITLE XVI DATE OF BIRTH</b>          Type: Output field          Condition: Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title XVI Locate Response Record</li> </ul>         Length: 8          Format: Alphanumeric          Values: A valid date in CCYYMMDD format, or spaces          Description: The Title XVI recipient’s date of birth.</p>	
<p>Name: <b>TITLE XVI DATE OF DEATH</b>          Type: Output field          Condition: Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES Title XVI Locate Response Record</li> </ul>         Length: 8          Format: Alphanumeric          Values: A valid date in CCYYMMDD format, or spaces          Description: The Title XVI recipient’s date of death. The day of actual death will be shown when available. If the date of death is posted from a returned check, the day will reflect ‘01’ or the date the returned check was processed. If not applicable, this field will contain spaces. The FCR returns ‘01’ in the day portion of the Title XVI Date of Death field if SSA’s records contain ‘00’ in the day portion of the date.</p>	
<p>Name: <b>TITLE XVI DENIAL DATE</b>          Type: Output field          Condition: Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES XVI Locate Response Record</li> </ul>         Length: 8          Format: Alphanumeric          Values: A valid date in CCYYMMDD format, or spaces          Description: The date that the Title XVI applicant was denied SSI benefits or State supplementation.</p>	
<p>Name: <b>TITLE XVI FIRST NAME</b></p>	

Type: Condition: Length: Format: Values: Description:	Output field Required for the following output record: <ul style="list-style-type: none"> <li>FCR SVES Title XVI Locate Response Record</li> </ul> 10 Alphanumeric A through Z The first name of the Title XVI recipient.
Name: Type: Condition: Length: Format: Values: Description:	<b>TITLE XVI LAST NAME</b> Output field Required for the following output record: <ul style="list-style-type: none"> <li>FCR SVES Title XVI Locate Response Record</li> </ul> 19 Alphanumeric A through Z, hyphen The Title XVI recipient's last name.
Name: Type: Condition: Length: Format: Values: Description:	<b>TITLE XVI LAST REDETERMINATION DATE</b> Output field Conditional for the following output record: <ul style="list-style-type: none"> <li>FCR SVES XVI Locate Response Record</li> </ul> 8 Alphanumeric A valid date in CCYYMMDD format, or spaces The date that all of the required redetermination actions for the Title XVI recipient were completed.
Name: Type: Condition: Length: Format: Values: Description:	<b>TITLE XVI MIDDLE INITIAL</b> Output field Conditional for the following output record: <ul style="list-style-type: none"> <li>FCR SVES Title XVI Locate Response Record</li> </ul> 1 Alphabetic A through Z, or spaces The Title XVI recipient's middle initial.
Name: Type: Condition: Length: Format: Values:	<b>TITLE XVI SEX CODE</b> Output field Required for the following output record: <ul style="list-style-type: none"> <li>FCR SVES Title XVI Locate Response Record</li> </ul> 1 Alphabetic F – Female M – Male U – Unknown



Description:	The Title XVI recipient's gender.
Name:	<b>TRANSMITTER/STATE TERRITORY CODE</b>
Type:	Output field
Condition:	Required for the following output records: <ul style="list-style-type: none"> <li>• FCR SVES Title II Locate Response Record</li> <li>• FCR SVES Title XVI Locate Response Record</li> <li>• FCR SVES Prison Locate Response Record</li> <li>• FCR SVES Not Found Locate Response Record</li> </ul>
Length:	2
Format:	Alphanumeric
Values:	A valid two-digit FIPS State Code
Description:	The two-digit numeric FIPS State code of the State or territory that is transmitting the data to the FCR or receiving data from the FCR.
Name:	<b>TYPE OF PAYEE CODE</b>
Type:	Output field
Condition:	Required for the following output records: <ul style="list-style-type: none"> <li>• FCR SVES Title XVI Locate Response Record</li> </ul>
Length:	3
Format:	Alphanumeric
Values:	AGY – Social agency CHD – Natural, adopted or stepchild (as payee for a parent) ESP – Essential person is payee FDM – Federal mental institution FDO – Federal non-mental institution FIN – Financial organization FTH – Natural or adoptive father GPR – Grandparent INP – Legally incompetent, but no representative payee has been selected MTH – Natural or adoptive mother NPM – Nonprofit mental institution NPO – Nonprofit non-mental institution OFF – Public official OTH – Other PRM – Proprietary mental institution PRO – Proprietary non-mental institution PYE – Recipient previously had payee, but is now receiving direct payments REL – Other relative (includes in-laws) RPD – Representative payee is being developed SEL – Beneficiary is own payee SFT – Stepfather SLM – State/local mental institution SLO – State/local non-mental institution SMT – Stepmother

Description:	SPO – Spouse Space – Beneficiary is own payee The code indicating who received the Title XVI benefit.
Name: Type: Condition: Length: Format: Values: Description:	<b>TYPE OF RECIPIENT</b> Output field Required for the following output record: • FCR SVES Title XVI Locate Response Record 2 Alphanumeric AI – Aged Individual AS – Aged Spouse BC – Blind Child BI – Blind Individual DC – Disabled Child DI – Disabled Individual DS – Disabled Spouse EP – Essential Person XS – Ineligible Spouse This code indicates the type of Title XVI recipient.
Name: Type: Condition: Length: Format: Values: Description:	<b>UNEARNED INCOME NUMBER OF ENTRIES</b> Output field Required for the following output record: • FCR SVES XVI Locate Response Record 1 Numeric 0 through 9 This field will contain the number of occurrences of the unearned income fields: Unearned Income Type Code, Unearned Income Verification Code, Unearned Income Start Date, and Unearned Income Stop Date.
Name: Type: Condition: Length: Format: Values: Description:	<b>UNEARNED INCOME START DATE 1 through UNEARNED INCOME START DATE 9</b> Output field Conditional for the following output record: • FCR SVES XVI Locate Response Record 6 Alphanumeric A valid date in CCYYMM format, or spaces If applicable, these fields will contain the first occurrence of the date that the one-time unearned income payment was received by the Title XVI recipient or the date that the unearned income was started if the payment is made monthly.
Name:	<b>UNEARNED INCOME STOP DATE 1 through UNEARNED INCOME</b>

<p>Type:          Condition:          Length:          Format:          Values:          Description:</p>	<p><b>STOP DATE 9</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES XVI Locate Response Record</li> </ul>         6          Alphanumeric          A valid date in CCYYMM format, or spaces          If applicable, this field will contain the termination date of the first occurrence of monthly unearned income. In situations where the unearned income amount changes, this field will contain the last date that the previous rate, or a one-time payment was received.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:</p>	<p><b>UNEARNED INCOME TYPE CODE 1 through UNEARNED INCOME TYPE CODE 9</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES XVI Locate Response Record</li> </ul>         1          Alphanumeric          A Social Security          B Black Lung          C VA compensation (not based on need)          D RRB          E VA (based on need)          F Assistance based on need and not excluded from unearned income          G Retroactive Title II benefits posted as if paid when due, used in Title XVI offset computation          H In-kind support and maintenance          I Ineligible child allocation (not income)          J Value of one-third (1/3) reduction for Living Arrangement code B          K Blind countable income (conversion cases)          L Military retired pay          M Federal Civil Service pension          N Support payments received from absent parent          O Income based on need from private sources          P Employment-related pension (State or local government retirement, private pension)          Q Worker's Compensation          R Rents, interest, dividends, royalties          S Other          T Alaska Longevity bonus          U Concurrent and Title II only attorney's fees allocated over months were Type 'A', 'G' or 'W' unearned income is present          V Manually computed deemed income          W Retroactive Title II benefits posted as if paid when due, used in the Title II Offset computation</p>

Description:	<p>X Minimum income level amount (not income)          Y Special need reduction (applies to a Federal countable minimum income level) (not income)          Z State countable income          Space Not applicable          If applicable, a code that indicates the type of unearned income the Title XVI recipient is or was receiving.</p>
<p>Name:          Type:          Condition:          Length:          Format:          Values:</p>	<p><b>UNEARNED INCOME VERIFICATION CODE 1</b> through <b>UNEARNED INCOME VERIFICATION CODE 9</b>          Output field          Conditional for the following output record:  <ul style="list-style-type: none"> <li>• FCR SVES XVI Locate Response Record</li> </ul>         1          Alphanumeric          0 Number and income have not been verified          1 Number has been verified, amount has not been verified          2 Number and income amount have been verified          3 VA, OPM, RRB overlaid amount was the same as the amount shown for the prior month          4 Same as '3' above, except the overlaid amount was not the same as the amount shown for the prior month          5 For type 'A', same as '3' above except verification code was '2' before the MBR Interface. If type 'X', Federal countable MIL transmitted by FO in conjunction with T30/T50 procedures          6 For type 'A', one-time payment from the MBR in which there was no pre-existing entry on the SSR before the interface. If type 'X', special Federal countable MIL Systems generated Special MIL established by the system which does not consider 'N' frequency code for Title II payments received in the first quarter of 1974. When this code is present, the 01/74 MIL is frozen and the system will not recalculate For 01/74          7 Federal countable MIL – systems generated. This is the standard type 'X' income          8 State countable MIL or income transmitted by FO (applicable to Vermont only)          9 State countable MIL or income (code '8') adjusted by the system (applicable to Vermont only)          I Identification number and amount verified, and that Title II being paid in installments because of DAA provisions          Space Not applicable</p>
Description:	<p>The code that indicates if the Title XVI recipient's income allegations have been verified.</p>
<p>Name:          Type:</p>	<p><b>USER FIELD</b>          Output field</p>

Condition:	Conditional for the following output records: <ul style="list-style-type: none"><li>• FCR SVES Title II Locate Response Record</li><li>• FCR SVES Title XVI Locate Response Record</li><li>• FCR SVES Prison Locate Response Record</li><li>• FCR SVES Not Found Locate Response Record</li></ul>
Length:	15
Format:	Alphanumeric
Values:	A through Z, 0 through 9, or spaces
Description:	Free-format information that was provided by the submitter of an input transaction that will be returned on the four output records listed above. This field can be used to include information that is needed to facilitate routing of information in the submitter's system.