

Customer Account File Format

| Type | Description | Phone | Office |
|---------------------|-------------|-----------|-------------------------|
| CAN_NUMBER | 6 | zero (R) | Customer Account Number |
| CAN_NAME_IMS | 25 | blank (L) | Customer Name IMS |
| ADDRESS1 | 25 | blank (L) | Address Line 1 |
| ADDRESS2 | 25 | blank (L) | Address Line 2 |
| ADDRESS3 | 25 | blank (L) | Address Line 3 |
| ADDRESS4 | 25 | blank (L) | Address Line 4 |
| CITY/STATE/ZIP* | 25 | blank (L) | City State Zip |
| ORG | 36 | blank (L) | Type of Organization |
| UNIT | 24 | blank (L) | Work Unit |
| CAN_ABBREV | 9 | blank (L) | Abbreviation Code |
| DEPARTMENT | 30 | blank (L) | Department Name |
| DATE | 4 | blank (L) | Date MMY |
| CONTACT_NAME | 15 | blank (L) | Contact Last Name |
| CONTACT_PHONE | 13 | blank (L) | Contact Phone Number |
| EFTID | 1 | blank (L) | EFT Customer Identifier |
| IMS | 4 | blank (L) | IMS Code |
| AGENCY ORG CODE | 4 | blank (L) | Agency Code |
| ALTERNATE_NAME | 20 | blank (L) | Customer Alternate Name |
| PAY_METHOD | 32 | blank (L) | Payment Method |
| COST_CENTER | 5 | blank (L) | DGS Cost Center |
| LAST_UPDATED | 11 | blank (L) | Last Update date |
| Total Length | 364 | | |