

State Code	Document Action Code	EIN Text	Employee Last Name	Employee First Name	Employee Middle Name	Employee Name Suffix	Employee SSN	Case Identifier	Order Identifier	Disposition Status Code	Disposition Reason Code	Corrected FEIN	Multi IWO State Code	Termination Date
NY	TRM	911382999	PUBLIC	JOHN			123004567	CS1234587		R	B			
NY	ORG	911382999	TESTING	TEST			999887777	CS5876107						
NY	AMD	911382999	LAST	FIRST	E		111223333	CS4443322						

Final Payment Made Date	Final Payment Made Amount	Document Tracking Number	NCP Address Line 1	NCP Address Line 2	NCP Address City	NCP Ad-dress State	NCP Ad-dress Zip Code	NCP Ad-dress ZIP Ext	New Employer Name	New Employer Address Line 1	New Employer Address Line 2	New Employer Address City	New Employer Address State	New Employer Address ZIP Code	New Employer Address ZIP Ext	NCP Phone Number
	000000000.00	366603														
	000000000.00	360113														
	000000000.00	360908														