

“F” Record Short – Receiver to Fund – Claim Notes
Optional Format - For Informational Purposes Only

No.	Field Name	Req	Type	Size	Pos	Description
1	RECORD TYPE	R	A	1	1	The value of this field must be “F”
2	NAIC NUMBER	R	N	5	2-6	The unique number assigned by the NAIC to the insolvent company for data tracking purposes
3	FILE LOCATION STATE	R	A	2	7-8	State to which the physical file and electronic record are being sent. see state code table, p.13-2
4	FILE LOCATION CODE	R	N	2	9-10	State Fund to which the physical file and electronic record are being sent. see File Location table, p.13-1
5	INSOLVENT CO’S CLAIM NUMBER	R	A	30	11-40	The unique number that the insolvent company assigned to each claim. Shorter values are left justified and padded with blanks. Must always be the Insolvent Company’s Claim Number, regardless of whether or not that number exceeds 20 characters in length. Do Not populate with Receiver Claim No.
6	RECEIVER CLAIM NUMBER	O	A	20	41-60	The unique number that Receivers assign to identify a specific claim against an insolvent company. Shorter values are left justified and padded with blanks
7	CLAIMANT NUMBER	R	N	5	61-65	Claimant No. Default to 00000
8	ENTRY DATE	R	N	8	66-73	Format: YYYYMMDD Date entry was made
9	NOTE ID NUMBER	R	N	4	74-77	For this claimant, for this date, sequence No. for this note See FAQ’s, p.8-2
10	NOTE LINE SEQUENCE NUMBER	R	N	4	78-81	For this note id, sequence No. for this line Example: Line 3 of Note ID No. 96 for claimant #2 0002 is used when line sequence 0001 exceeded 1000 characters
11	ENTRY TEXT	R	A	1000	82-1081	Text
12	LONG CLAIM NUMBER	C	A	30	1082-1111	Insolvent Company Claim No., if longer than 20 characters
13	TPA CLAIM NUMBER	C	A	30	1112-1141	Number assigned by insolvent company’s TPA to this claim