Wage Only Upload (New ICESA)

"A"= Alpha; "N" = Numeric; "A/N" = Alpha and Numeric

FIELD	REQUIRED Yes/No	START POSITION	FIELD LENGTH	FIELD TYPE	DESCRIPTION	JUSTIFY	PADDING
Record Identifier	Yes	1	1	A	Always Value "S"	N/A	N/A
Social Security Number or Individual Tax ID Number (TTN)	Yes	2	9	N	Employee's Social Security Number. If unknown, fill with "999999999"	N/A	N/A
Employee Last Name	Yes	11	20	A/N	The employee's last name as it appears on Social Security Card	Left	Spaces
Employee First Name	Yes	31	12	A/N	The employee's first name as it appears on Social Security Card	Left	Spaces
Employee Middle Initial	No	43	1	A	The employee's middle initial	N/A	Space
State Code	Yes	44	2	N	Submit a constant value of "09"	N/A	N/A
FILLER	No	46	4	N	Blank Spaces	N/A	Spaces
Total Wages	Yes	50	14	N	Total Gross Wages for the employee for the quarter.	Right	Zeros
FILLER	No	64	83	A	Blank Spaces	N/A	Spaces
Employer Account Number	Yes	147	10	N	The employer's ten-digit Employer Account Number (add three trailing zeros to "old" CTDOL Employer Registration Number)	N/A	N/A
FILLER	No	157	58	A	Blank Spaces	N/A	Spaces
Reporting Quarter and Year	Yes	215	6	N	The last month and year for the calendar quarter for which this report applies to (e.g.1st quarter 2022 is "032022")	N/A	N/A
FILLER	No	221	55	A	Blank Spaces	N/A	Spaces

The file must be a 275-character fixed length text file—it must have a .txt extension.

All numbers, including dollar amounts, may not contain decimals, commas, or dollar signs.

  o Example: $12,345.67 must appear as 1234567 and proper fill before or after