Scanband Version of Form 72-325-01-5 Supplemental Prime Contractor Tax Schedule

This form is not to be used by your taxpayer until the July 2001 tax period that is due by August 20, 2001. The use of the attached form prior to August 2001, will result in such form being sent back to the taxpayer without processing. A penalty may be assessed to you or the taxpayer.



M10

M1

MS Mississippi Supplemental Prime Contractor Tax Schedule

C8

AC

Form 72-325-01-5-2-000 (Rev. 5/01)

C18

Page 2

Т9

IMPORTANT: Photocopies or hand completions of this form are **NOT** acceptable.

M2	M11		PM	C9	TC		T10	
M3	M12	P	Ō	C10	T1		T11	
M4	M13	C1		C11	T2		T12	
M5	M14	C2		C12	T3		T13	
M6	M15	C3		C13	T4		T14	
					→ 			
M7	M16	C4		C14	T5		T15	
M8	M17	C5		C15	T6		T16	
M9	M18	C6		C16			T17	
l		C7		C17	T8		T18	
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rtouria to tric	e ficalest whole dollar (ii	io peririles).					F 70.040	
				Include subtota	is from th	nis form on Sale	es Form /2-010	<u>, Page</u>
None					_		Month	Year
Name				Filing Perio	od	MONTHLY	·	
Address					QUARTE	ERLY OR First Mo	onth Last Month	Year
					ANNUAL	-	thru	
City		State Zip					·	
Accou	ınt Number			You MUS I Only stand	use the t	iling period assign periods may be us	ned by the Tax Com sed. The periods a	nmission. re:
	L			Quarte	rly: 01 to	03, 04 to 06, 07 to (09, or 10 to 12	
				Annua	l: 01 to 12			
		1.4/00/ T O1-	00 F	- O	1(4 :	4.10.07		
		1/2% - Tax Code	60 - Fo		le at 1			
	Column 1			Column 2		(Column 3	
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Mar	Column 1		Comp	Column 2	d this	Amount of		Тах
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1. 2. 3. 4. 5. 6. 7. 8.	Column 1		Comp	Column 2 ensation Received	d this	Amount of	Contractor's	Tax
1. 2. 3. 4. 5. 6. 7. 8. 9.	Column 1		Comp	Column 2 ensation Received	d this	Amount of	Contractor's	Tax
1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11.	Column 1		Comp	Column 2 ensation Received	d this	Amount of	Contractor's	Tax
1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12.	Column 1		Comp	Column 2 ensation Received	d this	Amount of	Contractor's	Tax
1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	Column 1		Comp	Column 2 ensation Received	d this	Amount of	Contractor's	Tax
1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14.	Column 1		Comp	Column 2 ensation Received	d this	Amount of	Contractor's	Tax
1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15.	Column 1		Comp	Column 2 ensation Received	d this	Amount of	Contractor's	Tax
1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16.	Column 1		Comp	Column 2 ensation Received	d this	Amount of	Contractor's	Tax
1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17.	Column 1		Comp	Column 2 ensation Received	d this	Amount of	Contractor's	Tax
1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18.	Column 1	ificate Number	Comp	Column 2 ensation Received	d this	Amount of	Contractor's	Tax

IMPORTANT: Include subtotals (line 19) from ALL supplemental pages with total tax for Tax Code 60 on Sales Tax Form 72-010, Page 1, Line 12. Attach all supplemental pages to Sales Tax return.

Supplemental	Page	of	
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MS **Mississippi Supplemental Prime Contractor**

Tax Schedule

| Form 72-325-01-5-2-000 (kev. 5/01) | Form 72-325-01-5-000 (kev. 5/01)

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[3/9 to 17/9
8	3/10 to 17/10
8	3/11 to 17/11
8	3/12 to 17/12
8	3/13 to 17/13
8	3/14 to 17/14
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8	3/16 to 17/16
8	3/17 to 17/17

For Computer Use Only Do Not Write Above This Line

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33/16 to 42/16
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45/9 to 54/9
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45/11 to 54/11
45/12 to 54/12
45/13 to 54/13
45/14 to 54/14
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45/16 to 54/16
45/17 to 54/17
45/18 to 54/18

57/9 to 66/9
57/10 to 66/10
57/11 to 66/11
57/12 to 66/12
57/13 to 66/13
57/14 to 66/14
57/15 to 66/15
57/16 to 66/16
57/17 to 66/17
57/18 to 66/18

69/9 to 78/9
69/10 to 78/10
69/11 to 78/11
69/12 to 78/12
69/13 to 78/13
69/14 to 78/14
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69/18 to 78/18
69/19 to 78/19

The beginning and ending positions of each data box above are referenced in the box.



Mississippi MS **Supplemental Prime Contractor** Tax Schedule

Form 72-325-01-5-2-000 (Rev. 5/01)

Page 2

IMPORTANT: Photocopies or hand completions of this form are NOT acceptable.

JB12345625	0	025123458	0	0	0
BB23456735	0	0701	0	3000000	0
0	0	0	0	15000	0
0	0	1000000	0	30000	0
0	0	2000000	0	0	0
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For Computer Use Only Do Not Write Above This Line					45000

Schedule for Tax Code 61 - Contracts Taxable at 3 1/2% is on This form must be typed or printed. Round to the nearest whole dollar (no pennies). Include subtotals from this form on Sales Form 72-010, Page John W. Johnnyboy Month Year Filing Period 07 01 MONTHLY 1234 Pine Dog Rd. South Address First Month Last Month Year QUARTERLY OR

Houndstooth, MS 39876 State Zip **Account Number** 025-12345-8

ANNUAL

You MUST use the filing period assigned by the Tax Commission. Only standard filing periods may be used. The periods are:
Quarterly: 01 to 03, 04 to 06, 07 to 09, or 10 to 12
Annual: 01 to 12

thru

1 1/2% - Tax Co	de 60 - For Contracts Taxable at 1	1/2 %
Column 1	Column 2	Column 3
Material Purchase Certificate Number	Compensation Received this	Amount of Contractor's Tax
	Month or Contract Amount	Due this Month
1. JB-123456-	25 1,000,000	15,000
2. BB-234567-	35 2,000,000	30,000
3.		
4.		
5.		
6.		
7.		
8.		
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15.		
16.		
17.		
18.		
19. Total - Enter totals for Lines 1 through 18.	3,000,000	45,000

IMPORTANT: Include subtotals (line 19) from ALL supplemental pages with total tax for Tax Code 60 on Sales Tax Form 72-010, Page 1, Line 12. Attach all supplemental pages to Sales Tax return.



19. Total - Enter totals for Lines 1 through 18.

Mississippi MS **Supplemental Prime Contractor**

Tax Schedule

| Form 72-325-01-5-1-000 (Rev. Sco.) | Form 72-325-01-5-01-5-000 (Rev. Sco.) | Form 72-325-01-5-000 (Rev. Sco.) | Form

l	M1	M10	AC		C8		18	T9	
	M2	M11	٠.٠	РМ	C9	TC		T10	
ŀ	M3	M12	┦ ╔	20	C10	T1		T11	
ŀ	M4	M13	C1		C11	T2		T12	
ŀ	M5	M14	C2		C12	T3		T13	
ŀ	M6	M15	C3		C13	T4		T14	
ŀ	M7	M16	C4		C14	T5		T15	
ŀ	M8	M17	C5		C15	T6		T16	
l	M9	M18	C6		C16	T7		T17	
l	WIO	WITO			C17	T8		T18	
This	or Computer Use Only on Not Write Above This Lin s form must be typed ne official form are no	d or printed. Copie		ons	Schedule for T	Гах Code	60 - Contracts	TT s Taxable at	1 1/2% is or
Rou	und to the nearest whe this form to enter a	nole dollar (no pen	nnies). <u>r Tax Codes 60</u>		Include subtot	als from t	his form on Sa	ales Form 72	-010, Page
	Name							Mo	onth Year
	Name				Filing Per	lod	MONTH	LY _	
	Address						Firet	Month Loot N	lanth Vaar
						QUART ANNUA		Month Last M	lonth Year
		01-1-	Zip				L		
	City	State	Zip		You MU	ST use the	iling period assi	nned by the Tay	Commission
	City Account Number		· · ·]	Quar Annı	rterly: 01 to ual: 01 to 12		gned by the Tax used. The perion 0 09, or 10 to 12	Commission.
[•	3 1/2%	· · ·	61 - For	Quar Annu Contracts Taxa	rterly: 01 to ual: 01 to 12	03, 04 to 06, 07 to	o 09, or 10 to 12	Commission.
[Account Number	3 1/2% Column 4	∕₀ - Tax Code		Quar Annu Contracts Taxa Column 5	rterly: 01 to ual: 01 to 12 lble at 3	1/2 %	o 09 , or 10 to 12 Column 6	
	Account Number	3 1/2%	∕₀ - Tax Code	Compe	Quar Annu Contracts Taxa	rterly: 01 to ual: 01 to 12 uble at 3 ed this	1/2 % Amount o	o 09, or 10 to 12	or's Tax
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2. 3. 4. 5.	Account Number	3 1/2% Column 4	∕₀ - Tax Code	Compe	Contracts Taxa Column 5 ensation Receive	rterly: 01 to ual: 01 to 12 uble at 3 ed this	1/2 % Amount o	Column 6	or's Tax
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 2. 3. 4. 5. 6. 7. 8. 9. 	Account Number	3 1/2% Column 4	∕₀ - Tax Code	Compe	Contracts Taxa Column 5 ensation Receive	rterly: 01 to ual: 01 to 12 uble at 3 ed this	1/2 % Amount o	Column 6	or's Tax
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2. 3. 4. 5. 6. 7. 8. 9. 10.	Account Number	3 1/2% Column 4	∕₀ - Tax Code	Compe	Contracts Taxa Column 5 ensation Receive	rterly: 01 to ual: 01 to 12 uble at 3 ed this	1/2 % Amount o	Column 6	or's Tax
2. 3. 4. 5. 6. 7. 8. 9. 10.	Account Number	3 1/2% Column 4	∕₀ - Tax Code	Compe	Contracts Taxa Column 5 ensation Receive	rterly: 01 to ual: 01 to 12 uble at 3 ed this	1/2 % Amount o	Column 6	or's Tax
2. 3. 4. 5. 6. 7. 8. 9. 10.	Account Number	3 1/2% Column 4	∕₀ - Tax Code	Compe	Contracts Taxa Column 5 ensation Receive	rterly: 01 to ual: 01 to 12 uble at 3 ed this	1/2 % Amount o	Column 6	or's Tax
2. 3. 4. 5. 6. 7. 8. 9. 10.	Account Number	3 1/2% Column 4	∕₀ - Tax Code	Compe	Contracts Taxa Column 5 ensation Receive	rterly: 01 to ual: 01 to 12 uble at 3 ed this	1/2 % Amount o	Column 6	or's Tax
 3. 4. 6. 7. 8. 10. 	Account Number	3 1/2% Column 4	∕₀ - Tax Code	Compe	Contracts Taxa Column 5 ensation Receive	rterly: 01 to ual: 01 to 12 uble at 3 ed this	1/2 % Amount o	Column 6	or's Tax

IMPORTANT: Include subtotals (line 19) from ALL supplemental pages with total tax for Tax Code 61 on Sales Tax Form 72-010, Page 1, Line 12. Attach all supplemental pages to Sales Tax return.

Supplemental Page	of
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MS **Mississippi Supplemental Prime Contractor**

Tax Schedule

| Form 72-325-01-5-1-000 (Kev. 5/01) | Form 72-325-01-5-1-000 (Kev. 5/0

8/9 to 17/9	
8/10 to 17/10	
8/11 to 17/11	
8/12 to 17/12	
8/13 to 17/13	
8/14 to 17/14	
8/15 to 17/15	
8/16 to 17/16	
8/17 to 17/17	

For Computer Use Only Do Not Write Above This Line

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20/16 to 29/16	
20/17 to 29/17	

33/9 t	o 42/9
	39/10to42/10
37/11	to 42/11
33/12	to 42/12
33/13	to 42/13
33/14	to 42/14
33/15	to 42/15
33/16	to 42/16
33/17	to 42/17
33/18	to 42/18

45/9 to 54/9
45/10 to 54/10
45/11 to 54/11
45/12 to 54/12
45/13 to 54/13
45/14 to 54/14
45/15 to 54/15
45/16 to 54/16
45/17 to 54/17
45/18 to 54/18

57/9 to 66/9	
57/10 to 66/10	
57/11 to 66/11	
57/12 to 66/12	
57/13 to 66/13	
57/14 to 66/14	
57/15 to 66/15	
57/16 to 66/16	
57/17 to 66/17	
57/18 to 66/18	

69/9 to 78/9	
69/10 to 78/10	
69/11 to 78/11	
69/12 to 78/12	
69/13 to 78/13	
69/14 to 78/14	
69/15 to 78/15	
69/16 to 78/16	
69/17 to 78/17	
69/18 to 78/18	
69/19 to 78/19	

The beginning and ending positions of each data box above are referenced in the box.



MS Mississippi Supplemental Prime Contractor Tax Schedule

Form 72-325-01-5-1-000 (Rev. 5/01)

Page 1

IMPORTANT: Photocopies or hand completions of this form are **NOT** acceptable.

JB12345625	0	025123458	0	0	0
BB23456735	0	0701	0	3000000	0
0	0	0	0	15000	0
0	0	1000000	0	30000	0
0	0	2000000	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0
0	0	0	0	0	0
		0	0	0	0
For Computer Use Only Do Not Write Above This Line					105000

This form must be typed or printed. Copies or reproductions of the official form are not acceptable.

Round to the nearest whole dollar (no pennies).

Use this form to enter additional entries for Tax Codes 60

John W. Johnnyboy

Name

Filing Period

MONTHLY

Filing Period

MONTHLY

O7

O1

Address
Houndstooth, MS 39876
City State Zip
Account Number 025-12345-8

You MUST use the filing period assigned by the Tax Commission. Only standard filing periods may be used. The periods are:

Quarterly: 01 to 03, 04 to 06, 07 to 09, or 10 to 12

Annual: 01 to 12

QUARTERLY **OR** ANNUAL First Month

thru

Last Month

Year

	3 1/2% - Tax Code 61 - For Contracts Taxable at 3 1/2 %		
	Column 4	Column 5	Column 6
	Material Purchase Certificate Number	Compensation Received this	Amount of Contractor's Tax
		Month or Contract Amount	Due this Month
1.	JB-123456-25	1,000,000	35,000
2.	BB-234567-35	2,000,000	70,000
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.	Total - Enter totals for Lines 1 through 18.	3,000,000	105,000

IMPORTANT: Include subtotals (line 19) from ALL supplemental pages with total tax for Tax Code 61 on Sales Tax Form 72-010, Page 1, Line 12.

Attach all supplemental pages to Sales Tax return.

Supplemental F	age	of	
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Key to Data Fields for the Mississippi Supplemental Prime Contractor Schedule Form 72-325-01-5

Key to the data fields for the sales tax long form scanband version for 2001/2002, Form Number 72-325-01-5. This form is a supplement to the 72-010-01-5 and should be used as needed. All grid locations are presented as: x/y the beginning location to x/y as the ending location on the 10/6 grid.

Page 1

The top left corner of the barcode is located at position 6/4 to 20/4.

The top right registration mark is located at the top right corner at grid 80/4.

The lower left corner of the scanband must be located on the left and bottom edge of grid 6/20.

"MS" to the left of the header must begin at grid 27/4 and end at grid 28/4 and is in a Courier 12pt.

Page 2

The top left corner of the barcode is located at position 6/4 to 20/4.

The top right registration mark is located at the top right corner at grid 80/4.

The lower left corner of the scanband must be located on the left and bottom edge of grid 6/20.

"MS" to the left of the header must begin at grid 27/4 and end at grid 28/4 and is in a Courier 12pt.

If a draft version of this form is released in your software, the print function must be disabled. If a draft version is filed, it will be returned to the taxpayer and a penalty may apply to you or your customer.

Provider forms are only accepted after approval. It is not acceptable for a taxpayer to print out a blank copy of the form and hand complete it. A hand completed version of a provider form will be sent back to the taxpayer and a penalty may apply to you or your customer. All forms must be original laser printed forms. **Photocopies are NOT acceptable**.

The following is the labeling and the description of the items to be included in the Scanband of this form. The beginning and ending data positions are included in one of the templates for this form. The field length is included in this key for each data position. Grid positioning given is from the first grid space and through the last grid space included in a data field. (Example 27/10 to 36/10 is 10 grid spaces). You should use this information to position the data on the returns. Do not use a grid overlay to determine the positions from a printed paper form. The field length specified assumes using a **Courier 12pt. font or OCR-A 12pt. font**, which are the required fonts. All data fields in the scanband should be right justified. All fields in the scanband must be filled. If the field is blank a "0" should be used for numeric field; and "N" for all alpha and alpha/numeric fields.

The money field in the scanband should **not** contain any commas, cents, decimals or other formatting information except for the negative signs (-) as a leading indicator for any negative amount. The amounts in the body of the return **should** contain commas. Pennies should always be rounded to whole dollars. No pennies or decimals should be anywhere on the return. Example -123,456 in the body of the form would appear a -123456 in the scanband.

Front (Page 1) of the form:

C1 - C18

Field Name	Description
AC	Account Number - The account number field should be 9 digits long and contain leading zeros. Example 001-23456-7 in the body of the form would appear as 001234567 in the scanband. Data position is 33/9 to 42/9. This number will be the same as appears on the 72-010-01-5.
PM	Period Monthly - Period of return if taxpayer is a monthly filer. Example - July of 2001 should appear as 07 01 in the body of the form but as 0701 in the scanband. This field is 4 characters long. Data position is 39/10 to 42/10. If other than monthly filer, should enter "0" zero in the scanband and leave a blank in the body.
PO	Period Other - Period of return if taxpayer is filing quarterly or annual. Example - The third quarter of 2001 sales tax year should appear as 07 09 01 in the body of the form but as 070901 in the scanband. Allowable periods are: Quarterly- July thru Sept. 2001, Oct. thru Dec. 2001, Jan. thru Mar., 2002 and Apr. thru June, 2002. Annual- Jan. thru Dec., 2001. If none of these periods apply, enter a "0" zero in the scanband and leave a blank in the body. This field is 6 characters long. Data position is 37/11 to 42/11.
M1 - M18	Material Purchase Cerfificate Numbers - This is an alpha-numeric field. This number has 2 alpha characters and 8 numeric characters which makes the field 10 character long. Data position are found on the data position page of this package for pages one (1) and two (2).

Compensation Received this Month or Contract Amount - This is a numeric amount field. This field is 10 characters

long. Data position are found on the data position page of the package for pages one (1) and two (2).

T1 -T18	Amount of Contractor's Tax Due this Month - This is a numeric amount field. This field is 10 characters long. Data
	position are found on the data position page of this package for pages one (1) and two (2).

- TC Total Compensation This is the total of c1 to c18 and is a amount field. This field is 10 characters long. Data position is 56/10 to 66/10 on pages one (1) and two (2).
- Total Tax due This Month This is the total of t1 to t18 and is a amount field. This field is 10 characters long. Data position is 69/19 to 77/19 on pages one (1) and two (2).