

ASCII A8 – Census

Ascensus Field Descriptions	Field Requirements	Field Position	Column Length	Type	Translation	Notes
Payroll Number	Required	1-6	6	Number	000001	
Employer ID (BIN)	Required	7-17	11	String	#####	Provide an 8 digit numeric. No dashes. No justification is required.
Payroll Pay Date	Optional	18-25	8	Date	MMDDCCYY (01221999)	
Social Security Number	Required	26-34	9	SSN	XXXXXXXXX	No dashes
Last Name, First Name	Required	35-66	32	Name	SMITH, DAVID	Alphanumeric and the following special characters - ' .
Address Line 1	Required	67-96	30	String	123 MAIN STREET	Alphanumeric and any of the following characters # & () - , ; / :
Address Line 2	Optional	97-126	30	String	P O BOX 123	Alphanumeric and any of the following characters # & () - , ; / :
City, State	Required	127-146	20	Address	BRAINERD, MN	Alphanumeric and the following special characters - ' .
Zip	Required	147-155	9	Address	123450123	5 or 9 digit. No dashes
Date of Birth	Required	156-163	8	Date	MMDDCCYY (01011960)	No slashes Include leading zeros
Date of Hire	Optional	164-171	8	Date	MMDDCCYY (01011990)	No slashes Include leading zeros
Date of Termination	Optional	172-179	8	Date	MMDDCCYY (01011999)	No slashes Include leading zeros
Gross Wages Pay Period	Optional	180-190	11	Number	00000012412 (ie. \$124.12)	
Traditional deferral amount	N/A	191-201	11	Number	00000012412 (ie. \$124.12)	
Loan Repayment	N/A	202-212	11	Number	00000000000	
ER Match	N/A	213-223	11	Number	00000000000	
Profit Sharing	N/A	224-234	11	Number	00000000000	

Ascensus Field Descriptions	Field Requirements	Field Position	Column Length	Type	Translation	Notes
Roth deferral amount	Optional	235-245	11	Number	00000012412 (ie. \$124.12) Will be used for both Roth and Traditional. Once	
Current Pay Period Hours	N/A	246-249	4	Number	0080 (whole #'s only)	
Division Code	N/A	250-254	5	String	Filler must be spaces	

ASCII A8 Contribution

Ascensus Field Descriptions	Field Requirements	Field Position	Column Length	Type	Translation	Notes
Payroll Number	Required	1-6	6	Number	000001	Include leading zeros
Employer ID (BIN)	Required	7-17	11	String	#####	No dashes
Payroll End Date	Required	18-25	8	Date	MMDDCCYY (01221999)	No slashes Include leading zeros
Social Security Number	Required	26-34	9	SSN	XXXXXXXXX	No dashes Needs to be added to payroll prior to submitting a contribution
Last Name, First Name	Optional	35-66	32	Name	SMITH, DAVID	
Address Line 1	Optional	67-96	30	String	123 MAIN STREET	
Address Line 2	Optional	97-126	30	String	P O BOX 123	
City, State	Optional	127-146	20	Address	BRAINERD, MN	
Zip	Optional	147-155	9	Address	123450123	
Date of Birth	Optional	156-163	8	Date	MMDDCCYY (01011960)	
Date of Hire	Optional	164-171	8	Date	MMDDCCYY (01011990)	
Date of Termination	Optional	172-179	8	Date	MMDDCCYY (01011999)	
Gross Wages Pay Period	Optional	180-190	11	Number	00000012412 (ie. \$124.12)	
Traditional deferral amount	N/A	191-201	11	Number	00000012412 (ie. \$124.12)	
Loan Repayment	N/A	202-212	11	Number	00000000000	
ER Match	N/A	213-223	11	Number	00000000000	
Profit Sharing	N/A	224-234	11	Number	00000000000	
Roth deferral amount	Required	235-245	11	Number	00000012412 (ie. \$124.12) Will be used for both Roth and Traditional. Once Traditional is available	No decimal No commas
Current Pay Period Hours	Optional	246-249	4	Number	0080 (whole #'s only)	
Division Code	N/A	250-254	5	String	Filler must be spaces	

