Sheet1
NAME,C,35 ADDRESS,C,35 CITY,C,20 STATE,C,2 ZIP,C,10 CONTACT,C,25 CUST_NO,C,17

Sheet1
ACCT_NO,C,18 HOME_PHONE,C,12 WORK_PHONE,C,12 EXTENSION,N,4,0 STORE_TYPE,C,25

Sheet1
FAX,C,12 TAX1_RATE,N,5,2 TAX2_RATE,N,5,2 QUALITY,N,4,2 DELIVERY,N,4,2 PRICE,N,4,2

Sheet1
FOB_TERMS,N,1,0 TERM_DSCNT,N,2,0 TERM_DAYS,N,3,0 NET,C,3 DEBITS,N,13,2

OVERDUE,N,11,2 FIRST_SALE,D LAST_SALE,D NO_SALES,N,9,0 OUTSTANDIN,N,7,0

MIN_ORDER,N,8,2 NOTES,M

