LNAME,C,15   FNAME,C,12   ADDRESS,C,25   CITY,C,15   STATE,C,2   ZIP,C,5   PLUS4,C,4

AREACODE,N,3,0   PHONE,C,9   MBRNR,N,3,0   MOMNAME,C,25   DADNAME,C,25   BIRTHDATE,D

BEGDATE,D   IDNR,C,10   HEALTH,C,100