

Sheet1

SHIPCOMP,C,25 SHIPLAST,C,15 SHIPFIRST,C,12 SHIPADD1,C,30 SHIPCITY,C,20 SHIPSTATE,C,2

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SHIPZIP,C,10 SHIPPING,N,6,2 SHIPVIA,C,15 TAXABLE,L ACCTNO,C,12 INVOICE\_NO,N,6,0

Sheet1

TERMS,C,15 PAID\_BY,C,10 SOLD\_BY,C,10 CARD\_NO,C,15 ACCTNAME,C,25 LASTNAME,C,15

Sheet1

FIRSTNAME,C,12 CITY,C,20 STATE,C,2 ZIP,C,10 PHONE,C,14 ADDRESS1,C,30 TAX,N,7,2