

Sheet1

FIRST\_NAME,C,15 LAST\_NAME,C,15 COMPANY,C,30 TITLE,C,30 ADDRESS,C,30 CITY,C,15

Sheet1

STATE,C,2 ZIP\_CODE,C,10 HOME\_PHONE,C,13 NOTES,M WORK\_PHONE,C,13 PHONE\_EXT,C,5

FAX,C,13 BIRTH\_DATE,D ANNI\_DATE,D