

**Corporate Personnel System (CPS) PPP711
As of Release 2082 – 07/13/2013**

Dependent Record Layout

| Position | Length/ Format | Field Description | Data Element # | Comments |
|-----------------|---------------------------|--|---------------------------|-----------------|
| 1 – 2 | 2 | Location | | |
| 3 – 11 | 9 | Employee ID | | |
| 12 – 20 | 9 | Employee SSN | EDB0111 | |
| 21 – 22 | 2 | Dependent Number | EDB0632 | |
| 23 – 48 | 26 | Dependent Name | EDB0633 | |
| 49 – 54 | 6 yymmdd | Dependent Birth Date | EDB0634 | |
| 55 | 1 | Dependent Sex Code | EDB0637 | |
| 56 – 64 | 9 | Dependent SSN | EDB0636 | |
| 65 | 1 | Dependent Relationship to Employee | EDB0635 | |
| 66 | 1 | Dependent De-enrollment Control Code | EDB0638 | |
| 67 – 72 | 6 yymmdd | Medical Coverage Effective Date - Dependent | EDB0639 | |
| 73 – 78 | 6 yymmdd | Dental Coverage Effective Date - Dependent | EDB0640 | |
| 79 – 84 | 6 yymmdd | Vision Coverage Effective Date - Dependent | EDB0641 | |
| 85 – 90 | 6 yymmdd | Legal Coverage Effective Date - Dependent | EDB0642 | |
| 91 | 1 | Dependent Select flag | | 'C' or blank |
| 92 - 97 | 6 yymmdd | Dental Coverage End Date | EDB0656 | |
| 98 - 103 | 6 yymmdd | Vision Coverage End Date | EDB0657 | |
| 104-109 | 6 yymmdd | Medical Coverage End Date | EDB0659 | |
| 110-150 | 41 | Filler | | |

Note: Dependent data is not included on this file if the employee is not currently enrolled. Dependent data is not passed if the dependent's coverage has ended or if the dependent coverage effective date is in the future month.