

Vesting Takeover

Field Name	Maximum Field Length	Format and Field List Information	Other Notes
Group Account ID Number (GA_ID)	10	999999-01	
Division Number	3	999	If applicable
Employee SSN	11	999999999 or 999-99-9999	
First Name	20		
Middle Initial	1		
Last Name	30		
Hire Date	10	MM/DD/YYYY	
Birth Date	10	MM/DD/YYYY	
Effective Date	10	MM/DD/YYYY	This should be the last day of the last plan year.
Years of Service	2		

**Important Notes**

- \*The file needs to be in an ASCII (text) format.
- \*The file name and format need to remain constant.
- \*For assistance please call the 401(k) Technical Helpline at (800) 866-5544.