

ATTACHMENT II

COMMONWEALTH OF PUERTO RICO TREASURY DEPARTMENT

Detail of the fields on each type of record of the excise tax declaration file

Field Name	Format	Bytes	Comments or Values	Position
<i>Record Type 0</i>				
Sequence Number	N	3	Value "000"	1-3
Record Type	A	1	Must be 0 (zero).	4-4
Broker Social Security or Employer Identification Number	N	9	Fill with zeros to the left.	5-13
Lot Number	N	8	Fill with zeros to the left.	14-21
Lot Declarations Number	N	4	Quantity of Declarations. Fill with zeros to the left.	22-25
Lot Tax Amount	N	8.2	Excise Tax Total Amount. Fill with zeros to the left.	26-35
Lot Date	A	8	YYYYMMDD	36-43
Filler	A	37	Spaces.	44-146
<i>Record Type 1</i>				
Sequence or declaration number assigned by the broker	N	3	Up to 999 declarations by lot	1-3
Record Type	A	1	Must be 1 (one).	4-4
Consignee Social Security or Employer Identification Number	N	9	Fill with zeros to the left.	5-13
Consignee Name	A	30	Fill with zeros to the right.	14-43
Declaration Excise Tax Amount	N	8.2	Fill with zeros to the left.	44-53
Forwarder (Carrier) Code	A	8	Carrier code assigned by Treasury Dept.	54-61
Introduction Date	A	8	YYYYMMDD	62-69
Filler	A	11	Spaces.	70-80
<i>Record Type 2</i>				
Sequence or pre-declaration number assigned by the broker	N	3		1-3

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Field Name	Format	Bytes	Comments or Values	Position
Record Type	A	1	Must be 2 (two).	4-4
Bill of Lading	A	16	Fill with blanks to the right.	5-20
Container Number	A	18	Only for maritime carrier. Fill with spaces to the right.	21-38
"Filler"	A	42	Spaces.	39-80
<i>Record Type 3</i>				
Sequence or pre-declaration number assigned by the broker	N	3		1-3
Record Type	A	1	Must be 3 (three).	4-4
Merchandise Code	A	8	Commodity code from table given by Treasury Dept. Fill with blanks to the right.	5-12
Merchandise Quantity	N	7	Fill with zeros to the left.	13-19
Merchandise Amount	N	8.2	Commodity cost from invoice. Fill with zeros to the left.	20-29
Excise Tax Amount	N	8.2	Amount calculated. Fill with zeros to the left.	30-39
Merchandise Description	A	41	Fill with blanks to the right.	40-80
<i>Record Type 4</i>				
Sequence or pre-declaration number assigned by the broker	N	3		1-3
Record Type	A	1	Must be 4 (four).	4-4
Supplier Name	A	30	Fill with blanks to the right.	5-34
Invoice Number	A	12	Fill with blanks to the right.	35-46
Invoice Date	A	8	YYYYMMDD	47-54
Invoice Amount	N	8.2	Taxable amount. Fill with zeros to the left.	55-64
Sale Description	A	5	Fill with blanks to the right.	65-69

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Field Name	Format	Bytes	Comments or Values	Position
Description of Invoiced Merchandise	A	40	Fill with blanks to the right. Optional	70-109
Quantity of Invoiced Merchandise	N	7	Fill with zeros to the left. Optional	110-116
Freight Charge Amount	N	8.2	Fill with zeros to the left.	117-126
Insurance Amount	N	8.2	Fill with zeros to the left.	127-136
Amount of DutyPaid	N	8.2	Fill with zeros to the left.	137-146