September 7, 2018

Exhibit 61

FCIC-M13

(INELIGIBLE PRODUCER OUTPUT RECORD)

Format/Edits

Field No.	Field Name	Begin Pos	Siz e	Picture	Field Edits
1	Record Type	1	2	9(02)	Required. Must be 61.
2	Id Type	3	1	9(01)	Will be: $1 = SSN$
	• •				2 = EIN
					5 = BIA Number
3	ID Number	4	9	9(09)	ID Number of the Primary Insured or the
					SBI, depending on the Record Number.
					If ID Type eq '1' - Valid SSN
					If ID Type eq '2' - Numeric > 0
					If ID Type eq '5' - First 5 digits are FIPS
					State and County Code
4	Record Number	13	3	9(03)	Will be 001 if Ineligible Producer was
					reported as a primary insured.
					Will be 002-999 if Ineligible Producer was
_					reported as an SBI.
5	Entity Type	16	1	X(01)	Will be:
					I = Individual
					P = Partnership
					X = All Others B = Bureau of Indian Affairs
6	Reporting Organization	17	2	X(02)	Reporting Organization that reported the
0	Reporting Organization	17	2	$\Lambda(02)$	producer as ineligible. (05= FSA, 08=
					FCIC, $06 = CAT$ Fee Receivable)
7	Reinsurance Year	19	4	9(04)	Reinsurance year of the contract with the
,	itemsurance i cui	17	•)(01)	debt.
8	Ineligibility Status Flag	23	2	9(02)	See Exhibit 61-1 for values.
9	Date of Ineligibility	25	8	9(08)	Date ineligibility established
					(YYYYMMDD). (Reference the ITS
					Handbook)
10	Indebtedness Eligibility Date	33	8	9(08)	Date eligibility was re-established in the
					case of a debt (YYYYMMDD).
11	Notification Letter Date	41	8	9(08)	Date the notification letter was sent to the
					producer (YYYYMMDD).
12	Eligibility Reversal Date	49	8	9(08)	Date of defaulted payment agreement or
10			1	37	bankruptcy dismissal. (YYYYMMDD).
13	CAT Ineligibility Flag	57	1	Х	If 'Y', producer is ineligible to participate in
					the Catastrophic Risk Program (CAT) due to
					debarment, disqualification, or suspension.
14	CAT Eligibility Date	58	8	9(08)	Otherwise, will be 'N'. Date that the producer will once again be
17	CITI Englomey Date	50	0	2(00)	eligible to participate in CAT
					(YYYYMMDD format).
15	Buyup Ineligibility Flag	66	1	Х	If 'Y', the producer is ineligible to
-	, ₁ , ₀ ,,,				participate in the buyup program due to
					debarment, disqualification, or suspension.
					Otherwise, will be 'N'.

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(INELIGIBLE PRODUCER OUTPUT RECORD)

Format/Edits

Field No.	Field Name	Begin Pos	Siz e	Picture	Field Edits
16	Buyup Eligibility Date	67	8	9(08)	Date that the insured will once again be
					eligible to participate in the buyup program
					(YYYYMMDD format).
17	Controlled Substance Year	75	4	9(04)	Crop year that eligibility will be restored for
	of Eligibility				the Insured in cases of controlled substance
					abuse.
18	Special Purpose Flag	79	1	X(01)	Indicator for special conditions. "D"
					indicates defaulted payment agreement
					established before the termination date.
19	Type 61 Record Filler	80	6	X(06)	Blank.
20	Last Name	86	20	X(20)	Last Name of the Ineligible Producer/SBI
					as reported.
21	First Name	106	10	X(10)	First Name of the Ineligible Producer/SBI
					as reported.
22	Middle Name	116	10	X(10)	Middle Name of the Ineligible Producer/SBI
•••		10.6	_		as reported.
23	Name Suffix	126	5	X(05)	Name suffix (Jr, Sr,) of the Ineligible
24	· · · 1	101	4	N/OA)	Producer/SBI as reported.
24	Title	131	4	X(04)	Title (Dr, Mr, Ms) of the Ineligible
25	D N.	125	25	N(25)	Producer/SBI as reported.
25	Business Name	135	35	X(35)	Business name of the Ineligible
26	Address Line 1	170	25	$\mathbf{V}(25)$	Producer/SBI as reported. Line 1 of the Street Address for the
26	Address Line I	170	35	X(35)	Ineligible Producer/SBI as reported.
27	Address Line 2	205	35	X(35)	Line 2 of the Street Address for the
21	Address Line 2	205	55	$\Lambda(33)$	Ineligible Producer/SBI as reported.
28	City	240	35	X(35)	Address City for the Ineligible Producer/SBI
20	City	210	55	11(55)	as reported.
29	Address State	275	2	X(02)	Address State for the Ineligible
			_	()	Producer/SBI as reported.
30	Zip Code	277	5	9(05)	Zip Code for the Ineligible Producer/SBI as
	I				reported.
31	Zip Extension	282	4	9(04)	Zip code extension for the Ineligible
	•			. ,	Producer/SBI as reported.
32	Contact Office Name	286	20	X(20)	Name provided by the reporting
					organization of the office for the Ineligible
					Producer to contact in order to settle their
					debt.
33	Corresponding ID Number	306	9	X(09)	ID Number of Primary Insured if Producer
					is a SBI
34	Originating RO	315	2	X(02)	Used to identify originating RO for CAT fee
					records.
35	Filler	317	4	X(04)	Blank
36	Contact Office Phone	321	10	X(10)	Telephone number of the Contact Office.
37	Crop Year	331	4	9(04)	Crop year of the latest crop on the policy
					with the debt.

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(INELIGIBLE PRODUCER OUTPUT RECORD)

Format/Edits

Field No.	Field Name	Begin Pos	Siz e	Picture	Field Edits
38	RMA Data Processed Date	335	8	9(08)	Latest date that information was processed by ITS for the producer (YYYYMMDD).
39	RMA Data Receipt Date	343	8	9(08)	Date that the data was originally received by RMA for processing in the ITS system (YYYYMMDD).