The information specified on this form, which is required by law under Section 7(b)(6) of the Railroad Retirement Act and Section 209.12 of the Code of Federal Regulations, will be used by the Railroad Retirement Board to mail Form BA-6, Certificate of Service Months and Compensation, to the employees of your company. The information is authorized for collection under OMB control number 3220-0005. This report is due by April 1st each year. Failure to report or the making of a false or fraudulent report can result in criminal prosecution or civil penalties, or both.

We estimate the electronic versions of this form transmitted by a secure e-mail or a File Transfer Protocol (FTP) takes an average of 15 minutes per response to complete, including time for reviewing the instructions, getting the needed data, and reviewing the completed form. Federal agencies may not conduct or sponsor, and respondents are not required to respond to, a collection of information unless it displays a valid OMB number. If you wish, send comments regarding the accuracy of our estimate or any other aspect of this form, including suggestions for reducing completion time, to

Associate Chief Information Officer for Policy and Compliance Railroad Retirement Board 844 North Rush Street Chicago, IL 60611-1275.

This exhibit below explains the format for reports filed on CD ROM, electronic files, or an upload on ERSNet. For information about the data to be entered, refer to Part V, Chapter 5.

NOTE: Reports submitted on CD ROM, secure email, or FTP must be accompanied by Form G-440, "Report Specifications Sheet".

Form BA-6a Record Format		
Field Length	Record Position	Data and Instructions
9	1-9	The employee's 9-digit social security number.
15	10-24	First fifteen (15) characters of the employee's first name.
1	25	Employee's middle initial.
20	26-45	First twenty (20) characters of the employee's surname. Spaces in such names as Mc Carthy, St Clair, De La Cross are acceptable.
30	46-75	Mailing Address Line 1 (Street Number, Post Office Box, etc.).
30	76-105	Mailing Address Line 2.
20	106-125	City
2	126-127	State

## Labor Employer Reporting Instructions Appendix I: Electronic File Format Form BA-6A, Form BA-6 Address Report

Form BA-6a Record Format			
Field Length	Record Position	Data and Instructions	
5	128-132	Zip Code	
8	133-140	Blank Filler.	
4	141-144	Four-digit BA number assigned by the Railroad Retirement Board.	
8	145-152	Effective date of information (MMDDCCYY).	
28	153-180	Blank Filler.	

**NOTE**: The file should be saved as a text (\*.txt) file with the record format listed above.