

**Uniform Data Submission Specifications for the MDS 2.0 (September 2000/July 2002 Forms)**  
**Abbreviated Trailer Record Layout For Submission From the Nursing Home To the State (Version 1.20)**

Form Location	Description	Len	Start	End	Picture	Range if Active	Type
REC_ID	RECORD ID	2	1	2	XX	Z0	CODE
TOT_REC	Total Number of Records in Submission File	6	3	8	X(6)	Valid number	COUNT
FILLER1	BLANK FILLER	1803	9	1811	X(1803)	sp(1803)	FILLER
DATA_END	End of Data Terminator Code	1	1812	1812	X	%	CODE
CRG_RTN	Carriage Return (ASCII 013)	1	1813	1813	X	ASCII(013)	CODE
LN_FD	Line Feed (ASCII 010)	1	1814	1814	X	ASCII(010)	CODE