MAINE REVENUE SERVICES - EFT UNIT
24 STATE HOUSE STATION
AUGUSTA, ME 04333-0024
207-624-5625

Tax Payment Type: Withholding (ONLY) Tax- Quarterly Remittance

Deposit Funds to: **US Bank** **RTN/ABA# 021052053**
10 West Broad St, 12th Floor (CN-OH-BD12) **Account # 81302364**
Columbus, OH 43215

ELECTRONIC FUNDS TRANSFER PROGRAM TXP ADDENDUM RECORD LAYOUT

FIELD #	FIELD NAME	DATA ELEMENT TYPE	FIELD LENGTH	CONTENTS
	Segment Identifier			TXP
	Field Separator			*
TXP01	Taxpayer Identification	AN	11	xxxxxxxxxxx **(use the 11 digit withholding id provided by Maine Central Registration Dept.)**
	Field Separator			*****
TXP02	Tax Payment Type Code	ID	5	**01104**
	Field Separator			*****
TXP03	Tax Period End Date	DT	6	**YYMMDD**
	Field Separator			*****
TXP04	Amount Type	ID	1	**T**
	Field Separator			*****
TXP05	Amount (Paid)	N2	10	**$$$$$$$$cc**
	[Unless your software allows a decimal place, do not put a space or a decimal point in the amount field.]			
	Record Terminator			****

Use this addendum layout with quarterly withholding payments. Tax Period End Date is the reporting period covered by the payment. **Always use the last day of the quarter in the "DD" portion of this field.**