

Sheet1

SALUTE,C,8 FIRST_NAME,C,15 LAST_NAME,C,19 ADDRESS1,C,32 ADDRESS2,C,32 CITY,C,20

Sheet1

STATE,C,12 ZIPCODE,C,10 COUNTRY,C,20 CATEGORY,C,10 PHONE1,C,12 PHONE2,C,12

CODE,C,12 FAXFONE,C,12