COLORADO DEPARTMENT OF LABOR AND EMPLOYMENT
DIVISION OF WORKERS' COMPENSATION

THIRD PARTY ADMINISTRATOR LOCATION LIST

Trading Partner Name _____ **Date** _____

Enter the FEIN and nine-digit Postal Code that will be used by your company as the SENDER ID in the Header Record of all EDI transactions. This should match information submitted on your Master Trading Partner Profile.

Master FEIN _____ **Postal Code** _____

Address _____

City, State _____

Please provide the FEIN, Colorado Division of Workers' Compensation TPA Code, address, and nine-digit postal code for each location of the Third Party Administrator that will be transmitting data. We will notify you of any discrepancy between the identifying information, including the mailing address and the present records of the Division of Workers' Compensation. It is understood that this list will have entries added or removed from time to time.

FEIN	TPA Code	TPA Name	Address	Postal Code

The FEIN and the postal code must match the DN 8 and DN 14, respectively, submitted in your transmissions. Attach additional sheets as needed.