## NSLDS Back-up Detail Distribution for Annual Reasonability, LPIF and AMF

Organization's Name:		GA Code: G	SA.
Street Address:			
City:	State:	Zip:	
Please select from the following options. To indicate a combination of distribution options, both may be selected.  Our organization would like to receive back-up detail files through SAIG for the following message classes:  Our organization would like to continue to receive back-up detail files via tape or cartridge, but would like to update our distribution options for the following message classes:			
☐ GALPFDOP - Loan Processing and Issuance Fee back-up detail	Person Responsible:		
For SAIG, please enter the TG mailbox number below:	Business Address:  City: State: 2  Telephone #: ( ) -  E-mail:	State:	ate: Zip:
For Tape or Cartridge, please select the from the following choices:			
☐ 3480 Cartridge			
☐ Magnetic Tape (specify type) ☐ 800 BPI Reel ☐ 1600 BPI Reel ☐ 6250 BPI Reel			
☐ GAAMFDOP - Account Maintenance Fee back-up detail			
For SAIG, please enter the TG mailbox number below:		State:	Zip:
For Tape or Cartridge, please select the from the following choices:	Telephone #: ( ) - E-mail:		
☐ 3480 Cartridge			
☐ Magnetic Tape (specify type) ☐ 800 BPI Reel ☐ 1600 BPI Reel ☐ 6250 BPI Reel			
GAARQTOP and GAARYROP - Annual Reasonability back-up detail, quarterly and annual calculations	Person Responsible:  Business Address:  City: State: Zip:  Telephone #: ( ) -  E-mail:		
For SAIG, please enter the TG mailbox number below:		Zip:	
For Tape or Cartridge, please select the from the following choices:			
☐ 3480 Cartridge			
☐ Magnetic Tape (specify type) ☐ 800 BPI Reel ☐ 1600 BPI Reel ☐ 6250 BPI Reel			

Return form to: NSLDS@pearson.com