

Study ID (if available)	Event ID	UR Number (if available)	Facility ID (if available)	First name	Other given names	Last name	Date of birth	Street Address	Suburb	Postcode
001	1	000000XX	000XX	First name	Other name	Last name	DD/MM/YYYY	Street Address	Suburb	Postcode
001	2	000000XX	000XX	First name	Other name	Last name	DD/MM/YYYY	Street Address	Suburb	Postcode
001	3	000000XX	000XX	First name	Other name	Last name	DD/MM/YYYY	Street Address	Suburb	Postcode
002	1	000000XX	000XX	First name		Last name	DD/MM/YYYY	Street Address	Suburb	Postcode
003	1	000000XX	000XX	First name	Other name	Last name	DD/MM/YYYY	Street Address	Suburb	Postcode
004	1	000000XX	000XX	First name		Last name	DD/MM/YYYY	Street Address	Suburb	Postcode
005	1	000000XX	000XX	First name		Last name	DD/MM/YYYY	Street Address	Suburb	Postcode
006	1	000000XX	000XX	First name	Other name	Last name	DD/MM/YYYY	Street Address	Suburb	Postcode
007	1	000000XX	000XX	First name		Last name	DD/MM/YYYY	Street Address	Suburb	Postcode

For further information on how to provide data to the Statistical Services Branch (SSB) for linkage, please see our [Data Linkage Information Sheet](#). For any questions or clarification about SSB's preferred cohort format, please contact SSB at DLQ@health.qld.gov.au.