ETA 5130 BENEFIT APPEALS

STATE: OR				REGION	: 06	REPORT FOR PERIOD ENDING: 01/31/2020					
	ON A. SINGLE R DISPOSITIO		T AND M	ULTICLA	IMANT API	PEAL DECIS	SIONS BY P	ROGRAI	M A	ND	
	UI De		UCFE-NO UI			CX Only					
Line	Lower Authority	Higher Authority		Lower H Authority Au		Lower Authorit	Higher Authority		Other Dispositions		
No.	(1)	(2)	((3)	(4)	(5)	(6))		(7)	
100	949		59	7	С		0	0		187	
;	SECTION B. C	LAIMANTS	INVOLV	ED IN STA	TE UI APP	EALS CASE	S BY STATU	US OF A	PPE	ALS	
		Single-C App	Multi-Claimant Appeals								
Line No.		Lower Authority	Higher Authority	Lower Authority		Higher Authority					
		(8)	(9)	(10)		(11)					
200		1,033	85	0		(
210			949	59		0	(
	SEC	CTION C. S	TATE UI	APPEALS	DECISION	S BY TYPE	OF APPELL	ANT			
Line No.		All UI Decisions		Claimant		Empl	Other				
	Appeals Decisions	Lower	Higher	Lower	Higher	Lower	er Higher		Lower Hig		
		(12)	(13)	(14)	(15)	(16)	(17)	(18)		(19)	
300	Total	949	59	808	40	141	18		0	1	
310	Appellant	350	11	316	9	34	1		0	1	
SEC	CTION D. NUM	IBER OF LO	OWER AU	THORITY	STATE UI	APPEALS I	DECISIONS	BY TYPI	E OI	F ISSUE	
Line	Total Decisions	Voluntary Quit	Mis- Conduct	Refusal of Suitable Work	Not Able/ Available	Labor Dispute	Other				
Line No.	(20)	(21)	(22)	(23)	(24)	(25)	(20				
400	949	247	354	7	162	0				179	

Comments:

Line 300 (19), Administrator's Appeal

OMB No.: 1205-0172 OMB Expiration Date: 05/31/2020 OMB Burden Minutes: 60

OMB Burden Statement: O M B Burden Statement: These reporting instructions have been approved under the Paperwork reduction Act of 1995. Persons are not required to respond to this collection of information unless it displays a valid OMB control number. Public reporting burden for this collection of information includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Submission is required to obtain or retain benefits under SSA 303(a)(6). Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of Workforce Security, Room S-4524, 200 Constitution Ave., NW, Washington, DC, 20210.

		ETA 5130	- Benefit	Appeals R	eport		SUD	
							000	
Report fo Period Ending:	01/31/	2020	Region:	10	State:	41		
SECTION A. Single Clain	ont and Mul	tioloimont A	nnaala Caar	Decisiono	and Other Di	onecitions		
		cisions		Decisions a	UCX Only	•		
	Lower	Higher	Lower	Higher	Lower	Higher	Other Dis	spositions
	Authority	Authority	Authority	Authority	Authority	Authority		
Line No.	(1)	(2)	(3)	(4)	(5)	(6)	(7)	
100	0	0	0	0	0	0		0
SECTION B. Claimants In					ppeal			
			nant Appeal			Multiclaima		
	Lower A	/		Authority	Lower A	,	. <u> </u>	Authority
Line No.	()	3)	()	9)	(1	0)	(1	1)
200 Filed During Month		2		0		0		0
Disposed of During								
Disposed of During								
210 Month		0		0		0		0
		0		0		0		0
210 Month	eals Decisio					0		0
	All UI D	ns by Type o ecisions	of Appellant Clair	mant		loyer		her
210 Month SECTION C. State UI App	All UI De Lower	ns by Type o ecisions Higher	of Appellant Clain Lower	m ant Higher	Emp Lower	l oyer Higher	Lower	h er Higher
210 Month SECTION C. State UI App Line No.	All UI D Lower Authority	ns by Type o ecisions Higher Authority	of Appellant Clain Lower Authority	m ant Higher Authority	Emp Lower Authority	oyer Higher Authority	Lower Authority	her Higher Authority
210 Month SECTION C. State UI App Line No. UI Appeals Decisions	All UI De Lower Authority (12)	ns by Type of ecisions Higher Authority (13)	of Appellant Clain Lower Authority (14)	mant Higher Authority (15)	Emp Lower Authority (16)	oyer Higher Authority (17)	Lower Authority (18)	her Higher Authority (19)
210 Month SECTION C. State UI App Line No. UI Appeals Decisions 300 Total	All UI D Lower Authority (12) 0	ns by Type of ecisions Higher Authority (13) 0	of Appellant Clain Lower Authority (14) 0	mant Higher Authority (15) 0	Emp Lower Authority (16) 0	oyer Higher Authority (17) 0	Lower Authority (18) 0	h er Higher Authority (19) 0
210 Month SECTION C. State UI App Line No. UI Appeals Decisions	All UI De Lower Authority (12)	ns by Type of ecisions Higher Authority (13) 0	of Appellant Clain Lower Authority (14) 0	mant Higher Authority (15) 0	Emp Lower Authority (16) 0	oyer Higher Authority (17)	Lower Authority (18)	h er Higher Authority (19) 0
210 Month SECTION C. State UI App Line No. UI Appeals Decisions 300 Total	All UI D Lower Authority (12) 0	ns by Type of ecisions Higher Authority (13) 0 0	of Appellant Clain Lower Authority (14) 0 0	mant Higher Authority (15) 0	Empl Lower Authority (16) 0 0	oyer Higher Authority (17) 0	Lower Authority (18) 0	h er Higher Authority (19) 0
210 Month SECTION C. State UI App Line No. UI Appeals Decisions 300 Total 310 In Favor of Appellant	All UI D Lower Authority (12) 0	ns by Type of ecisions Higher Authority (13) 0 0	of Appellant Clain Lower Authority (14) 0 0	mant Higher Authority (15) 0	Empl Lower Authority (16) 0 0	oyer Higher Authority (17) 0	Lower Authority (18) 0	h er Higher Authority (19) 0
210 Month SECTION C. State UI App Line No. UI Appeals Decisions 300 Total 310 In Favor of Appellant	All UI D Lower Authority (12) 0	ns by Type of ecisions Higher Authority (13) 0 0	of Appellant Clain Lower Authority (14) 0 0	mant Higher Authority (15) 0	Empl Lower Authority (16) 0 0	oyer Higher Authority (17) 0	Lower Authority (18) 0	h er Higher Authority (19) 0
210 Month SECTION C. State UI App Line No. UI Appeals Decisions 300 Total 310 In Favor of Appellant	All UI D Lower Authority (12) 0 0 0 0 0 0 0 0	ns by Type of ecisions Higher Authority (13) 0 0	of Appellant Clain Lower Authority (14) 0 0 Appeals Dec	mant Higher Authority (15) 0	Empl Lower Authority (16) 0 0 0 0 8 0 0 0 0 0 0 0 0 0 0 0 0 0 0	loyer Higher Authority (17) 0 0	Lower Authority (18) 0 0	h er Higher Authority (19) 0
210 Month SECTION C. State UI App Line No. UI Appeals Decisions 300 Total 310 In Favor of Appellant	All UI D Lower Authority (12) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ns by Type of ecisions Higher Authority (13) 0 0 ity State UI	of Appellant Clain Lower Authority (14) 0 0 Appeals Dec	mant Higher Authority (15) 0 0 0 isions by Ise	Empl Lower Authority (16) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Not Able or	Lower Authority (18) 0 0 Labor	her Higher Authority (19) 0