ETA 5130 BENEFIT APPEALS

STATE: OR			REGION: 06			REPORT FOR PERIOD ENDING: 02/29/2020					
	ION A. SINGLE CR DISPOSITIO		T AND M	ULTICLA	IMANT AP	PEAL DECIS	SIONS BY P	ROGRA	M A	ND	
	UI De	UI Decisions UCFE-NO UI UCX Only				CX Only					
Line	Lower Authority	Higher Authority		ower hority	Higher Authority	Lower Authorit	High y Autho		Other Dispositions		
No.	(1)	(2)		(3)	(4)	(5)	(6))	(7)		
100	845		73	1		1	0	0		132	
	SECTION B. C	LAIMANTS	S INVOLV	ED IN STA	ATE UI API	PEALS CASE	S BY STAT	US OF A	PPE	ALS	
		Single-C App	Multi-Claimant Appeals								
Line					Lower Authority	Higher Authority	Lower Authority		Higher Authority		
No.		Status	of Appeals		(8)	(9) (10)	(11)		
200		996	94		0 0						
210		845	73		0	0					
	SEC	CTION C. S	TATE UI	APPEALS	DECISION	S BY TYPE	OF APPELL	ANT			
		All UI Decisions Claimant				Empl	Other				
		Lower	Higher	Lower	Higher	Lower	Higher	Lowe	er	Higher	
Line No.	Appeals Decisions	(12)	(13)	(14)	(15)	(16)	(17)	(18))	(19)	
300	Total	845	73	743	54	102	18		0	1	
310	Appellant	289	18	264	14	25	3		0	1	
SE	CTION D. NUM	BER OF LO	OWER AU	THORITY	STATE UI	APPEALS I	DECISIONS 1	BY TYP	E O	FISSUE	
	Total Decisions	Voluntary Quit	Mis- Conduct	Refusal of Suitable Work	Not Able/ Available	Labor Dispute	Other				
Line No.	(20)	(21)	(22)	(23)	(24)	(25)					
	. ,	, ,			, ,	, ,		. ,			

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.

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		ETA 5130	- Benefit	Appeals R	eport		SUD		
Report fo Period Ending:	02/28/	2020	Region:	10	State:	41			
SECTION A. Single Claim	nant and Mul	ticlaimant A	ppeals Case	Decisions a	and Other Di	spositions			
	UI Decisions UCFE-No UI Decisions				UCX Only	Decisions			
	Lower	Higher	Lower	Higher	Lower	Higher	Other Dispositions		
	Authority	Authority	Authority	Authority	Authority	Authority			
Line No.	(1)	(2)	(3)	(4)	(5)	(6)	(7	7)	
100	0	0	0		0	0		0	
SECTION B. Claimants In	volved in Sta	ate UI Apple	als Cases by	y Status of A	ppeal				
	Single-Claimant Appeals				Multiclaimant Appeals				
	Lower A	uthority	Higher Authority		Lower Authority		Higher Authority		
Line No.	(8)		(9)		(10)		(11)		
200 Filed During Month		1		0		0		C	
Disposed of During									
210 Month		0		0		0		0	
050510110101011111111111111111111111111									
SECTION C. State UI App									
Line No.	All UI De		Claimant			loyer	Other		
	Lower	Higher	Lower	Higher	Lower	Higher	Lower	Higher	
III Annaala Daaiaian-	Authority	Authority	Authority	Authority	Authority	Authority	Authority	Authority	
UI Appeals Decisions 300 Total	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19) 0	
310 In Favor of Appellant	0	0	0		0		0	0	
3 TO JITI FAVOI OI APPEIIANT	0	0	0	1 0	0	ı U	U	U	
SECTION D. Number of L	OWAT Author	ity State III :	∆nneale Doo	isions by les	 				
SECTION D. Number of L	OWEI AUUIOI	ity State Of I	Thheais ner	iololio by ISS	Refusal of				
			Volunton			Not Abla a	l obor		
	Total III Decisions		Voluntary Quit	Missondust	Suitable	Not Able or	Labor	Othor	
Lina Na		Total UI Decisions (20)		Misconduct	Work	Available	Dispute (25)	Other	
Line No.	1 (2	U)	(21)	(22)	(23)	(24)	(25)	(26)	
400	, (`	0	0	0	0	0	0	