

ETA 5130 BENEFIT APPEALS

STATE: OR	REGION: 06	REPORT FOR PERIOD ENDING: 01/31/2021
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SECTION A. SINGLE CLAIMANT AND MULTICLAIMANT APPEAL DECISIONS BY PROGRAM AND OTHER DISPOSITIONS

Line No.	UI Decisions		UCFE-NO UI		UCX Only		Other Dispositions
	Lower Authority	Higher Authority	Lower Authority	Higher Authority	Lower Authority	Higher Authority	
	(1)	(2)	(3)	(4)	(5)	(6)	
100	578	50	5	0	0	0	328

SECTION B. CLAIMANTS INVOLVED IN STATE UI APPEALS CASES BY STATUS OF APPEALS

Line No.	Status of Appeals	Single-Claimant Appeals		Multi-Claimant Appeals	
		Lower Authority	Higher Authority	Lower Authority	Higher Authority
		(8)	(9)	(10)	(11)
200	Filed During Month	2,074	50	0	0
210	Disposed of During Month	578	50	0	0

SECTION C. STATE UI APPEALS DECISIONS BY TYPE OF APPELLANT

Line No.	Appeals Decisions	All UI Decisions		Claimant		Employer		Other	
		Lower	Higher	Lower	Higher	Lower	Higher	Lower	Higher
		(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
300	Total	578	50	518	46	60	4	0	0
310	Appellant	231	15	216	12	15	3	0	0

SECTION D. NUMBER OF LOWER AUTHORITY STATE UI APPEALS DECISIONS BY TYPE OF ISSUE

Line No.	Total Decisions	Voluntary Quit	Mis-Conduct	Refusal of Suitable Work		Labor Dispute	Other
				Not Able/ Available	Not Able/ Available		
				(23)	(24)		
400	578	216	169	2	72	0	119

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).

ETA 5130 BENEFIT APPEALS [EB]

STATE: OR	REGION: 06	REPORT FOR PERIOD ENDING: 01/31/2021
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SECTION A. SINGLE CLAIMANT AND MULTICLAIMANT APPEAL DECISIONS BY PROGRAM AND OTHER DISPOSITIONS

Line No.	UI Decisions		UCFE-NO UI		UCX Only		Other Dispositions
	Lower Authority	Higher Authority	Lower Authority	Higher Authority	Lower Authority	Higher Authority	
	(1)	(2)	(3)	(4)	(5)	(6)	
100	3	0	0	0	0	0	7

SECTION B. CLAIMANTS INVOLVED IN STATE UI APPEALS CASES BY STATUS OF APPEALS

Line No.	Status of Appeals	Single-Claimant Appeals		Multi-Claimant Appeals	
		Lower Authority	Higher Authority	Lower Authority	Higher Authority
		(8)	(9)	(10)	(11)
200	Filed During Month	38	0	0	0
210	Disposed of During Month	3	0	0	0

SECTION C. STATE UI APPEALS DECISIONS BY TYPE OF APPELLANT

Line No.	Appeals Decisions	All UI Decisions		Claimant		Employer		Other	
		Lower	Higher	Lower	Higher	Lower	Higher	Lower	Higher
		(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
300	Total	3	0	2	0	1	0	0	0
310	Appellant	1	0	1	0	0	0	0	0

SECTION D. NUMBER OF LOWER AUTHORITY STATE UI APPEALS DECISIONS BY TYPE OF ISSUE

Line No.	Total Decisions	Voluntary Quit	Mis-Conduct	Refusal of Suitable Work		Not Able/ Available	Labor Dispute	Other
				Suitable Work	Not Able/ Available			
				(23)	(24)			
400	3	1	2	0	0	0		0

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

ETA 5130 PANDEMIC BENEFIT APPEALS (PEUC)

STATE: OR	REGION: 06	REPORT FOR PERIOD ENDING: 01/31/2021
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SECTION A. SINGLE CLAIMANT AND MULTICLAIMANT APPEAL DECISIONS BY PROGRAM AND OTHER DISPOSITIONS

Line No.	UI Decisions		UCFE-NO UI		UCX Only		Other Dispositions
	Lower Authority	Higher Authority	Lower Authority	Higher Authority	Lower Authority	Higher Authority	
	(1)	(2)	(3)	(4)	(5)	(6)	
100	110	7	0	0	0	0	44

SECTION B. CLAIMANTS INVOLVED IN STATE UI APPEALS CASES BY STATUS OF APPEALS

Line No.	Status of Appeals	Single-Claimant Appeals		Multi-Claimant Appeals	
		Lower Authority	Higher Authority	Lower Authority	Higher Authority
		(8)	(9)	(10)	(11)
200	Filed During Month	295	5	0	0
210	Disposed of During Month	110	7	0	0

SECTION C. STATE UI APPEALS DECISIONS BY TYPE OF APPELLANT

Line No.	Appeals Decisions	All UI Decisions		Claimant		Employer		Other	
		Lower	Higher	Lower	Higher	Lower	Higher	Lower	Higher
		(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
300	Total	110	7	105	5	5	1	0	1
310	Appellant	55	2	54	1	1	0	0	1

SECTION D. NUMBER OF LOWER AUTHORITY STATE UI APPEALS DECISIONS BY TYPE OF ISSUE

Line No.	Total Decisions	Voluntary Quit	Mis-Conduct	Refusal of Suitable Work		Labor Dispute	Other
				Not Available/	Not Available/		
				(23)	(24)		
400	110	54	24	2	14	0	16

Comments:

Line 300 (19), Administrator's Appeal

OMB No.: OMB Expiration Date: OMB Burden Minutes: 25

OMB Burden Statement: Section 2116(a), Division B, Title II of the CARES Act states that "Chapter 35 of Title 44, United States Code, (commonly referred to as the "Paperwork Reduction Act of 1995") shall not apply to the amendments made by this subtitle." Therefore these reporting instructions do not require additional OMB approval and the submission of this information is required to obtain or retain benefits under the SSA 303(a)(6).