ETA 5130 BENEFIT APPEALS

STATE: OR				REGION: 06			REPORT FOR PERIOD ENDING: 04/30/2021						
		SINGLE CI			ULTICLAI	MANT AP	PEAL DE	CISIONS B	Y				
	UI Decisions			UCFE-	NO UI	UCX Only							
Lin	Lowe e Author	-		Lower othority	Higher Authority	Lower Authorit	0		Other positions				
No.		(2))	(3)	(4)	(5)	(6)		(7)				
100)	881	66	0	1		2	0	446				
SECTION B. CLAIMANTS INVOLVED IN STATE UI APPEALS CASES BY STATUS OF APPEALS													
						Single-Claimant Appeals		Multi-Claimant Appeals					
Line					I	Lower Authority	Higher Authority	Lower Authority	Higher Authority				
No.		Statu	ıs of Appe	als		(8)	(9)	(10)	(11)				
200		Filed 1	During Mo	onth		1,352	86	0	0				
210	Disposed of During Month					881	66	0	0				
		Disposeu	or During	SECTION C. STATE UI APPEALS DECISIONS BY TYPE OF APPELLANT									
	SECT	-	C		S DECISION	NS BY TY	PE OF AP	PELLANT					
-10	SECT	-	FATE UI	APPEALS	S DECISION	NS BY TY Empl		PELLANT Otl	ner				
		ΓΙΟΝ C. ST	FATE UI	APPEALS					her Higher				
Line No.	SECT Appeals Decisions	FION C. ST	FATE UI A	APPEALS Clai	mant	Empl	oyer	Otl					
Line	Appeals	FION C. ST All UI De Lower	ΓΑΤΕ UI Δ ecisions Higher	APPEALS Clai Lower	imant Higher	Empl Lower	oyer Higher	Otl Lower	Higher				
Line No. 300	Appeals Decisions	All UI De Lower (12)	FATE UI A ecisions Higher (13)	APPEALS Clai Lower (14)	mant Higher (15)	Empl Lower (16)	oyer Higher (17)	Otl Lower (18)	Higher (19)				
Line No. 300 310	Appeals Decisions Total Appellant	All UI Do Lower (12) 881 433	FATE UI A ecisions Higher (13) 66	APPEALS Clai Lower (14) 793 404 R AUTHO	Higher (15)	Empl Lower (16) 86 27	oyer Higher (17) 4	Otl Lower (18) 2	Higher (19) 0				
Line No. 300 310	Appeals Decisions Total Appellant	All UI Do Lower (12) 881 433	FATE UI A ecisions Higher (13) 66	APPEALS Clai Lower (14) 793 404 R AUTHO	mant Higher (15) 62 11 ORITY STA	Empl Lower (16) 86 27	oyer Higher (17) 4	Otl Lower (18) 2	Higher (19) 0				
Line No. 300 310	Appeals Decisions Total Appellant	All UI Do Lower (12) 881 433	FATE UI A ecisions Higher (13) 66 12 OF LOWE	Clair Lower (14) 793 404 R AUTHO CO Refusal of Suitable	mant Higher (15) 62 11 ORITY STA	Empl Lower (16) 86 27	oyer Higher (17) 4	Otl Lower (18) 2	Higher (19) 0				
Line No. 300 310 SEC	Appeals Decisions Total Appellant TION D. N	All UI Do Lower (12) 881 433 NUMBER O	FATE UI A ecisions Higher (13) 66 12 OF LOWE	Clair Lower (14) 793 404 R AUTHO CO Refusal of Suitable	imant Higher (15) 62 11 ORITY STA OF ISSUE Not Able/	Empl Lower (16) 86 27 TE UI AP	oyer Higher (17) 4	Cotl Lower (18) 2 2 ECISIONS	Higher (19) 0				

Comments:

Line 300 (18), 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.

ETA 5130 BENEFIT APPEALS [EB]

	STATE: OR			REGION: 06			REPORT FOR PERIOD ENDING: 04/30/2021								
	CTION A. OGRAM A				IULTICLAI	MANT AI	PPEAL DE	CISIONS B	BY						
	UI Decisions			UCFE-	NO UI	U	CX Only								
Lin	Lowe	_	,	Lower uthority	Higher Authority	Lower Authori	0		Other ositions						
No		(2	2)	(3)	(4)	(5)	(6)		(7)						
100	0	3	2	0	0		0	0	0						
S	ECTION F	B. CLAIM	ANTS INV		IN STATE I	UI APPEA	LS CASES	BY STATU	US OF						
							laimant eals	Multi-Claimant Appeals							
Line						Lower Authority	Higher Authority	Lower Authority	Higher Authority						
No.		Stat	us of App	eals		(8)	(9)	(10)	(11)						
200		Filed	During M	onth		2	0	0	0						
210		Disposed	of During	g Month		3	2	0	0						
	SEC	ΓΙΟΝ C. S	TATE UI	APPEAL	S DECISIO	NS BY TY	PE OF API	PELLANT							
		All UI D	ecisions	Cla	imant	Empl	loyer	Other							
Line	Appeals	Lower	Higher	Lower	Higher	Lower	Higher	Lower	Higher						
No.	Decisions	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)						
300	Total	3	3 2	2 3	2	0	0	0	0						
310	Appellant	1	. 2	. 1	2	0	0	0	0						
310	Appenant	1	. 4	, 1			SECTION D. NUMBER OF LOWER AUTHORITY STATE UI APPEALS DECISIONS BY TYPE								
				ER AUTH	ORITY STA		PEALS DE	CISIONS	BY TYPE						
				ER AUTH			PEALS DE	CCISIONS 1	BY TYPE						
				ER AUTH C Refusal	ORITY STA OF ISSUE		PEALS DE	CCISIONS	ВҮ ТҮРЕ						
SEC [*]			OF LOWE	ER AUTHO C Refusal of Suitable	ORITY STA DF ISSUE Not		PEALS DE	Other	ВҮ ТҮРЕ						
	TION D. N	NUMBER (Voluntary	OF LOWE	ER AUTHO C Refusal of Suitable	ORITY STA DF ISSUE Not Able/	ATE UI AP Labor	PEALS DE		BY TYPE						

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: 04/30/2021			
		SINGLE C			IULTICLA	IMANT A	PPEAL DE	CISIONS I	ВҮ	
	U		UCFE-NO UI			CX Only				
Lir	Lowe Author	0		Lower uthority	Higher Authority	Lower Authori	-		ther ositions	
No	(1)	(2)	(3)	(4)	(5)	(6)		(7)	
10	0	131	10	0	0)	0	0	65	
S	ECTION F	B. CLAIMA	NTS INV		IN STATE I PPEALS	UI APPEA	LS CASES	BY STAT	US OF	
							Claimant eals		Multi-Claimant Appeals	
Line						Lower Authority	Higher Authority	Lower Authority	Higher Authority	
No.		Statu	s of Appe	als		(8)	(9)	(10)	(11)	
200	Filed During Month					205	14	0	0	
210		Disposed	of During	Month		131	10	0	0	
	SEC	ΓΙΟΝ C. ST	TATE UI	APPEALS	S DECISIO	NS BY TY	PE OF API	PELLANT		
		All UI Do	ecisions	Claimant		Employer		Other		
Line	Appeals	Lower	Higher	Lower	Higher	Lower	Higher	Lower	Higher	
No.	Decisions	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	
300	Total	131	10	117	7	14	3	0	0	
310	Appellant	56	6	52	5	4	1	0	0	
SEC'	TION D. N	NUMBER O	F LOWE			ATE UI AF	PPEALS DE	ECISIONS	BY TYPE	
				Refusal	F ISSUE					
				of	Not					
Line	Total Decisions	Voluntary Quit	Mis- Conduct	Suitable Work	Able/ Available	Labor Dispute		Other		
No.	(20)	(21)	(22)	(23)	(24)	(25)		(26)		
400	131	54	38	2	14	0			23	

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