

## ETA 5159 CLAIMS AND PAYMENT ACTIVITIES

STATE: OR		REGION: 06			REPORT FOR PERIOD ENDING: 05/31/2020				
SECTION A. CLAIMS ACTIVITIES									
Program	Line No.	Initial Claims							
		Total	New Intrastate Excluding Transitional	Additional Intrastate	Interstate Filed from Agent State	Interstate Taken as Agent State	Transitional	Interstate Received as Liable State	
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	
State UI	101	116,055	104,278	9,869	1,908	0	767	2,972	
UCFE No UI	102	207	169	26	12	0	4	13	
UCX Only	103	59	58	1	0	0	0	0	
		Eligibility Review			Continued Weeks Claimed			Entering Self Employment, All Programs	
		Intrastate	Interstate Liable	Intrastate	Interstate Filed From Agent State	Interstate Received as Liable State			
		(8)	(9)	(10)	(11)	(12)			(13)
State UI	201	0	0	1,110,196	23,591	22,800		4	
UCFE No UI	202	0	0	1,788	157	239			
UCX Only	203	0	0	521	2	2			
SECTION B. PAYMENT ACTIVITIES									
Item		Weeks and Amounts Compensated							
		State UI Program			UCFE and UCX Programs			Self Employment, All Programs	
		All Weeks Compensated	Total Unemployment	Interstate	Total	UCFE No UI	UCX Only		
		(14)	(15)	(16)	(17)	(18)	(19)		(20)
Number	301	817,713	763,694	13,440	1,370	1,059	311	1,137	
Amount	302	291,508,766	275,393,957	5,527,251	825,503	379,935	186,456	621,583	
		First Payments for All Unemployment				Final Payments for All Unemployment			
		State UI Program			UCFE and UCX Programs		State UI Program	UCFE and UCX Programs	
		Total	Intrastate	Interstate	UCFE No UI	UCX Only	Total	UCFE No UI	UCX Only
		(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)
Number	303	62,553	61,344	1,209	30	20	2,647	19	2

**Comments:**

Oregon is continuing to work on implementation of the new programs and reports, processing the backlog, and accurately defining and reporting the new program data. We will keep DOL informed of WEEKLY program counts for PEUC in the comment section of the ETA 539, e.g., PEUC WC = xxx along with the weekly PUA data.

Oregon will submit the ETA 5159 PEUCs as soon as we correctly define the data in our systems and validate its accuracy.

**OMB No.:** 1205-0010    **OMB Expiration Date:** 12/31/2018    **OMB Burden Minutes:** 120

**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-4231, 200 Constitution Ave., NW, Washington, DC, 20210.

## ETA 5159 CLAIMS AND PAYMENT ACTIVITIES [WORKSHARE]

STATE: OR	REGION: 06	REPORT FOR PERIOD ENDING: 05/31/2020
<b>SECTION A. CLAIMS ACTIVITIES</b>		
	<b>Initial Claims</b>	
<b>Program</b>	<b>New Intrastate Excluding Transitional (2)</b>	<b>Additional Intrastate (3)</b>
<b>101   State UI</b>	5,176	16
	<b>Continued Weeks Claimed</b>	
<b>Items</b>	<b>Intrastate (9)</b>	
<b>201   State UI</b>	21,362	
<b>SECTION B. PAYMENT ACTIVITIES</b>		
	<b>Weeks Compensated</b>	
<b>Items</b>	<b>State UI Program All Weeks Compensated (14)</b>	
<b>301   Number</b>	19,457	
<b>302   Amount</b>	3,702,548	
	<b>First Payments for All Unemployment State UI Program Intrastate (21)</b>	<b>Final Payment for All Unemployment State UI Total (25)</b>
<b>303   Number</b>	4,052	1
<b>SECTION C. FULL TIME EQUIVALENTS</b>		
	<b>Equivalent Initials</b>	<b>Equivalent Weeks Claimed</b>
<b>Number</b>	1,048	4,678
<b>SECTION D. WORKSHARE COVERAGE</b>		
	<b>Number of Participating Employers</b>	
<b>Number</b>	1,319	

**OMB No.:** 1205-0010    **OMB Expiration Date:** 12/31/2018    **OMB Burden Minutes:** 105

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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 5159 CLAIMS AND PAYMENT ACTIVITIES [EB]

STATE: OR		REGION: 06			REPORT FOR PERIOD ENDING: 05/31/2020			
<b>SECTION A. CLAIMS ACTIVITIES</b>								
<b>Program</b>	<b>Line No.</b>	<b>Initial Claims</b>					<b>Interstate Received as Liable State (7)</b>	
		<b>New Intrastate Excluding Transitional (2)</b>	<b>Additional Intrastate (3)</b>	<b>Interstate Filed from Agent State (4)</b>	<b>Interstate Taken as Agent State (5)</b>			
State UI	101	0	0	0	0	0		
UCFE, No UI	102	0	0	0	0	0		
UCX Only	103	0	0	0	0	0		
		<b>Eligibility Reviews</b>		<b>Continued Weeks Claimed</b>				
		<b>Intrastate (8)</b>	<b>Interstate Liable (9)</b>	<b>Intrastate (10)</b>	<b>Interstate Filed from Agent State (11)</b>	<b>Interstate Received as Liable State (13)</b>		
State UI	201	0	0	0	51	0		
UCFE, No UI	202	0	0	0	0	0		
UCX Only	203	0	0	0	0	0		
<b>SECTION B. PAYMENT ACTIVITIES</b>								
<b>Item</b>		<b>Weeks and Amounts Compensated</b>					<b>UCFE, No UI (19)</b>	<b>UCX Only (20)</b>
		<b>State UI Program</b>		<b>UCFE and UCX Programs</b>				
		<b>All Weeks Compensated (15)</b>	<b>Total Unemployment (16)</b>	<b>Total (18)</b>				
Number	301	0	0	0	0	0	0	
Amount	302	0	0	0	0	0	0	
		<b>First Payments for All Unemployment</b>			<b>Final Payments for All Unemployment</b>			
		<b>State UI Program</b>	<b>UCFE and UCX Programs</b>		<b>State UI Program</b>	<b>UCFE and UCX Programs</b>		
		<b>Total (22)</b>	<b>UCFE, No UI (25)</b>	<b>UCX Only (26)</b>	<b>Total (27)</b>	<b>UCFE, No UI (28)</b>	<b>UCX Only (29)</b>	
Number	303	0	0	0	0	0	0	

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**ETA 5159 - CLAIMS AND PAYMENT ACTIVITIES**

REPORT FOR PERIOD ENDING: 05/31/ 2020 STATE: 41 REGION: 6

**SECTION A. Claims Activities**

Program	Line No.	Initial Claims						
		Total Sum of Columns 2-4 (1)	New Intrastate Excluding Transitional (2)	Additional Intrastate (3)	Interstate Filed from Agent State (4)	Interstate Taken as Agent State (5)	Transitional (6)	Interstate Received as Liable State (7)
State UI	101	27	19	8	0	0	0	0
UCFE, No UI	102	1	1	0	0	0	0	0
UCX Only	103	1	0	1	0	0	0	0
		Eligibility Reviews			Continued Weeks Claimed			
		Intrastate (8)	Intrastate Liable (9)	Intrastate (10)	Interstate Filed from Agent State (11)	Interstate Taken as Agent State (12)	Interstate Received as Liable State (13)	Entering Self Employment All (14)
State UI	201	0	0	629	0	0	0	
UCFE, No UI	202	0	0	0	0	0	0	
UCX Only	203	0	0	0	0	0	0	

**SECTION B. Payment Activities**

Items		Weeks and Amounts Compensated							
		State UI Program			UCFE and UCX Programs			Self Employment All Programs (21)	
		All Weeks Compensated (15)	Total Unemployment (16)	Interstate (17)	Total (18)	UCFE, No UI (19)	UCX Only (20)		
Number	301	630	615	0	53	12	32		
Amount	302	258,120	253,264	0	26,555	4,540	19,106		
		First Payments for All Unemployment					Final Payments for All Unemployment		
		State UI Program			UCFE and UCX Programs		State UI Program		UCFE and UXC Programs
		Total (22)	Intrastate (23)	Interstate (24)	UCFE, No UI (25)	UCX Only (26)	Total (27)	UCFE, No UI (28)	UCX Only (29)
Number	303	0	0	0	0	0	6	0	0