ETA 539 CLAIMS AND EXTENDED BENEFITS DATA

STATE: OR				REGION: 06		RE	REPORT FOR PERIOD ENDING: 01/18/2020			
Week Number			2	Reflected Week Ending				01/11/2020		
IC	4,043	FIC	40	XIC	5	WSIC	39	WSEIC	8	
CW	31,524	FCW	746	XCW	59	WSCW	337	WSECW	80	
EBT	0	EBUI	0	ABT	171	ABUI	165			
AT	27,366	CE	1,906,429	R	1.43	AR	1.495	Р	95.65	
STATUS E			E	STATUS CHANGE DATE				04/07/2012		

Comments

_____ Report For Period Ending - 01/18/2020 Week Number - 2 Reflected Week Ending - 01/11/2020 _____ AIUR = 1.73EUC08 Total = 0 EUC08 UI = 0 ----- EUC Tier Breakout ------EUC Tier 1 = 0 EUC Tier 2 = 0 EUC Tier 3 = 0 EUC Tier 4 = 0 ------ Workshare Breakout ------State UI WSIC = 39 State UI WSEIC = 8 State UI WSCW = 337 State UI WSECW = 80 0 UCFE WSIC = UCFE WSEIC = 0 UCFE WSCW = 0 UCFE WSECW 0 = UCX WSIC 0 = UCX WSEIC = 0 UCX WSCW = 0 UCX WSECW = 0

OMB No.: 1205-0028 OMB Expiration Date: 10/31/2022 OMB Burden Minutes: 50

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.