ETA 539 CLAIMS AND EXTENDED BENEFITS DATA

STATE: OR				REGION: 06			REPORT FOR PERIOD ENDING: 03/07/2020			
Week Number			9	Reflected Week Ending				02/29/2020		
IC	4,127	FIC	27	XIC	6	WSIC	136	WSEIC	27	
CW	29,397	FCW	642	XCW	53	WSCW	496	WSECW	120	
EBT	0	EBUI	0	ABT	191	ABUI	185			
AT	31,028	CE	1,906,429	R	1.62	AR	1.695	Р	95.57	
STATUS E				STATUS CHANGE DATE				04/07/2012		

Comments:

Report For Period Ending - 03/07/2020 Week Number - 9 Reflected Week Ending - 02/29/2020

-----AIUR = 1.91

EUC08 Total = 0EUC08 UI = 0----- EUC Tier Breakout ------EUC Tier 1 = 0EUC Tier 2 = 0EUC Tier 3 = 0EUC Tier 4 = 0----- Workshare Breakout ------State UI WSIC = 136State UI WSEIC = 27State UI WSCW = 496 State UI WSECW = 120 UCFE WSIC = 0UCFE WSEIC = 0UCFE WSCW = 0UCFE WSECW = 0UCX WSIC = 0UCX WSEIC = 0UCX WSCW = 0UCX 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.