

**ETA 5159 CLAIMS AND PAYMENT ACTIVITIES**

STATE: OR		REGION: 06			REPORT FOR PERIOD ENDING: 08/31/2021				
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	25,668	17,553	7,262	853	0	1,187	1,399	
UCFE No UI	102	74	52	18	4	0	9	4	
UCX Only	103	39	32	7	0	0	1	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	185,865	8,663	8,666		25	
UCFE No UI	202	0	0	1,097	29	49			
UCX Only	203	0	0	389	3	0			
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	143,110	135,307	5,467	1,179	875	304	619	
Amount	302	57,756,127	55,239,779	2,594,993	719,302	389,238	199,177	257,255	
		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	8,603	8,328	275	34	17	1,952	8	4

## ETA 5159 CLAIMS AND PAYMENT ACTIVITIES [WORKSHARE]

STATE: OR	REGION: 06	REPORT FOR PERIOD ENDING: 08/31/2021
<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>	212	1
	<b>Continued Weeks Claimed</b>	
<b>Items</b>	<b>Intrastate (9)</b>	
<b>201   State UI</b>	9,871	
<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>	12,537	
<b>302   Amount</b>	2,011,410	
	<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>	348	18
<b>SECTION C. FULL TIME EQUIVALENTS</b>		
	<b>Equivalent Initials</b>	<b>Equivalent Weeks Claimed</b>
<b>Number</b>	42	2,186
<b>SECTION D. WORKSHARE COVERAGE</b>		
	<b>Number of Participating Employers</b>	
<b>Number</b>	648	

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

**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.

**ETA 5159 CLAIMS AND PAYMENT ACTIVITIES [EB]**

STATE: OR		REGION: 06			REPORT FOR PERIOD ENDING: 08/31/2021		
<b>SECTION A. CLAIMS ACTIVITIES</b>							
	Line No.	Initial Claims					
		New Intrastate Excluding Transitional (2)	Additional Intrastate (3)	Interstate Filed from Agent State (4)	Interstate Taken as Agent State (5)	Interstate Received as Liable State (7)	
State UI	101	222	6	0	0	0	0
UCFE, No UI	102	0	0	0	0	0	0
UCX Only	103	0	0	2	0	0	0
		Eligibility Reviews			Continued Weeks Claimed		
		Intrastate (8)	Interstate Liable (9)	Intrastate (10)	Interstate Filed from Agent State (11)	Interstate Received as Liable State (13)	
State UI	201	0	0	108	1	0	0
UCFE, No UI	202	0	0	0	0	0	0
UCX Only	203	0	0	0	0	0	0
<b>SECTION B. PAYMENT ACTIVITIES</b>							
Item		Weeks and Amounts Compensated					
		State UI Program			UCFE and UCX Programs		
		All Weeks Compensated (15)	Total Unemployment (16)		Total (18)	UCFE, No UI (19)	UCX Only (20)
Number	301	535	491	0	0	0	0
Amount	302	183,226	166,961	0	0	0	0
		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 (22)	UCFE, No UI (25)	UCX Only (26)	Total (27)	UCFE, No UI (28)	UCX Only (29)
Number	303	50	0	0	6	0	0

**ETA 5159 CLAIMS AND PAYMENT ACTIVITIES (PEUC)**

STATE: OR		REGION: 06			REPORT FOR PERIOD ENDING: 08/31/2021		
<b>SECTION A. CLAIMS ACTIVITIES</b>							
	Line No.	Initial Claims					
		New Intrastate Excluding Transitional (2)	Additional Intrastate (3)	Interstate Filed from Agent State (4)	Interstate Taken as Agent State (5)	Interstate Received as Liable State (7)	
State UI	101	2,754	3,305	68	0	0	
UCFE, No UI	102	15	6	0	0	0	
UCX Only	103	9	1	160	0	0	
		Eligibility Reviews		Continued Weeks Claimed			
		Intrastate (8)	Interstate Liable (9)	Intrastate (10)	Interstate Filed from Agent State (11)	Interstate Received as Liable State (13)	
State UI	201	0	0	307,489	1	7,315	
UCFE, No UI	202	0	0	1,046	0	87	
UCX Only	203	0	0	327	0	0	
<b>SECTION B. PAYMENT ACTIVITIES</b>							
Item		Weeks and Amounts Compensated					
		State UI Program		UCFE and UCX Programs			
		All Weeks Compensated (15)	Total Unemployment (16)	Total (18)	UCFE, No UI (19)	UCX Only (20)	
Number	301	310,673	286,653	2,250	1,099	329	
Amount	302	107,992,688	100,303,908	807,034	406,404	204,107	
		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 (22)	UCFE, No UI (25)	UCX Only (26)	Total (27)	UCFE, No UI (28)	UCX Only (29)
Number	303	2,773	15	9	7,057	54	12

