

ETA 5130 BENEFIT APPEALS

STATE: OR	REGION: 06	REPORT FOR PERIOD ENDING: 07/31/2021
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SECTION A. SINGLE CLAIMANT AND MULTICLAIMANT APPEAL DECISIONS BY PROGRAM AND OTHER DISPOSITIONS

Line No.	UI Decisions		UCFE-NO UI		UCX Only		
	Lower Authority	Higher Authority	Lower Authority	Higher Authority	Lower Authority	Higher Authority	Other Dispositions
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
100	706	64	2	0	1	0	261

SECTION B. CLAIMANTS INVOLVED IN STATE UI APPEALS CASES BY STATUS OF APPEALS

Line No.	Status of Appeals	Single-Claimant Appeals		Multi-Claimant Appeals	
		Lower Authority	Higher Authority	Lower Authority	Higher Authority
		(8)	(9)	(10)	(11)
200	Filed During Month	1,864	64	0	0
210	Disposed of During Month	706	64	0	0

SECTION C. STATE UI APPEALS DECISIONS BY TYPE OF APPELLANT

Line No.	Appeals Decisions	All UI Decisions		Claimant		Employer		Other	
		Lower	Higher	Lower	Higher	Lower	Higher	Lower	Higher
		(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
300	Total	706	64	598	47	108	17	0	0
310	Appellant	277	17	247	11	30	6	0	0

SECTION D. NUMBER OF LOWER AUTHORITY STATE UI APPEALS DECISIONS BY TYPE OF ISSUE

Line No.	Total Decisions	Voluntary Quit	Mis-Conduct	Refusal of		Labor Dispute	Other
				Suitable Work	Not Available		
				(23)	(24)		
400	706	279	213	2	83	0	129

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. 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 5130 BENEFIT APPEALS [EB]

STATE: OR	REGION: 06	REPORT FOR PERIOD ENDING: 07/31/2021
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SECTION A. SINGLE CLAIMANT AND MULTICLAIMANT APPEAL DECISIONS BY PROGRAM AND OTHER DISPOSITIONS

Line No.	UI Decisions		UCFE-NO UI		UCX Only		
	Lower Authority	Higher Authority	Lower Authority	Higher Authority	Lower Authority	Higher Authority	Other Dispositions
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
100	6	2	0	0	0	0	0

SECTION B. CLAIMANTS INVOLVED IN STATE UI APPEALS CASES BY STATUS OF APPEALS

Line No.	Status of Appeals	Single-Claimant Appeals		Multi-Claimant Appeals	
		Lower Authority	Higher Authority	Lower Authority	Higher Authority
		(8)	(9)	(10)	(11)
200	Filed During Month	0	2	0	0
210	Disposed of During Month	6	2	0	0

SECTION C. STATE UI APPEALS DECISIONS BY TYPE OF APPELLANT

Line No.	Appeals Decisions	All UI Decisions		Claimant		Employer		Other	
		Lower	Higher	Lower	Higher	Lower	Higher	Lower	Higher
		(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
300	Total	6	2	5	2	1	0	0	0
310	Appellant	2	0	2	0	0	0	0	0

SECTION D. NUMBER OF LOWER AUTHORITY STATE UI APPEALS DECISIONS BY TYPE OF ISSUE

Line No.	Total Decisions	Voluntary Quit	Mis-Conduct	Refusal of		Labor Dispute	Other
				Suitable Work	Not Available		
				(23)	(24)		
400	(20)	(21)	(22)	(23)	(24)	(25)	(26)
	6	2	3	0	1	0	0

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. 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 5130 PANDEMIC BENEFIT APPEALS (PEUC)

STATE: OR	REGION: 06	REPORT FOR PERIOD ENDING: 07/31/2021
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SECTION A. SINGLE CLAIMANT AND MULTICLAIMANT APPEAL DECISIONS BY PROGRAM AND OTHER DISPOSITIONS

Line No.	UI Decisions		UCFE-NO UI		UCX Only		
	Lower Authority (1)	Higher Authority (2)	Lower Authority (3)	Higher Authority (4)	Lower Authority (5)	Higher Authority (6)	Other Dispositions (7)
100	117	20	0	0	0	0	52

SECTION B. CLAIMANTS INVOLVED IN STATE UI APPEALS CASES BY STATUS OF APPEALS

Line No.	Status of Appeals	Single-Claimant Appeals		Multi-Claimant Appeals	
		Lower Authority (8)	Higher Authority (9)	Lower Authority (10)	Higher Authority (11)
200	Filed During Month	412	15	0	0
210	Disposed of During Month	117	20	0	0

SECTION C. STATE UI APPEALS DECISIONS BY TYPE OF APPELLANT

Line No.	Appeals Decisions	All UI Decisions		Claimant		Employer		Other	
		Lower (12)	Higher (13)	Lower (14)	Higher (15)	Lower (16)	Higher (17)	Lower (18)	Higher (19)
300	Total	117	20	103	15	14	5	0	0
310	Appellant	45	5	39	3	6	2	0	0

SECTION D. NUMBER OF LOWER AUTHORITY STATE UI APPEALS DECISIONS BY TYPE OF ISSUE

Line No.	Total Decisions (20)	Voluntary Quit (21)	Mis-Conduct (22)	Refusal of Work (23)		Labor Dispute (25)	Other (26)
				Suitable (23)	Not Available (24)		
400	117	58	21	1	7	0	30

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

OMB Burden Statement: Section 2116(a), Division B, Title II of the CARES Act states that "Chapter 35 of Title 44, United States Code, (commonly referred to as the "Paperwork Reduction Act of 1995") shall not apply to the amendments made by this subtitle." Therefore these reporting instructions do not require additional OMB approval and the submission of this information is required to obtain or retain benefits under the SSA 303(a)(6).