

OREGON



Frances Online Tutorial for Employees/Claimants

List of Tutorials

- ➡ How to submit an Initial Claim.
- ➡ How to submit a Weekly Claim.
- ➡ How to submit an Additional Claim.

How Employees Establish Unemployment Insurance Claims

You will use Frances Online to submit your initial claim

- The date the initial claim is submitted determines the start date of the claim.
- You are not eligible for benefits until the claim is approved.
- Initial Claims submitted before the Work Share plan is approved will initially be administered as regular unemployment.
 - If you had a regular UI claim before, your initial claim will automatically connect with the Work Share Plan when your employer adds you to their Work Share plan, then you will be eligible for Work Share benefits.



First log on to Frances Online

If you do not have a current claim, you will have the option to “File an Unemployment Claim” or “File a Paid Leave Claim.”

To start your Initial Claim, select “File an Unemployment Insurance Claim.”

PAM BEESLEY

***-**-4825

13000 NW OLD GERMANTOWN RD
PORTLAND OR 97231-2773

Welcome, Pam Beelsey

[Manage My Profile](#)

[Home](#) [Action Center](#) [Settings](#) [I Want To...](#)

Filter

PAM BEESLEY

***-**-4825

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PORTLAND OR 97231-2773

Claimant Services

> [File an Unemployment Insurance claim](#)

> [File a Paid Leave Oregon Claim](#)



You will need to verify your identity by entering your Social Security Number (SSN).

You must check the box to confirm that you will answer questions honestly and accurately.

Select "Next" to continue.

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File a Benefit Claim

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***-**-4825

Identity

You must enter your Social Security Number to verify your identity. Protecting your personal information is important to us.

***-**-4825

You must tell the truth on this application

It is very important that you provide true and accurate information on your application. There may be additional penalties if you intentionally make a false statement or purposefully do not report true and accurate information so you can receive benefits.

What could happen if I do not provide accurate information?

- Our work on your claim may be delayed, which could delay your benefits.
- Your claim can be denied, and you will not receive benefits.
- Your claim can be overpaid, and you will have to repay benefits.
- If you knowingly give us false information, you may have to complete a number of penalty weeks on your claim. This means you can claim these weeks and be eligible for benefits, but you will not be paid for these weeks.
- You can be prosecuted for a crime and be forced to pay penalties and serve time in jail.

Disclaimer

By checking this box, I certify that all statements provided are true and accurate. I understand that these statements are made under the penalty of perjury and that any intentional misrepresentation is considered fraud. If I am found to have committed fraud, I understand that I may be subject to prosecution.

Cancel

< Previous

Next >



This screen shows the information you will need to complete the initial claim.

After reviewing, select “Next” to continue.

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Regular Unemployment Insurance Claim

PAM BEESLEY

***-**-4825



Gather Materials

Unemployment Insurance Oregon Application for Benefits

Before filing your claim, **please gather and be prepared to provide the following information:**

- Your work history for the last 18 months, including
 - Dates of employment
 - Your employers' business names, addresses, and phone numbers. If you worked for the federal government, but were not in the military, you may find this information on an SF-8 or SF-50 form.
 - Your salary from each employer.
- If you are not a citizen of the United States, you will need your Worker Authorization number, or information from your Visa, I-94, or Passport.
- Verify that your listed phone number is where we can reach you during normal business hours (8:00 a.m. – 5:00 p.m. Pacific time).

In order to be eligible for benefits:

- You must be able to work, be available for work, and be actively seeking work each week you claim. It is your responsibility to keep track of your work-seeking activities.
- You must look for work in your labor market and normal occupation. You must stay in the area of your permanent residence for more than half the week. If you are seeking work outside your labor market for more than half the week, you must be willing to relocate to the area where you sought work.
- You must be willing to work all days and hours or shifts normal for your occupation.
- You must be available for full-time, part-time, and temporary work. If you are limited to part-time work because of a permanent or long-term disability, you may still be eligible for benefits.

The Internal Revenue Code and Oregon Administrative Rules require that you disclose your Social Security Number when claiming unemployment compensation. Your Social Security Number will be used to report your benefits to the Internal Revenue Service and Oregon Department of Revenue as income that is taxable. The number will be sent to the Social Security Administration for identity verification. The number will also be used as a record for processing your claim, for statistical purposes, to register you in our electronic job matching system and will be shared with WorkSource Partners for One-Stop services. **The number may be used for state agency debt collection activities** and may be sent to U.S. Bank to issue you a ReliaCard VISA card if you select ReliaCard for your benefit payments.

Cancel

Save Draft

< Previous

Next >



List any other names your current or former employers know you by.

If you have not used another name, select “No.”

When ready to continue, select “Next.”

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Regular Unemployment Insurance Claim

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***-**-4825



Other Name(s)

Claimant Legal Name
PAM BEESLEY

Do your current or past employers know you by a different name?

Yes No

Updated Other Name

First Name * Middle

Last Name *

Title Suffix

Cancel

Save Draft

< Previous

Next >



Make sure we have your current contact information.

Check the box if you would like to give us permission to leave detailed messages with information about your claim.

When complete, select “Next” to continue.

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Regular Unemployment Insurance Claim

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***-**-4825

Gather Materials ✓ Other Name ✓ **Contact**

Contact

Please provide your contact information.

Updated Contact

Email Address *
Required

Primary Phone Country: USA Primary Phone Type * *Required* Primary Phone Number * *Required*

I give the Oregon Employment Department permission to leave a detailed message or questions regarding my claim.

Do you have a second phone number you would like to provide? *

Yes No

Cancel Save Draft

< Previous **Next** >



Confirm the physical address we have for you is correct.

If correct, select “Yes.”

If not correct, select “No” and make necessary corrections.

When complete, select “Next” to continue.

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Regular Unemployment Insurance Claim

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Gather Materials ✓ Other Name ✓ Contact ✓ Physical Address >

Physical Address

Address
13000 NW OLD GERMANTOWN RD PORTLAND OR 97231-2773

Is your physical address correct? *

< Previous >



Confirm the mailing address we have for you is correct.

If correct, select “Yes.”

If not correct, select “No” and make necessary corrections.

When complete, select “Next” to continue.

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Regular Unemployment Insurance Claim

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Gather Materials ✓ Other Name ✓ Contact ✓ Physical Address ✓ Mailing Address >

Mailing Address

Address
13000 NW OLD GERMAN TOWN RD PORTLAND OR 97231-2773

Is your mailing address the same as your physical address? *



Choose if you would like to receive important documents electronically or through the mail.

If you choose to have letters sent electronically, be aware that some letters are still required by law to be sent through the U.S. mail, so check your mail regularly.

When complete, select “Next” to continue.

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Regular Unemployment Insurance Claim

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***-**-4825

Materials Other Name Contact Physical Address Mailing Address Mail Delivery

Mail Delivery Option

Your mail delivery options will determine how you receive correspondence and what your language preference is. You can change your preferences at any time through Frances Online.

Mail Delivery Option
Electronic

Primary Language
English

Are your mail delivery options correct? *

< Previous >



We need to know if you have applied for unemployment insurance in another state, worked outside of Oregon, worked for the federal government, or were on active duty for 180 days or more.

Select “Next” to continue.

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Regular Unemployment Insurance Claim

PAM BEESLEY
***-**-4825

Progress bar: Name (checked), Contact (checked), Physical Address (checked), Mailing Address (checked), Mail Delivery (checked), Wage Type (highlighted)

Wage Type

In the last 12 months, have you filed a claim or applied for benefits from **any state other** than Oregon? *

Yes	No
-----	----

What state did you file in?

Between April 1, 2024 and March 31, 2025 did you:

Work outside the state of Oregon? *

Yes	No
-----	----

Work for the federal government? *

Yes	No
-----	----

Perform any active military service of 180 days or more, other than training with a National Guard or reserve unit? *

Yes	No
-----	----

Buttons: Cancel, Save Draft, < Previous, **Next** >



We need details about your employment history.

If available, a list of previous and/or current employers will appear.

If you see a triangle next to the employer, there may be information missing from the employer's record.

You will need to select the employer's name and update the information before continuing.

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Regular Unemployment Insurance Claim

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***-**-4825

Progress: Contact ✓ Physical Address ✓ Mailing Address ✓ Mail Delivery ✓ Wage Type ✓ Work History (highlighted)

Employment History


We have retrieved your known employment since January 6, 2024.

To complete your employment history:

1. Select each employer's name below to answer questions about your employment.
2. If you do not see an employer that you have worked for since January 6, 2024, add that employer with the Add Employer link.
3. After you have added all employers and answered questions about all the jobs you have had since January 6, 2024, use the Next button to continue.

Employers

Name	Address	Employer Type
There are no employer records.		

 + Add Employer

Buttons: Cancel Save Draft Previous Next



If the employer is listed, skip the next three pages or [continue the tutorial here](#).

If the employer is not listed, follow the next three pages to add the employer manually.

2. If you do not see an employer that you have worked for since January 7, 2024, add that employer with the Add Employer link.

Claim Filing

Previous Employers Show Older Employers

Name	Address	Type
DUNDER MIFFLIN PAPER CO	3385 CENTER ST NE SALEM OR 97301-4609	In-State Employer

Cancel Add a New Employer



Manually add employer

If no previous employers were available, the screen will prompt you to add an employer.

Select “+ Add Employer” to add the employer to the claim.

< PAM BEESLEY

File a Benefit Claim

PAM BEESLEY
***.**-4825

Provide the following information to help decide how to proceed.

Use the Add Employer link to add an employer you worked for since **January 1, 2022**. *

You only need to add one employer at this time. You will be asked to provide the details of your recent employment history on a different screen.

+ Add Employer

Cancel

< Previous

Next >



Select the Employer Type as
“In-State Employer.”

< PAM BEESLEY

Regular Unemployment Insurance Claim

PAM BEESLEY
***-**-4825

✓ Contact ✓ Physical Address ✓ Mailing Address ✓ Mail Delivery ✓ Wage Type > Work History

Employment History

We have retrieved your known employment since January 6, 2024.

To complete your employment history:

1. Select each employer's
2. If you do not see an em
3. After you have added a

Employers

Name
There are no employer records.

+ Add Employer

Claim Filing

Select Employer Type

- In-State Employer
- Self-Employed Individual

Cancel Save Draft < Previous Next >



You can search for the employer by entering the employer's Federal Employer Identification Number (FEIN) or Business Identification Number (BIN) or by searching for the employer by name. The most accurate method is by providing the BIN or FEIN.

You can find the employer's FEIN or BIN on a paystub or W-2. To choose this option, select "ID," enter the number in the text box and select "Search."

If using the employer's name, there may be several employers with similar names. Please ensure the correct employer's name is selected. To choose this option, select "Name," enter the name in the text box and select "Search."

The screenshot shows a web interface for filing a benefit claim. At the top, it says "PAM BEESLEY" and "File a Benefit Claim". Below that, it says "PAM BEESLEY" and "***-**-4825". A message box says "Provide the following information to help decide how to proceed." and "Use the Add Employer link to add an employer you worked for since January 1, 2022." There is a "+ Add Employer" link. Below this is a "Select a Claim" modal window. Inside the modal, there is a "Search for Employer" section with a "Search By" dropdown menu showing "Name" and "ID" options. There is a "Name" text input field and a "Search" button. A red box highlights the "Search for Employer" section. A red circle highlights the close button (X) in the top right corner of the modal window.



Enter the first day you worked for the employer.

For the Work Share employer, choose “Yes,” to the question asking if you are still working for the employer.

For the Work Share employer, enter the current date for “What was the last day of work for this employer?”

For non-Work Share employers, enter the actual last day worked.

When you select “Search for Occupation,” a new screen will open so you can search by keyword.



All Questions ? ×

DUNDER MIFFLIN PAPER CO
3385 CENTER ST NE SALEM OR 97301-4609

What was your first day of work for this employer? *

Required

Are you still working for this employer? *

Yes No

What was your last day of work for this employer? *

Required

Your Occupation

You must provide your occupation. Click the button Search for Occupation to find your occupation.

Search for Occupation

⚠ You have not yet searched for your occupation *

What was your **frequency** of pay with this employer? *

Required

What was your **amount** of pay with this employer? *

Required

What was your job title? *

Required

What were your job duties?

Was the work you did for this employer seasonal? *

Yes No

Cancel Remove OK

Enter the title of your job and select “Search.”

The screenshot shows a user interface for a job application. The background is a form for 'DUNDER MIFFLIN PAPER CO' with fields for 'What was your first day of work for this employer?' (07-May-2018), 'Are you still working for this employer?' (Yes/No), and 'When did you last work for this employer?' (03-Jul-2025). A modal window titled 'Activity Code Search' is overlaid on top. It has a 'Search' section with a 'Keyword *' field containing the text 'Required' and a 'Search' button. The 'Results' section is empty and contains the text 'Enter a keyword to search.' The 'Search' button is circled in red. There are also 'Cancel' and 'Next' buttons visible in the background form.



Choose the job title that best matches your job by selecting the “Code” next the most appropriate title.

Regular Unemploy DUNDER MIFFLIN PAPER CO
PAM BEESLEY 3385 CENTER ST NE SALEM OR 97301-4609
***-**-4825 What was your first day of work for this employer?

Activity Code Search

Search
Keyword
office manager
Search

Page 1 of 2
Filter

Code	Title
11-3012	Administrative Services Managers
11-3031	Financial Managers
11-3061	Purchasing Managers
11-9151	Social and Community Service Managers
11-3021	Computer and Information Systems Managers
11-3071	Transportation, Storage, and Distribution Managers
11-9111	Medical and Health Services Managers
13-1075	Labor Relations Specialists
15-1299	Computer Occupations, All Other
55-1011	Air Crew Officers


Cancel



This screen will show a description of the job code you selected.

If the description is not a good match, select “No” to try again.

If the description is correct, select “Yes” to continue.

 Are you sure you want to select this code?

11-3012 - Administrative Services Managers

Plan, direct, or coordinate one or more administrative services of an organization, such as records and information management, mail distribution, and other office support services. Medical records administrators are included in "Medical and Health Services Managers" (11-9111). Excludes "Facilities Managers" (11-3013) and "Purchasing Managers" (11-3061).

Business Office Manager; Business Unit Manager; Records and Information Manager; Records Management Director; University Registrar



Enter the frequency and amount of your pay.

Enter your job title and a short description of your duties.

The next question asks for more information about your situation and gives you a drop-down menu of choices.

For the Work Share employer, choose “**Still Working – Reduction in hours.**”

All Questions

DUNDER MIFFLIN PAPER CO
3385 CENTER ST NE SALEM OR 97301-4609

What was your first day of work for this employer? *
Required

Are you still working for this employer? *
Yes No

What was your last day of work for this employer? *
Required

Your Occupation
You must provide your occupation. Click the button Search for Occupation to find your occupation.
Search for Occupation

You have not yet searched for your occupation *

What was your frequency of pay with this employer? *
Required

What was your amount of pay with this employer? *
Required

What was your job title? *
Required

What were your job duties?
Required

Was the work you did for this employer seasonal? *
Yes No

Cancel Remove OK

Was the work you did for this employer seasonal? *
Yes No

Which of these describes your situation? *
Required

Leave of Absence
Still Working - No reduction in hours
Still Working - Reduction in hours
Strike or Lockout
Suspended

or



Enter the current date in the field asking when the reduction of hours began.

Work Share claims are valid for 52 weeks.

Enter the date 52 weeks (or one year) from the current date in the field asking when you expect to return to work full-time.

Select “OK” to continue.

Was the work you did for this employer seasonal?


Yes No

Which of these describes your situation?


Still Working - Reduction in hour ▾

You are performing services for this employer, with a reduction in hours.

When did your reduction of hours begin?

11-Mar-2024 

When do you expect to return to work full-time?

07-Mar-2025 



You will see each employer you add on the list.

If you see a triangle next to the employer, there may be information missing from the employer's record.

You will need to select the employer's name and update the information before continuing.

Repeat the previous steps if you need to add more employers. Go back to that process here.

If all employers have been provided, select "Next" to continue.



Regular Unemployment Insurance Claim

PAM BEESLEY
***-**-4825



Employment History

We have retrieved your known employment since January 7, 2024.


To complete your employment history:

1. Select each employer's name below to answer questions about your employment.
2. If you do not see an employer that you have worked for since January 7, 2024, add that employer with the Add Employer link.
3. After you have added all employers and answered questions about all the jobs you have had since January 7, 2024, use the Next button to continue.

Some employers have multiple names and addresses. For the most accurate results, search for your employer using their identification number (ID). Enter your employer's Business Identification Number (BIN) or Federal Employer Identification Number (FEIN). To find this number, check your Form W-2 (Box b) or paystub. If you can't find this number, and you are still employed, ask your employer.

Choosing the wrong employer will cause delays in your claim.

Employers

Name	Address	Employer Type	
 DUNDER MIFFLIN PAPER CO	3385 CENTER ST NE SALEM OR 97301-4609	In-State Employer	Remove

+ Add Employer

Cancel Save Draft < Previous **Next** >

Employers

Name	Address	Employer Type	
 DUNDER MIFFLIN PAPER CO	3385 CENTER ST NE SALEM OR 97301-4609	In-State Employer	Remove

+ Add Employer

Cancel Save Draft < Previous **Next** >

Your position with the Work Share employer may be different from your usual job, or occupation.

Select “Search for Primary Occupation” to search and add your usual occupation.

Progress bar: Address (checked), Mailing Address (checked), Mail Delivery (checked), Wage Type (checked), Work History (checked), Eligibility (current step)

Primary Occupation

What was your primary occupation during the last 18 months? Click the Search for Primary Occupation button to find your primary occupation.

Search for Primary Occupation

Warning: You have not yet searched for your primary occupation. *

Are you seeking and willing to accept this type of work now? *

Yes	No
-----	----

Were you working for a staffing agency, temporary agency, or Professional Employee Organization (PEO) at the time of your most recent separation? *

Yes	No
-----	----

Eligibility

Are you willing to accept the same rate of pay for future work? *

Yes	No
-----	----

Did you turn down any work since you last worked? *

Yes	No
-----	----

Are you attending school? *

Yes	No
-----	----

Are you a United States citizen? *

Yes	No
-----	----

Buttons: Cancel, Save Draft, Previous, Next



Enter the title or commonly used term for your Primary Occupation.

Then select “Search.”

The screenshot shows a web interface for a 'Regular Unemployment Insurance Claim' for PAM BEESLEY. A progress bar at the top indicates steps: Address, Mailing Address, Mail Delivery, Wage Type, Work History, and Eligibility. The 'Primary Occupation' section is active, with a 'Search for Primary Occupation' button. An 'Activity Code Search' modal is open, featuring a search input field with a red circle around it and a 'Search' button. The modal also includes a 'Results' section and a 'Cancel' button.



Choose the job title that best matches your usual occupation by selecting the “Code” next the most appropriate title.

Regular Unemploym DUNDER MIFFLIN PAPER CO
PAM BEESLEY 3385 CENTER ST NE SALEM OR 97301-4609
***-**-4825 What was your first day of work for this employer?

Activity Code Search

Search
Keyword
office manager
Search

Page 1 of 2
Filter

Code	Title
11-3012	Administrative Services Managers
11-3031	Financial Managers
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11-3071	Transportation, Storage, and Distribution Managers
11-9111	Medical and Health Services Managers
13-1075	Labor Relations Specialists
15-1299	Computer Occupations, All Other
55-1011	Air Crew Officers

Cancel



This screen will show a description of the job code you selected.

If the description is not a good match, select “No” to try again.

If the description is correct, select “Yes” to continue.

< PAM BEESLEY

Regular Unemployment Insurance Claim

PAM BEESLEY
***-**-4825

Progress: Address (✓) Mailing Address (✓) Mail Delivery (✓) Wage Type (✓) Work History (✓) Eligibility ()

Are you sure you want to select this code?

11-1011 - Chief Executives

Determine and formulate policies and provide overall direction of companies or private and public sector organizations within guidelines set up by a board of directors or similar governing body. Plan, direct, or coordinate operational activities at the highest level of management with the help of subordinate executives and staff managers.

Admiral; CEO; Chief Executive Officer; Chief Financial Officer; Chief Operating Officer; Chief Sustainability Officer; Commissioner of Internal Revenue; COO; County Commissioner; Government Service Executive; Governor; Mayor; School Superintendent; University President

No Yes

Eligibility

Are you willing to accept the same rate of pay for future work? *

Yes No

Did you turn down any work since you last worked? *

Yes No



The next screen asks questions about your intent to return to your normal schedule with the Work Share employer.

Select “Yes,” to the question asking if you are seeking and willing to accept this type of work now?

Select “Yes,” to the question asking if you are willing to accept the same rate of pay for future work.

After answering the other questions, select “Next” to continue.



< PAM BEESLEY : Frances Rollout Testing

Regular Unemployment Insurance Claim

PAM BEESLEY
***-**-4825

Progress bar: Address (checked), Mailing Address (checked), Mail Delivery (checked), Wage Type (checked), Work History (checked), Eligibility (current step)

Primary Occupation

What was your primary occupation during the last 18 months? Click the Search for Primary Occupation button to find your primary occupation.

[Search for Primary Occupation](#)

11-1011 - Chief Executives

Are you seeking and willing to accept this type of work now?

Yes No

Were you working for a staffing agency, temporary agency, or Professional Employee Organization (PEO) at the time of your most recent separation?

Yes No

Eligibility

Are you willing to accept the same rate of pay for future work?

Yes No

Did you turn down any work since you last worked?

Yes No

Are you attending school?

Yes No

Are you a United States citizen?

Yes No

Buttons: Cancel, Save Draft, < Previous, **Next** >

Respond to the next series of questions as if you are seeking to work for the Work Share employer.

Select “Yes,” to the question asking if you intend to seek work in Oregon?

After answering the other questions, select “Next” to continue.

< PAM BEESLEY

Regular Unemployment Insurance Claim

PAM BEESLEY
***-**-4825

Address Mail Delivery Wage Type Work History Eligibility Additional Questions

Additional Questions

Do you intend to seek work in Oregon?

Yes No

In the last 18 months, did you live in another state and frequently commute to Oregon to work?

Yes No

Are you receiving or will you receive retirement pay (other than Social Security) within the next 12 months?

Yes No

Were you employed as a professional athlete during the last 18 months?

Yes No

Did you work as a U.S. Merchant Marine mariner since October 1, 2022?

Yes No

Were you unable to work because of illness or injury during most of any of the calendar quarters between October 1, 2022 and September 30, 2023?

Yes No

Are you a member of a union that dispatches you to all your work?

Yes No

Cancel Save Draft

< Previous **Next** >



There are several questions to help us better understand the customers and communities we serve.

You may answer “Prefer not to say.”

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Regular Unemployment Insurance Claim

PAM BEESLEY
***-**-4825

Delivery Wage Type Work History Eligibility Additional Questions Voluntary Disclosures

Voluntary Disclosures

Your answers will not be used to make decisions about your claim. To help us better understand the different communities we serve, we encourage you to answer the demographics questions below. You can choose the option 'prefer not to say' for any question.

What is the highest degree or level of school you have completed?

- No school
- Less than high school
- Some high school, no diploma
- High school graduate, including GED or equivalent
- Technical, trade or vocational school
- Some undergraduate education or associate degree
- Bachelor's degree
- Postgraduate degree
- Prefer not to say

Do you have a disability?
You would be considered to have a disability if you have a physical, intellectual, and/or developmental disability or medical condition that substantially limits a major activity, or if you have a history or record of a disability or medical condition. This also includes if you are regarded as having a disability.

- Yes
- No
- Prefer not to say

What is your veteran or military status?

- I am a Veteran of the U.S. Armed Forces, Military Reserves, or National Guard
- I am active U.S. Armed Forces, Military Reserves, or National Guard
- I am not a veteran or I do not have a military status
- Prefer not to say

Cancel Save Draft < Previous **Next** >



Choose how you would like to receive your payments.

If you choose direct deposit, you will need to provide your banking information.

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Regular Unemployment Insurance Claim

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***-**-4825

Ability Additional Questions Voluntary Disclosures Voluntary Disclosures Voluntary Disclosures Payment

Receiving Your Benefits

How would you like to receive your benefit payments if they are approved? You must view the U.S. Bank ReliaCard® agreement, as it is the back-up payment if we aren't able to use direct deposit to send your benefits.

Direct Deposit Debit Card (ReliaCard)

Bank Account Information

Bank Account Type *

Checking
 Savings

Routing Number *

Account Number *

Confirm Account Number *

i You must review the ReliaCard agreement and disclosure before you can proceed to the next step.
[Review the ReliaCard fees \(PDF\)](#)

In case we are unable to deposit your benefit payment using your direct deposit bank account, we will automatically update your benefit payment method to ReliaCard. You must review the ReliaCard agreement and disclosure before you can proceed to the next step. *

Cancel Save Draft < Previous **Next >**



If you choose Debit Card (ReliaCard), you must review the ReliaCard fees (PDF) and check the box confirming you have read the agreement and agree to the fees associated with using the ReliaCard.

When complete, select “Next” to continue.

< PAM BEESLEY

Regular Unemployment Insurance Claim

PAM BEESLEY
***-**-4825

Ability Additional Questions Voluntary Disclosures Voluntary Disclosures Voluntary Disclosures Payment

Receiving Your Benefits

How would you like to receive your benefit payments if they are approved? You must view the U.S. Bank ReliaCard® agreement, as it is the back-up payment if we aren't able to use direct deposit to send your benefits.

Direct Deposit

Debit Card (ReliaCard)

i You must review the ReliaCard agreement and disclosure before you can proceed to the next step.

[Review the ReliaCard fees \(PDF\)](#)

I understand there may be fees associated to using ReliaCard. I understand that ReliaCard requires additional processing time that could result in a delay of receiving benefit payments. I understand that they are sent by postal mail, which means I will receive my first payment several days after it is issued.

Cancel Save Draft

< Previous **Next** >



Choose how much tax you would like withheld from your payments.

Select “Next” to continue.

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Regular Unemployment Insurance Claim

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***-**-4825

Progress bar: Questions (1), Voluntary Disclosures (3), Payment (1), Tax Withholding (1)

Tax Withholding

How would you like us to handle tax withholding on your future payments? *

- I want both 10% for my federal and 6% for my state personal income taxes withheld from my benefit payments.
- I want only 10% of my benefit payments withheld for federal personal income taxes.
- I want only 6% of my benefit payments withheld for state personal income taxes.
- I do not want taxes withheld from my benefit payments.

Buttons: Cancel, Save Draft, < Previous, Next >

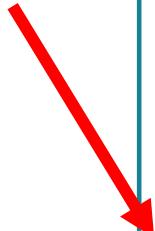


You must enter your name to certify that the information you provided is correct.

Read the requirements so you know what you need to do to remain eligible.

Additionally, you must read and agree to the Work Share requirements by selecting the checkbox provided.

Once selected, select “Next” to continue.



< PAM BEESLEY

Regular Unemployment Insurance Claim

PAM BEESLEY
***-**-4825

Disclosures Voluntary Disclosures Voluntary Disclosures Payment Tax Withholding Certification

Certification

I certify under penalty of perjury that I am a citizen of the United States or was legally authorized to work in the United States during the weeks I am claiming benefits.

I understand the questions I have been asked. My answers are true to the best of my knowledge.

I understand the law provides penalties for making false statements in order to obtain benefits from the Unemployment Insurance Program.

By submitting this application, I hereby register for work and request an initial determination of benefits potentially payable to me. I authorize the Employment Department to obtain and use information from any source I provided for administering unemployment insurance and employment service activities.

I certify that I understand that it is my responsibility to know the information in both the [Unemployment Insurance Claimant Handbook](#) and [Work Share Claimant Handbook](#). More information is on the [Work Share website](#).

By entering your name in the box below, you are certifying the above information. *

Required

Eligibility Notice: Your Work Share Requirements

Your weekly hours must be reduced between 10% and 50%.
You must be available for all work offered through your Work Share employer.
You must remain in contact with your Work Share employer.
You must not be a seasonal worker.

For each week you claim benefits, you must be:

- Able to work;
- Available for full-time, part-time, and temporary work during all of the days and hours typical for your type of work.

The following situations are not common:

You may be considered temporarily unemployed if your hours are reduced more than 50% for four weeks in a row. You must resume work-seeking activities after five consecutive weeks of being considered temporarily unemployed.

I agree to the above statements. *

Cancel Save Draft < Previous **Next** >



Look over the summary page to make sure the information is correct.

You can use the “Previous” button to go back and change information.

When you are ready, select “Submit” to finish your application.



< PAM BEESLEY

Regular Unemployment Insurance Claim

PAM BEESLEY
***-**-4825

Disclosures Voluntary Disclosures Payment Tax Withholding Certification Summary

Summary

You are not yet done. Review the information below, then click Submit when ready.

Regular Unemployment Insurance Claim

Social Security Number : ***-**-4825
Payment Method : Debit Card (ReliaCard)
Withholding Taxes : Withhold federal and state taxes

Contact Information

Other Name Updated : PAM BEESLEY
Email : pambeesley@paper.com
Phone : +1 (503) 187-8613
Physical Address : 13000 NW OLD GERMANTOWN RD PORTLAND OR 97231-2773
Mailing Address : 13000 NW OLD GERMANTOWN RD PORTLAND OR 97231-2773
Mail Delivery Options : Electronic, English

Employment

Name	Separation Reason	Employer Type	First Day Worked	Last Day Worked	Separation Date
DUNDER MIFFLIN PAPER CO		In-State Employer	07-May-2018	11-Mar-2024	

Wage Type

Worked in Another State : No
Worked for Federal Government : No
Worked for Military : No

Eligibility

Primary Occupation : Administrative Services Managers
Seeking and Willing : Yes
Accept Future Pay Rate : Yes
Turned Down Work : No
Attending School : No
United States Citizen : Yes

Attachments

Name	Type	Employer	Size (kB)
There are no attachments.			

Cancel Save Draft < Previous **Submit**

How Employees File Weekly Claims

Employees will use Frances Online to submit their weekly claims

- Claims must be filed during the week (Sunday – Saturday) immediately following the week being claimed.
 - If hours are reduced this week, the weekly claim should be filed between Sunday-Saturday of next week.
- You can claim all weeks:
 - If you are not eligible for benefits, the week will not be paid.
 - If your weekly hours reduction is outside of 10%-50% range, the claim will default to regular UI rules, but can still be claimed.
 - If there is a break between weeks claimed, you will file an “Additional Claim” before resuming your weekly claiming schedule.



Log on to Frances Online.

On your home screen, look for the “Ready to File” message for the week you want to file a claim. Select “File Now.”

If the week you can see says “Not Filed” and “Restart My Claim” is visible in the bottom of the UI Benefits panel, you will need to file an “Additional Claim.”

In this case, please refer to the guide for submitting an additional claim.



ISAAC MCADOO

***-**-8510

6250 BONITA RD

LAKE OSWEGO OR 97035-2256

Welcome, Isaac mcadoo

[Manage My Profile](#)

[Home](#) [Action Center](#) [Settings](#) [I Want To...](#)

Filter

ISAAC MCADOO
***-**-8510
6250 BONITA RD
LAKE OSWEGO OR 97035-2256

Claimant Services > [File a Paid Leave Oregon Claim](#)

Current Unemployment Insurance Benefits
Benefit Begin: 11-May-2025
Eligibility Through: 09-May-2026

Claim for Week of 05-Jul-2025 [File Now](#)
File your weekly claim in order to receive benefits.
Status
Ready to File

Claim for Week of 28-Jun-2025
This week is has not received a weekly claim filing.
Status
Not Filed

Benefit Details > [View Week History](#)
\$812.00 per week from 11-May-2025 to 09-May-2026 > [View or Change Benefit Details](#)
> [Update Benefit Payment Method](#)

Restart My Claim > [Reopen or File an Additional Claim](#)

This screen asks if you were temporarily laid off by your Work Share employer.

Temporary Layoff (TLO) means:

- 0 hours of work offered
- \$0 paid
- Your employer still paying for benefits at same level as normal
- You are still accruing leave at same rate as normal
- If any of these criteria are not met, indicate "No"

If you are TLO for more than 4 consecutive weeks, you will need to begin performing work searches until you return to work.

After answering the question, select "Next" to continue.



< LESLIE HIGGINS

UI Weekly Claim

05-Jul-2025

Regular Unemployment Insurance Benefits

000-0477501

LESLIE HIGGINS

Introduction Work Share

Work Share

Were you temporarily laid off by your Work Share employer last week? *

This screen asks if you missed a work opportunity?

“Missed Work”

- When the employer offers a reasonable opportunity for work and the employee does not accept it (i.e. out for vacation, sick, bereavement, Jury Duty, etc.).

Not “Missed Work”

- Paid Holidays
- Accrued leave solely used to increase hours paid and not due to absence

Missed Work may be allowed if accrued leave is used to cover it completely and is “for the purposes of serving jury duty, the employee being sick, caring for immediate family member who is sick or in response to a declared emergency as defined by OAR 471-030-0071 and the entire week is not “missed.”



< LESLIE HIGGINS

UI Weekly Claim

05-Jul-2025

Regular Unemployment Insurance Benefits

000-0477501

LESLIE HIGGINS

Introduction ✓ Work Share ✓ Job Offerings and Separations

Job Offerings and Separations

Did you fail to accept any offer of work last week? *

Yes	No
-----	----

Did you quit a job last week? *

Yes	No
-----	----

Were you fired from a job last week? *

Yes	No
-----	----

Were you suspended from a job last week? *

Yes	No
-----	----

Cancel < Previous Next >

After answering the other questions, select “Next” to continue.

< LESLIE HIGGINS

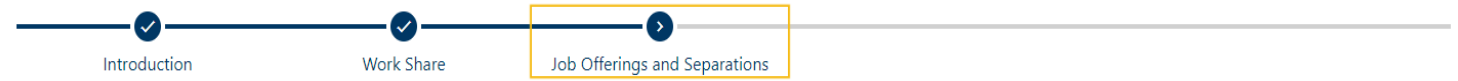
UI Weekly Claim

05-Jul-2025

Regular Unemployment Insurance Benefits

000-0477501

LESLIE HIGGINS



Job Offerings and Separations

Did you fail to accept any offer of work last week? *

Yes	No
-----	----

Did you quit a job last week? *

Yes	No
-----	----

Were you fired from a job last week? *

Yes	No
-----	----

Were you suspended from a job last week? *

Yes	No
-----	----

Cancel

< Previous **Next** >



Answer questions about the hours you worked for the Work Share employer and what you earned.

“Hours Worked” is combination of actual hours work, paid holidays, and any accrued leave you took.

“Earnings” is a combination of pay from actual hours work, paid holidays, and any accrued leave you took.

“Other Pay” reflects earnings not associated with hours worked. Examples include bonuses, commissions, tips, etc.

After answering the questions, select “Next” to continue.



< LESLIE HIGGINS

UI Weekly Claim

05-Jul-2025

Regular Unemployment Insurance Benefits

000-0477501

LESLIE HIGGINS



Work Share Earnings

What are the total gross hours and earnings through the Work Share employer including earnings from leave, bonus, commissions, paid holidays, etc. for the week ending **July 5, 2025**?

Employer Name	Hours Worked	Earnings	Other Pay	Total
AFC RICHMOND	0	0.00	0.00	0.00

Cancel

< Previous

Next >

We need information about any other benefits you received.

After answering the questions, select “Next” to continue.

< LESLIE HIGGINS

UI Weekly Claim

05-Jul-2025
Regular Unemployment Insurance Benefits
000-0477501
LESLIE HIGGINS

Introduction ✓ Work Share ✓ Job Offerings and Separations ✓ Work Share Earnings ✓ Other Benefits >

Other Benefits

Did you apply or receive workers' compensation for an on the job injury? *

Yes No

Other than social security, did you apply for or have a change in retirement plan, pension, or annuity not previously reported? *

Yes No



This screen asks about earnings from other or secondary employment. If you had any secondary earnings, select “yes“ and fill in the form. If you did not, select “no.”

“Hours Worked” is combination of actual hours work, paid holidays, and any accrued leave you took.

“Earnings” is a combination of pay from actual hours worked, paid holidays, and any accrued leave you took.

“Other Pay” shows earnings not associated with hours worked. This could include bonuses, commissions, tips, etc.

After answering the questions, select “Next” to continue.

< LESLIE HIGGINS

UI Weekly Claim

05-Jul-2025
Regular Unemployment Insurance Benefits
000-0477501
LESLIE HIGGINS

Introduction Work Share Job Offerings and Separations Work Share Earnings Other Benefits Earnings

Earnings

Did you have earnings outside your Work Share employer?

Yes No

Employers

[Add Employer](#)

Employer Name	Hours Worked	Earnings	Other Pay	Total

Cancel < Previous **Next** >



We want to make sure you receive important information that we mail.

Check to make sure your mailing address is correct.

Confirm or update your address and select “Next.”

< LESLIE HIGGINS

UI Weekly Claim

05-Jul-2025

Regular Unemployment Insurance Benefits

000-0477501

LESLIE HIGGINS



Address Verification

It is very important that you keep us informed of your current mailing address, as forms mailed by the Employment Department are not forwarded. Before you claim your week of benefits, please review the mailing address we have for you.

14980 SW DIVISION ST BEAVERTON OR 97007-2731

Is your mailing address correct? *

Yes

No

Cancel

< Previous

Next >



Review the information you provided before checking the box to confirm the information is accurate.

Select “Submit” to finish your weekly claim.



< LESLIE HIGGINS

UI Weekly Claim

05-Jul-2025

Regular Unemployment Insurance Benefits

000-0477501

LESLIE HIGGINS



Review

Were you temporarily laid off by your Work Share employer last week?
No

Did you fail to accept any offer of work last week?
No

Did you quit a job last week?
No

Were you fired from a job last week?
No

Were you suspended from a job last week?
No

Did you have earnings outside your Work Share employer?
No

Did you apply or receive workers' compensation for an on the job injury?
No

Other than social security, did you apply for or have a change in retirement plan, pension, or annuity not previously reported?
No

Confirm

By checking this, I certify this claim is true and correct and is filed under penalty of false swearing. *

Cancel

< Previous

Submit

To print the record of your claim, select “Printable View,” and then “OK.”

< LESLIE HIGGINS

Confirmation

Your weekly claim for the week of July 5, 2025 has been sent.

Your confirmation number is: **0-000-181-506**

Question	Answer
Did you fail to accept an offer of work last week?	No
Did you quit a job last week?	No
Were you fired from a job last week?	No
Were you suspended from a job last week?	No
Did you have earnings outside your Work Share employer?	No
Did you apply to receive workers' compensation for an on the job injury?	No
Other than social security, did you apply for or have a change in retirement plan, pension, or annuity not previously reported?	No

Printable View

OK



After you have submitted your claim, your home page could show the claim status that may be one of the following:

“Processing: no issue with the submission, claim should release payment on the following 1-2 days

“In Suspense”: submission has at least one item that requires adjudication

“Denied”: claim will not pay due to issues such as an adjudication decision

"Excess Earnings": claim indicates 40 hours worked or if earnings were too great to qualify for benefits

LESLIE HIGGINS

***-**-6548

14980 SW DIVISION ST
BEAVERTON OR 97007-2731

Welcome, leslie higgins

[Manage My Profile](#)

[Home](#) [Action Center](#) [Settings](#) | [I Want To...](#)

Filter

LESLIE HIGGINS

***-**-6548

14980 SW DIVISION ST
BEAVERTON OR 97007-2731

Claimant Services

> [File a Paid Leave Oregon Claim](#)

Current Unemployment Insurance
Benefits

Benefit Begin: 11-May-2025

Eligibility Through: 09-May-2026

Claim for Week of 05-Jul-2025

The week is currently processing.

Status

Processing

Benefit Details

\$812.00 per week from 11-May-2025 to 09-May-2026

> [View Week History](#)

> [View or Change Benefit Details](#)

> [Update Benefit Payment Method](#)

Restart My Claim

> [Reopen or File an Additional Claim](#)





Additional Claims

- Frances Online supports multiple programs, including Regular UI, Work Share, and SEA.
- If there has been a break between the weeks you have claimed, you must file an Additional Claim.
- “Additional Claims” are a new part of the Work Share process.



Additional Claims

- To begin your claim, you must meet these two criteria:
 - Have sufficient work history over the previous 5 completed quarters to support a claim.
 - Be unemployed through no fault of your own (i.e. did not voluntarily quit, not fired due to violation of policy, etc.).
- If you do not meet these criteria, your unemployment insurance claim will be evaluated against the employer who is responsible for your unemployment.



Why do you need to file an Additional Claim?

- When you stop claiming, we think you returned to work, or you were hired by a new employer.
- When you start claiming again, we need to assess your claim to determine:
 - if you are out of work again through no fault of your own.
 - the employer responsible for your unemployment.
- An Additional Claim collects this information to determine you are eligible for the program.



If you do not see the option to claim a week of benefits when you log on to Frances Online, you will need to file an "Additional Claim" before submitting weekly claims again.

To file the Additional Claim, select "Reopen or File an Additional Claim."

Home Action Center ² Settings I Want To...

Filter

COLIN HUGHES
***-**-3908
21217 NW SAUVIE ISLAND RD
PORTLAND OR 97231-1319

Claimant Services > File a Paid Leave Oregon Claim

Current Unemployment Insurance Benefits
Benefit Begin: 30-Mar-2025
Eligibility Through: 28-Mar-2026
Action Center Items ²

Benefit Details > View Week History
> View or Change Benefit Details
> Update Benefit Payment Method

Restart My Claim > Reopen or File an Additional Claim



You will need to verify your identity by entering your Social Security Number (SSN).

You must check the box to confirm that you will answer questions honestly and accurately.

Select "Next" to continue.

< PAM BEESLEY

File a Benefit Claim

PAM BEESLEY
***-**-4825

Identity

You must enter your Social Security Number to verify your identity. Protecting your personal information is important to us.

***-**-4825



You must tell the truth on this application

It is very important that you provide true and accurate information on your application. There may be additional penalties if you intentionally make a false statement or purposefully do not report true and accurate information so you can receive benefits.

What could happen if I do not provide accurate information?

- Our work on your claim may be delayed, which could delay your benefits.
- Your claim can be denied, and you will not receive benefits.
- Your claim can be overpaid, and you will have to repay benefits.
- If you knowingly give us false information, you may have to complete a number of penalty weeks on your claim. This means you can claim these weeks and be eligible for benefits, but you will not be paid for these weeks.
- You can be prosecuted for a crime and be forced to pay penalties and serve time in jail.

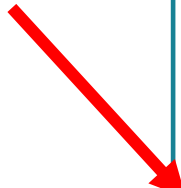
Disclaimer

By checking this box, I certify that all statements provided are true and accurate. I understand that these statements are made under the penalty of perjury and that any intentional misrepresentation is considered fraud. If I am found to have committed fraud, I understand that I may be subject to prosecution.

Cancel

< Previous

Next >



The Additional Claim asks about any employment you had during the period that you did not submit claims.

As a Work Share claimant, select “Yes” to the question asking if you were working for an employer during the period that was not claimed.

As a Work Share claimant, select “No” to the question asking if you were working as an independent contractor or were self-employed during the period that was not claimed.

Select “Next” to continue.

< ISAAC MCADOO

File a Benefit Claim

ISAAC MCADOO
***-**-8510

Provide the following information to help decide how to proceed.

Have you worked for an employer since June 22, 2025?

Yes No

Have you worked as an independent contractor or been self-employed since June 22, 2025?

Yes No



This screen asked additional questions about earnings while you were not claiming.

Answer the questions based on your situation.

Select “Next” to continue.

< ISAAC MCADOO

File a Benefit Claim

ISAAC MCADOO

***-**-8510

Earnings Last Week

During the week of June 29, 2025 through July 5, 2025, did you have gross earnings of \$812 or more? *

Yes	No
-----	----

During the week of June 29, 2025 through July 5, 2025, did you work 40 hours or more? *

Yes	No
-----	----

Cancel

< Previous

Next >



This screen shows the information you will need to complete the Additional Claim.

After reviewing, select “Next” to continue.

< ISAAC MCADOO

Additional Unemployment Insurance Claim

ISAAC MCADOO
***-**-8510

Gather Materials

Unemployment Insurance Oregon Application for Benefits

Please gather and be prepared to provide the following information:

- Your work history for the last 18 months, including
 - Dates of employment
 - Your employers' business names, addresses, and phone numbers. If you worked for a Federal employer that was not the military, you may find this information on an SF-8 or SF-50.
 - Your salary from each employer.

Before restarting your claim, **please review some of the eligibility requirements.**

- You must be able to work, be available for work, and be actively seeking work each week you claim. It is your responsibility to keep track of your work search efforts.
- You must look for work in your labor market and normal occupation. You must stay in the area of your permanent residence for the major portion of the week unless you are seeking work elsewhere.
- You must be willing to work all days and shifts normal for your occupation.
- You must be available for full-time, part-time, and temporary work. If you are limited to part time work because of a permanent or long-term disability, you may still be eligible for benefits.

Cancel

Save Draft

< Previous

Next >



You must report all work you did during the time you were not claiming.

Enter your employment history by selecting “+ Add Employer” to choose an employer.

Repeat the process until you have added all the employers you worked for during that time.

This process will be very similar to the process used for filing an initial claim.

Additional Unemployment Insurance Claim

ISAAC MCADOO
***-**-8510

Progress bar: Gather Materials (checked), Subsequent Employment (checked), Work History (current step)


Employment History Since Your Previous Claim

We have retrieved your known employment since your last active claim.

To complete your employment history:

1. Select each employer's name below to answer questions about your employment.
2. If you do not see an employer that you have worked for since June 22, 2025, add that employer with the Add Employer link.
3. After you have added all employers and answered questions about all the jobs you have had since June 22, 2025, use the Next button to continue.

Name	Address	Employer Type
There are no employer records.		

 [+ Add Employer](#)

Buttons: Cancel, Save Draft, Previous, Next



If available, a list of previous and/or current employers will appear.

Choose the employer by selecting the employer's name.

If the employer is listed, skip the next three pages or [continue the tutorial here](#).

If an employer is not listed, follow the next three pages to add the employer manually.

2. If you do not see an employer that you have worked for since January 7, 2024, add that employer with the Add Employer link.

Claim Filing

Previous Employers Show Older Employers

Name	Address	Type
DUNDER MIFFLIN PAPER CO	3385 CENTER ST NE SALEM OR 97301-4609	In-State Employer

Cancel Add a New Employer



Manually add employer

If no previous employers were available, the screen will prompt you to add an employer.

Select “+ Add Employer” to add the employer to the claim.

< PAM BEESLEY

File a Benefit Claim

PAM BEESLEY
***.**-4825

Provide the following information to help decide how to proceed.

Use the Add Employer link to add an employer you worked for since **January 1, 2022**. *

You only need to add one employer at this time. You will be asked to provide the details of your recent employment history on a different screen.

[+ Add Employer](#)

Cancel < Previous **Next** >



Select the Employer Type as
“In-State Employer.”

Regular Unemployment Insurance Claim
PAM BEESLEY
***-**-4825

Progress: Contact ✓ Physical Address ✓ Mailing Address ✓ Mail Delivery ✓ Wage Type ✓ Work History

Employment History

We have retrieved your known employment since January 6, 2024.

To complete your employment history:

1. Select each employer's...
2. If you do not see an em...
3. After you have added a...

Employers

Name
There are no employer records.

Claim Filing

Select Employer Type

- In-State Employer
- Self-Employed Individual

+ Add Employer

Cancel Save Draft Previous Next



You can search for the employer by entering the employer's Federal Employer Identification Number (FEIN) or Business Identification Number (BIN) or by searching for the employer by name. The most accurate method is by providing the BIN or FEIN.

You can find the employer's FEIN or BIN on a paystub or W-2. To choose this option, select "ID," enter the number in the text box and select "Search."

If using the employer's name, be aware there may be several employers with similar names. Please ensure the correct employer's name is selected. To choose this option, select "Name," enter the name in the text box and select "Search."

A screenshot of a web application interface for filing a benefit claim. The page title is "File a Benefit Claim" and the user is identified as "PAM BEESLEY" with a partial Social Security number "***-**-4825". A grey box contains instructions: "Provide the following information to help decide how to proceed. Use the Add Employer link to add an employer you worked for since January 1, 2022. * You only need to add one employer at this time. You will be asked to provide the details of your recent employment history on a different screen." A "+ Add Employer" link is in the bottom right. Below this is a white modal window titled "Select a Claim" with a close button (circled in red). The modal has two sections: "Search for Employer" and "Results". The "Search for Employer" section is highlighted with a red box and contains a "Search By" dropdown with "Name" and "ID" options, a "Name" text input field, and a "Search" button. The "Results" section is currently empty.

Enter the first day you worked for the employer.

For the Work Share employer, choose “Yes,” to the question if you are still working for the employer.

For the Work Share employer, enter the current date for “What was the last day of work for this employer.”

For non-Work Share employers, enter the actual last day worked.

When you select “Search for Occupation,” a new screen will open so you can search by keyword.



All Questions



DUNDER MIFFLIN PAPER CO
3385 CENTER ST NE SALEM OR 97301-4609

What was your first day of work for this employer? *

Required

Are you still working for this employer? *

Yes No

What was your last day of work for this employer? *

Required

Your Occupation

You must provide your occupation. Click the button Search for Occupation to find your occupation.

[Search for Occupation](#)

⚠ You have not yet searched for your occupation *

What was your **frequency** of pay with this employer? *

Required

What was your **amount** of pay with this employer? *

Required

What was your job title? *

Required

What were your job duties?

Was the work you did for this employer seasonal? *

Yes No

Cancel

Remove

OK

Enter the title of your job and select “Search.”

The screenshot shows a user interface for a job application. The background is a form for 'DUNDER MIFFLIN PAPER CO' with fields for 'What was your first day of work for this employer?' (07-May-2018), 'Are you still working for this employer?' (Yes/No), and 'When did you last work for this employer?' (03-Jul-2025). An 'Activity Code Search' modal is overlaid on top. The modal has a 'Search' section with a 'Keyword *' field containing the text 'Required' and a 'Search' button. The 'Results' section is empty and contains the text 'Enter a keyword to search.' The 'Search' button is circled in red. There are also 'Cancel' and 'Next' buttons visible in the background form.



Choose the job title that best matches your job by selecting the “Code” next the most appropriate title.

Regular Unemploym DUNDER MIFFLIN PAPER CO
PAM BEESLEY 3385 CENTER ST NE SALEM OR 97301-4609
***-**-4825 What was your first day of work for this employer?

Activity Code Search

Search
Keyword
office manager
Search

Page 1 of 2
Filter

Code	Title
11-3012	Administrative Services Managers
11-3031	Financial Managers
11-3061	Purchasing Managers
11-9151	Social and Community Service Managers
11-3021	Computer and Information Systems Managers
11-3071	Transportation, Storage, and Distribution Managers
11-9111	Medical and Health Services Managers
13-1075	Labor Relations Specialists
15-1299	Computer Occupations, All Other
55-1011	Air Crew Officers


Cancel



This screen will show a description of the job code you selected.

If the description is not a good match, select “No” to try again.

If the description is correct, select “Yes” to continue.

 Are you sure you want to select this code?

11-3012 - Administrative Services Managers

Plan, direct, or coordinate one or more administrative services of an organization, such as records and information management, mail distribution, and other office support services. Medical records administrators are included in "Medical and Health Services Managers" (11-9111). Excludes "Facilities Managers" (11-3013) and "Purchasing Managers" (11-3061).

Business Office Manager; Business Unit Manager; Records and Information Manager; Records Management Director; University Registrar



Enter the frequency and amount of your pay.

Enter your Job Title and a short description of your duties.

The next question asks for more information about your situation and gives you a drop-down menu of choices.

For the Work Share employer, choose “**Still Working – Reduction in hours.**”

All Questions

DUNDER MIFFLIN PAPER CO
3385 CENTER ST NE SALEM OR 97301-4609
What was your first day of work for this employer? *
Required
Are you still working for this employer? *
Yes No
What was your last day of work for this employer? *
Required

Your Occupation
You must provide your occupation. Click the button Search for Occupation to find your occupation.
Search for Occupation
⚠ You have not yet searched for your occupation *

What was your frequency of pay with this employer? *
Required
What was your amount of pay with this employer? *
Required
What was your job title? *
Required
What were your job duties?
Was the work you did for this employer seasonal? *
Yes No

Cancel Remove OK

Was the work you did for this employer seasonal? *
Yes No

Which of these describes your situation? *
Required
Leave of Absence
Still Working - No reduction in hours
Still Working - Reduction in hours
Strike or Lockout
Suspended

or



Enter the current date in the field asking when the reduction of hours began.

Work Share claims are valid for 52 weeks. Enter the date 52 weeks (or one year) from the current date in the field asking when you expect to return to work full-time.

Select “OK” to continue.


Was the work you did for this employer seasonal?

Which of these describes your situation?


Still Working - Reduction in hour ▾

You are performing services for this employer, with a reduction in hours.

When did your reduction of hours begin?

11-Mar-2024 

When do you expect to return to work full-time?

07-Mar-2025 



You will see each employer you add on the list.

If you see a triangle next to the employer, there may be information missing from the employer's record.

You will need to select the employer's name and update the information before continuing.

Repeat the previous steps if you need to add more employers. [Go back to that process here.](#)

If all employers have been provided, select "Next" to continue.



Regular Unemployment Insurance Claim

PAM BEESLEY
***-**-4825



Employment History

We have retrieved your known employment since January 7, 2024.


To complete your employment history:

1. Select each employer's name below to answer questions about your employment.
2. If you do not see an employer that you have worked for since January 7, 2024, add that employer with the Add Employer link.
3. After you have added all employers and answered questions about all the jobs you have had since January 7, 2024, use the Next button to continue.

Some employers have multiple names and addresses. For the most accurate results, search for your employer using their identification number (ID). Enter your employer's Business Identification Number (BIN) or Federal Employer Identification Number (FEIN). To find this number, check your Form W-2 (Box b) or paystub. If you can't find this number, and you are still employed, ask your employer.

Choosing the wrong employer will cause delays in your claim.

Employers

Name	Address	Employer Type	
 DUNDER MIFFLIN PAPER CO	3385 CENTER ST NE SALEM OR 97301-4609	In-State Employer	Remove

+ Add Employer

Cancel Save Draft < Previous **Next** >

Employers

Name	Address	Employer Type	
 DUNDER MIFFLIN PAPER CO	3385 CENTER ST NE SALEM OR 97301-4609	In-State Employer	Remove

+ Add Employer

Cancel Save Draft < Previous **Next** >

You must enter your name to certify that the information you provided is correct.

Read the requirements so you know what you need to do to remain eligible.

Additionally, you must read and agree to the Work Share requirements by selecting the checkbox provided.

Once selected, select “Next” to continue.

< ISAAC MCADOO

Additional Unemployment Insurance Claim

ISAAC MCADOO
***-**-8510

Gather Materials

Subsequent Employment

Work History

Certification

Certification

I understand the questions I have been asked. My answers are true to the best of my knowledge.

I understand the law provides penalties for making false statements in order to obtain benefits from the Unemployment Insurance Program.

I certify that I understand that it is my responsibility to know the information in both the [Unemployment Insurance Claimant Handbook](#) and [Work Share Claimant Handbook](#). More information is on the [Work Share website](#).

By entering your name in the box below, you are certifying the above information.

Required

Eligibility Notice: Your Work Share Requirements

Your weekly hours must be reduced between 10% and 50%.

You must be available for all work offered through your Work Share employer.

You must remain in contact with your Work Share employer.

You must not be a seasonal worker.

For each week you claim benefits, you must be:

- Able to work;
- Available for full-time, part-time, and temporary work during all of the days and hours typical for your type of work.

The following situations are not common:

You may be considered temporarily unemployed if your hours are reduced more than 50% for four weeks in a row. You must resume work-seeking activities after five consecutive weeks of being considered temporarily unemployed.

I agree to the above statements. *

Cancel

Save Draft

< Previous

Next >



Look over the summary page to make sure the information is correct.

You can use the “Previous” button to go back and change information.

When you are ready, select “Submit” to finish your application.

< ISAAC MCADOO

Additional Unemployment Insurance Claim

ISAAC MCADOO
***-**-8510

Gather Materials Subsequent Employment Work History Certification **Summary**

Summary

You are not yet done. Review the information below, then click Submit when ready.

Additional Unemployment Insurance Claim

Social Security Number : ***-**-8510

Employment

Name	Separation Reason	Employer Type	First Day Worked	Last Day Worked	Separation Date
AFC RICHMOND		In-State Employer	05-Feb-2020	04-Jul-2025	

Wage Type

Worked in Another State : No
Worked for Federal Government : No
Worked for Military : No

Attachments

Name	Type	Employer	Size (k)
There are no attachments.			

Cancel Save Draft < Previous **Submit**



After you complete the additional claim process, the weekly claim will reflect “Ready to File.”

You can select “File Now” to submit a weekly claim.

The screenshot displays the Work Share portal interface. At the top, there is a navigation bar with links for Home, Action Center (with a notification badge), Settings, and I Want To... Below this is a search filter bar. The main content area is divided into sections. The first section is for COLIN HUGHES, showing his contact information and a link to 'Claimant Services' with a sub-link 'File a Paid Leave Oregon Claim'. The second section is titled 'Current Unemployment Insurance Benefits' and includes details such as 'Benefit Begin: 11-May-2025', 'Eligibility Through: 09-May-2026', and 'Action Center Items' with a notification badge. A red arrow points from this section to the 'Ready to File' status. The 'Ready to File' status is highlighted in orange and includes a sub-link 'File Now' which is circled in red. Below this, there are sections for 'Benefit Details' (showing \$812.00 per week) and 'Restart My Claim'.

