

## Work Share Issue Report Form

**Today's date:**

**Employee Name:**

**City Bureau:**

**PERNR (if known):**

**Employee Email:**

**Employee phone number:**

Please note, if you received a Wage and Potential Benefit Report that appears to be inaccurate or states that you are ineligible for benefits because of your work history, please wait two weeks for the Oregon Employment Department to send an updated report before submitting this form.

**Issue Description (be as specific as possible):**

By submitting this form the employee is certifying that the information is correct to the best of their knowledge.

Please send this form with supporting documents to [Inboxworkshare@portlandoregon.gov](mailto:Inboxworkshare@portlandoregon.gov). If your issue relates to the Wage and Potential Benefit Report, please submit a picture or copy along with this form. Please contact your bureau timekeeper for assistance if you do not have access to email.