VALIDATION POPULATION 8

LOWER AUTHORITY APPEALS DECISIONS
DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD
SORT BY TIME LAPSE DAYS ASCENDING

Subpop	Report, Line, and Column	2 (Step 1E) (Rule 1) SSN	3 (Step 1E) (Rule 2) Docket Number Unique ID	4 (Step 2) Type of UI Program	5 (Step 4) Program Type	6 (Step 5) Intrastate/ Interstate	7 (Step 24A) (Rule 1) Appeal Level	8 (Step 25A) (Step 25B) Type of Appeal (Single or Multiclaimant)	9 (Step 25B) Number of Claimants in Multiclaimant Appeal	10 (Step 26) Appellant	11 (Step 27A) (Step 27B) In Favor of Appellant	12 (Step 32) Filed Date	13 (Step 28) Decision Date	14 (Step 30A) (Step 30B) Disposed of by Decision	15 (Step 31) Issue Code
SINGLE CLAIMANT LOWER AUTHORITY APPEALS DECISIONS (8.1 through 8.44) 1) Random sample: 60 or 200 (includes review of folders); 2) Supplemental sample--missing strata (8.33 through 8.40 only); 3) Supplemental sample--outliers															
8.1	ar5130: A-100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-21 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Claimant	Y	Required	Required		VL
8.2	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-21 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Employer	Y	Required	Required		VL
8.3	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-21 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Claimant	N	Required	Required		VL
8.4	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-21 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Employer	N	Required	Required		VL
8.5	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-21 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Claimant	Y	Required	Required		VL
8.6	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-21 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Employer	Y	Required	Required		VL
8.7	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-21 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Claimant	N	Required	Required		VL

VALIDATION POPULATION 8

LOWER AUTHORITY APPEALS DECISIONS
DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD
SORT BY TIME LAPSE DAYS ASCENDING

Subpop	Report, Line, and Column	2 (Step 1E) (Rule 1) SSN	3 (Step 1E) (Rule 2) Docket Number Unique ID	4 (Step 2) Type of UI Program	5 (Step 4) Program Type	6 (Step 5) Intrastate/ Interstate	7 (Step 24A) (Rule 1) Appeal Level	8 (Step 25A) (Step 25B) Type of Appeal (Single or Multiclaimant)	9 (Step 25B) Number of Claimants in Multiclaimant Appeal	10 (Step 26) Appellant	11 (Step 27A) (Step 27B) In Favor of Appellant	12 (Step 32) Filed Date	13 (Step 28) Decision Date	14 (Step 30A) (Step 30B) Disposed of by Decision	15 (Step 31) Issue Code
8.8	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-21 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Employer	N	Required	Required		VL
8.9	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-22 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Claimant	Y	Required	Required		MC
8.10	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-22 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Employer	Y	Required	Required		MC
8.11	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-22 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Claimant	N	Required	Required		MC
8.12	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-22 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Employer	N	Required	Required		MC
8.13	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-22 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Claimant	Y	Required	Required		MC
8.14	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-22 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Employer	Y	Required	Required		MC
8.15	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-22 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Claimant	N	Required	Required		MC

VALIDATION POPULATION 8

LOWER AUTHORITY APPEALS DECISIONS
DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD
SORT BY TIME LAPSE DAYS ASCENDING

Subpop	Report, Line, and Column	2 (Step 1E) (Rule 1) SSN	3 (Step 1E) (Rule 2) Docket Number Unique ID	4 (Step 2) Type of UI Program	5 (Step 4) Program Type	6 (Step 5) Intrastate/ Interstate	7 (Step 24A) (Rule 1) Appeal Level	8 (Step 25A) (Step 25B) Type of Appeal (Single or Multiclaimant)	9 (Step 25B) Number of Claimants in Multiclaimant Appeal	10 (Step 26) Appellant	11 (Step 27A) (Step 27B) In Favor of Appellant	12 (Step 32) Filed Date	13 (Step 28) Decision Date	14 (Step 30A) (Step 30B) Disposed of by Decision	15 (Step 31) Issue Code
8.16	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-22 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Employer	N	Required	Required		MC
8.17	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-23 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Claimant	Y	Required	Required		Suit
8.18	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-23 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Employer	Y	Required	Required		Suit
8.19	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-23 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Claimant	N	Required	Required		Suit
8.20	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-23 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Employer	N	Required	Required		Suit
8.21	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-23 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Claimant	Y	Required	Required		Suit
8.22	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-23 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Employer	Y	Required	Required		Suit
8.23	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-23 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Claimant	N	Required	Required		Suit

VALIDATION POPULATION 8

LOWER AUTHORITY APPEALS DECISIONS
DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD
SORT BY TIME LAPSE DAYS ASCENDING

Subpop	Report, Line, and Column	2 (Step 1E) (Rule 1) SSN	3 (Step 1E) (Rule 2) Docket Number Unique ID	4 (Step 2) Type of UI Program	5 (Step 4) Program Type	6 (Step 5) Intrastate/ Interstate	7 (Step 24A) (Rule 1) Appeal Level	8 (Step 25A) (Step 25B) Type of Appeal (Single or Multiclaimant)	9 (Step 25B) Number of Claimants in Multiclaimant Appeal	10 (Step 26) Appellant	11 (Step 27A) (Step 27B) In Favor of Appellant	12 (Step 32) Filed Date	13 (Step 28) Decision Date	14 (Step 30A) (Step 30B) Disposed of by Decision	15 (Step 31) Issue Code
8.24	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-23 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Employer	N	Required	Required		Suit
8.25	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-24 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Claimant	Y	Required	Required		A & A
8.26	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-24 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Employer	Y	Required	Required		A & A
8.27	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-24 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Claimant	N	Required	Required		A & A
8.28	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-24 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Employer	N	Required	Required		A & A
8.29	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-24 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Claimant	Y	Required	Required		A & A
8.30	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-24 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Employer	Y	Required	Required		A & A
8.31	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-24 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Claimant	N	Required	Required		A & A

VALIDATION POPULATION 8

LOWER AUTHORITY APPEALS DECISIONS
DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD
SORT BY TIME LAPSE DAYS ASCENDING

Subpop	Report, Line, and Column	2 (Step 1E) (Rule 1) SSN	3 (Step 1E) (Rule 2) Docket Number Unique ID	4 (Step 2) Type of UI Program	5 (Step 4) Program Type	6 (Step 5) Intrastate/ Interstate	7 (Step 24A) (Rule 1) Appeal Level	8 (Step 25A) (Step 25B) Type of Appeal (Single or Multiclaimant)	9 (Step 25B) Number of Claimants in Multiclaimant Appeal	10 (Step 26) Appellant	11 (Step 27A) (Step 27B) In Favor of Appellant	12 (Step 32) Filed Date	13 (Step 28) Decision Date	14 (Step 30A) (Step 30B) Disposed of by Decision	15 (Step 31) Issue Code
8.32	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-24 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Employer	N	Required	Required		A & A
8.33	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-26 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Claimant	Y	Required	Required		Other
8.34	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-26 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Employer	Y	Required	Required		Other
8.35	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-26 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Claimant	N	Required	Required		Other
8.36	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-26 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S	Must be blank or 0	Employer	N	Required	Required		Other
8.37	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-26 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Claimant	Y	Required	Required		Other
8.38	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-26 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Employer	Y	Required	Required		Other
8.39	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-26 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Claimant	N	Required	Required		Other

VALIDATION POPULATION 8

LOWER AUTHORITY APPEALS DECISIONS
DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD
SORT BY TIME LAPSE DAYS ASCENDING

Subpop	Report, Line, and Column	2 *(Step 1E) (Rule 1)* SSN	3 *(Step 1E) (Rule 2)* Docket Number Unique ID	4 *(Step 2)* Type of UI Program	5 *(Step 4)* Program Type	6 *(Step 5)* Intrastate/ Interstate	7 *(Step 24A) (Rule 1)* Appeal Level	8 *(Step 25A) (Step 25B)* Type of Appeal (Single or Multiclaimant)	9 *(Step 25B)* Number of Claimants in Multiclaimant Appeal	10 *(Step 26)* Appellant	11 *(Step 27A) (Step 27B)* In Favor of Appellant	12 *(Step 32)* Filed Date	13 *(Step 28)* Decision Date	14 *(Step 30A) (Step 30B)* Disposed of by Decision	15 *(Step 31)* Issue Code
8.40	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-26 9054A-C3	Required	Required	Regular UI or Workshare	UI	Interstate	Lower	S	Must be blank or 0	Employer	N	Required	Required		Other
8.41[a]	ar5130A-100-3 9054A-C2	Required	Required	Regular UI or Workshare	UCFE	Intrastate	Lower	S	Must be blank or 0			Required	Required		
8.42[a]	ar5130A-100-3 9054A-C3	Required	Required	Regular UI or Workshare	UCFE	Interstate	Lower	S	Must be blank or 0			Required	Required		
8.43[a]	ar5130A-100-5 9054A-C2	Required	Required	Regular UI or Workshare	UCX	Intrastate	Lower	S	Must be blank or 0			Required	Required		
8.44[a]	ar5130A-100-5 9054A-C3	Required	Required	Regular UI or Workshare	UCX	Interstate	Lower	S	Must be blank or 0			Required	Required		
MULTI-CLAIMANT LOWER AUTHORITY APPEALS DECISIONS (8.45 through 8.55) 1) Minimum sample: First two cases from each subpopulation (includes review of folders)															
8.45	ar5130: A 100-1; B 210-10 ar5130C: 300-14; 310-14 ar5130D-400-25 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	M-1 or M-Lead	≥ 1	Claimant	Y	Required	Required		Labor Disp
8.46	ar5130: A 100-1; B 210-10 ar5130C: 300-16; 310-16 ar5130D-400-25 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	M-1 or M-Lead	≥ 1	Employer	Y	Required	Required		Labor Disp
8.47	ar5130: A 100-1; B 210-10 ar5130: C 300-14; D 400-25 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	M-1 or M-Lead	≥ 1	Claimant	N	Required	Required		Labor Disp

VALIDATION POPULATION 8

LOWER AUTHORITY APPEALS DECISIONS
DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD
SORT BY TIME LAPSE DAYS ASCENDING

Subpop	Report, Line, and Column	2 (Step 1E) (Rule 1) SSN	3 (Step 1E) (Rule 2) Docket Number Unique ID	4 (Step 2) Type of UI Program	5 (Step 4) Program Type	6 (Step 5) Intrastate/ Interstate	7 (Step 24A) (Rule 1) Appeal Level	8 (Step 25A) (Step 25B) Type of Appeal (Single or Multiclaimant)	9 (Step 25B) Number of Claimants in Multiclaimant Appeal	10 (Step 26) Appellant	11 (Step 27A) (Step 27B) In Favor of Appellant	12 (Step 32) Filed Date	13 (Step 28) Decision Date	14 (Step 30A) (Step 30B) Disposed of by Decision	15 (Step 31) Issue Code
8.48	ar5130: A 100-1; B 210-10 ar5130: C 300-16; D 400-25 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	M-1 or M-Lead	≥ 1	Employer	N	Required	Required		Labor Disp
8.49	ar5130: A 100-1; B 210-10 ar5130C: 300-14; 310-14 ar5130D-400-26 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	M-1 or M-Lead	≥ 1	Claimant	Y	Required	Required		Other
8.50	ar5130: A 100-1; B 210-10 ar5130C: 300-16; 310-16 ar5130D-400-26 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	M-1 or M-Lead	≥ 1	Employer	Y	Required	Required		Other
8.51	ar5130: A 100-1; B 210-10 ar5130: C 300-14; D 400-26 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	M-1 or M-Lead	≥ 1	Claimant	N	Required	Required		Other
8.52	ar5130: A 100-1; B 210-10 ar5130: C 300-16; D 400-26 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	M-1 or M-Lead	≥ 1	Employer	N	Required	Required		Other
8.53	ar5130B-210-10	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	M-Nonlead	1			Required	Required		VL or MC or Suit or A & A or Other or Labor Disp
8.54	ar5130A: 100-1 ar5130B: 210-8; 210-10 ar5130C: 300-18; 310-18 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S or M-1 or M-Lead	≥ 1 or blank or 0	Other	Y	Required	Required		VL or MC or Suit or A & A or Other or Labor Disp

VALIDATION POPULATION 8

LOWER AUTHORITY APPEALS DECISIONS
DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD
SORT BY TIME LAPSE DAYS ASCENDING

Subpop	Report, Line, and Column	2 *(Step 1E) (Rule 1)* SSN	3 *(Step 1E) (Rule 2)* Docket Number Unique ID	4 *(Step 2)* Type of UI Program	5 *(Step 4)* Program Type	6 *(Step 5)* Intrastate/ Interstate	7 *(Step 24A) (Rule 1)* Appeal Level	8 *(Step 25A) (Step 25B)* Type of Appeal (Single or Multiclaimant)	9 *(Step 25B)* Number of Claimants in Multiclaimant Appeal	10 *(Step 26)* Appellant	11 *(Step 27A) (Step 27B)* In Favor of Appellant	12 *(Step 32)* Filed Date	13 *(Step 28)* Decision Date	14 *(Step 30A) (Step 30B)* Disposed of by Decision	15 *(Step 31)* Issue Code
8.55	ar5130A: 100-1 ar5130B: 210-8; 210-10 ar5130C: 300-18 9054A-C2	Required	Required	Regular UI or Workshare	UI	Intrastate	Lower	S or M-1 or M-Lead	≥ 1 or blank or 0	Other	N	Required	Required		VL or MC or Suit or A & A or Other or Labor Disp

[a]If a UCFE or UCX multiclaimant appeal is decided, report as a separate population and manually validate the 5130 report.

RELATIONSHIP BETWEEN SUBPOPULATIONS IN POPULATION 8 AND ETA AR5130 REPORTING CELLS

SECTION A. Single Claimant and Multiclaimant Appeals Case Decisions and Other Dispositions

	UI Decisions	UCFE-No UI Decisions	UCX Only Decisions
Line No.	Lower Authority (1)	Lower Authority (3)	Lower Authority (5)
100	1-40 45-52 54-55	41-42[a]	43-44[a]

SECTION B. Claimants Involved in State UI Appeals Cases by Status of Appeals

		Single Claimant Appeals	Multi-Claimant Appeals
Line No.	Status of Appeals	Lower Authority (8)	Lower Authority (10)
210	Disposed of During Month by Decision	1-40 54-55[b]	45-53

SECTION C. State UI Appeals Decisions by Type of Appellant

		Claimant	Employer	Other
Line No.	UI Appeals Decisions	Lower Authority (14)	Lower Authority (16)	Lower Authority (18)
300	Total	1, 3, 5, 7 9, 11, 13, 15 17, 19, 21, 23 25, 27, 29, 31 33, 35, 37, 39 45, 47, 49, 51	2, 4, 6, 8 10, 12, 14, 16 18, 20, 22, 24 26, 28, 30, 32 34, 36, 38, 40 46, 48, 50, 52	54-55
310	In favor of Appellant	1, 5. 9, 13 17, 21, 25, 29 33, 37, 45, 49	2, 6, 10, 14 18, 22, 26, 30 34, 38, 46, 50	54

SECTION D. Number of Lower Authority State UI Appeals Decisions by Issue

Line No.	Voluntary Quit (21)	Misconduct (22)	Refusal of Suitable Work (23)	Not Able or Available (24)	Labor Dispute (25)	Other (26)
400	1-8	9-16	17-24	25-32	45-48	33-40 49-52

[a]Also includes multiclaimant UCFE and UCX decision subpopulations that are not listed.

[b]Single claimant only

[c]Multiclaimant only

RELATIONSHIP BETWEEN SUBPOPULATIONS IN POPULATION 8
AND ETA 9054A REPORTING CELLS

Section A. Lower Authority Appeals Time Lapse from Date Filed to Decision Date

Days	Intrastate	Interstate
Total	C2	C3
	1-4 9-12 17-20 25-28 33-36 41, 43 45-52 54-55	5-8 13-16 21-24 29-32 37-40 42, 44