

Compensation of Hospital Employees



DOH 346-095 (REV 08/01/2016)

Calendar Year:		2021							
Entity Name:		Whitman County Public Hospital District No. 3 dba Whitman Hospital & Medical Clinics							
(A) Employee Name (who does not have direct patient care responsibilities)	Indicate if Lead Administrator	Hospital if applicable	(B) Breakdown of W-2 and/or 1099 MISC Compensation			(C) Retirement and Deferred Compensation	(D) Non- Taxable Benefits	(E) Total	
			(i) Base Compensation	(ii) Bonus & Incentive Compensation	(iii) Other Reportable Compensation				
1	George Hanigan	Lead Admin	WHMC	260,000			7,013	22,616	289,629
2	Charlene Morgan		WHMC	181,225	400		5,107	13,255	199,987
3	Abby Smith		WHMC	171,168	400		5,717	28,872	206,157
4	Deborah Hoadley		WHMC	149,254	400	1,789	11,441	0	162,884
5	Liston Broughton		WHMC	138,956			0	13,255	152,211
6									0
7									0
8									0
9									0
10									0
11									0
12									0
13									0
14									0
15									0

Add Additional lines as needed

Notes:

Please refer to IRS Form 990 and Schedule J for definitions of types of compensation

Form 990 Schedule J <http://www.irs.gov/pub/irs-pdf/i990sj.pdf>

If the five highest paid employees do not include the lead administrator, please report compensation information for the lead administrator on line 1, and for the five highest paid employees without patient care responsibilities on lines 2 through 6.

Please submit compensation information to DOH either by mail, fax or email to the following address:

Washington State Department of Health

Community Health Systems/Hospital Financial and Charity Care Section

MS: 47853

Olympia, WA 98504-7853
email: hos@doh.wa.gov