

# Compensation of Hospital Employees



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

2022 Lewis Co. Hospital Dist #1 dba Arbor Health									
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 LEIANNE EVERETT	YES		267,537			16,052	23,126	306,715	
2 RICHARD BOGGESS			180,921			10,450	23,004	214,374	
3 SARA WILLIAMS			177,885			7,800	14,459	200,143	
4 SHANNON KELLY			160,150			9,622	17,510	187,282	
5 MARILYN FINLEY			133,378			8,003	13,434	154,815	
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](mailto:hos@doh.wa.gov)