

# Compensation of Hospital Employees



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

Calendar Year: 2018		Entity Name: Skagit County Public Hospital District No. 2, dba Island Hospital							
(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 Vince Oliver	Yes		379,490		44,940	42,128	11,460	478,017	
2 Elise Cutter*			262,628			11,080	10,576	284,284	
3 Denise Jones			158,675			22,238	10,677	191,591	
4 Kenneth Martin			150,570			9,474	10,679	170,724	
5 Carolyn Pape			136,388			19,023	10,581	165,992	
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Add Additional lines as needed

**Notes:** \* One time taxable event due to 5 year vesting of SERP plan of \$80,704

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