

Compensation of Hospital Employees



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

Calendar Year: 2018 Entity Name: Okanogan County Public Hospital District No. 3/dba/ Mid-Valley 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 Alan Fisher	yes	Mid-Valley	175,000			1,750	11,411	188,161
2 Holly Stanely		Mid-Valley	147,125			2,942	11,411	161,478
3 Christopher Freel		Mid-Valley	94,353			1,887	11,411	107,651
4 Randy Coffell		Mid-Valley	122,742			2,454	11,411	136,607
5 Becky Corson		Mid-Valley	91,707			1,834	11,411	104,952
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