

Compensation of Hospital Employees



DOH 422-092/CHS 257 (REV. 08/01/2012)

Calendar Year: 2012		Entity Name: Shriners Hospitals for Children - Spokane						
(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	VILANOVA, LYNDA	Lead Administrator	Shriners Hospitals for Children	\$131,728			13,182	144,910
2	ARMSTRONG, RICHARD		Shriners Hospitals for Children	\$67,279			3,465	70,744
3	KAFENTZIS, TERESA		Shriners Hospitals for Children	\$70,744			4,614	75,358
4	NEWBILL, NOREEN		Shriners Hospitals for Children	\$82,313			9,679	91,992
5	BOCHE, ROBERT		Shriners Hospitals for Children	\$84,994			881	85,875
6	HICKMAN, MONICA		Shriners Hospitals for Children	\$93,932			954	94,886
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

Center for Health Statistics/Hospital and Patient Data Section

MS: 47814

Olympia, WA 98504-7814

Fax: (360) 753-4135
email: hos@doh.wa.gov