Compensation of Hospital Employees

Health

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

Calendar Year: 2013

Entity Name: Pend Oreille County Public Hospital District #1 dba Newport Hospital & Health Services

	(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 (i) **Base Compensation**	(ii) **Bonus & Incentive Compensation**	(iii) **Other Reportable Compensation**	(C) Retirement and Deferred Compensation	(D)Non-Taxable Benefits	(E) Total
1	Thomas W. Wilbur	X		135,769	11,218	0	9,745	7,576	164,308
2	Kim M Manus			113,500			6,953	8,108	128,560
3	Shawna R Beese			110,423			4,711	5,211	120,345
4	Adolph F Knorr			87,268			5,893	7,519	100,680
5	Collette M Meyers			84,235			5,338	8,005	97,579
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
Center for Health Statistics/Hospital and Patient Data Section
MS: 47814
Olympia, WA 98504-7814