

Compensation of Hospital Employees



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

Calendar Year: 2013 Entity Name: Othello Community 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 Harold S. Geller	X (to 6/28/13)	Othello	118,078	0	0	6,659	11,841	136,578
2 Connie Agenbroad	X (from 6/28/13)	Othello	109,705	0	0	7,679	7,634	125,018
3 Tina M. Bernsen		Othello	111,238	0	0	7,658	7,634	126,529
4 Rhonda K. Golladay		Othello	109,301	0	0	7,626	7,634	124,560
5 Mark K. Bunch		Othello	99,508	0	0	0	7,634	107,142
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

Fax: (360) 753-4135

email: hos@doh.wa.gov