

Compensation of Hospital Employees



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

Calendar Year: 2013		Entity Name: Providence St. Peter 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 Medrice Coluccio	X		424,188	104,213	17,500	473,973	24,370	1,044,244	
2 Michael Menen			318,190	49,011	0	11,475	19,140	397,816	
3 Jeffery Robert			246,801	43,414	19,823	25,925	20,255	356,218	
4 Paul Wilkinson			227,154	52,670	17,500	24,779	18,421	340,524	
5 Denise Marroni			220,965	33,659	0	21,031	19,096	294,751	
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/i990si.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