

Compensation of Hospital Employees



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

Calendar Year: 2014 Entity Name: Mason General Hospital & Family of Clinics								
(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 Eric Moll	X		263,403	Note 1	30,262	35,514	45,633	374,812
2 Richard Smith			136,304	0	24,290	12,853	45,577	219,024
3 Eileen Branscome			148,529	0	28,673	13,278	15,600	206,080
4 Thomas Hornburg			106,831	0	18,921	10,407	45,006	181,165
5 Nicole Eddins			132,182	0	16,114	11,578	15,687	175,561
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