

Compensation of Hospital Employees



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

Calendar Year: 2014		Entity Name: Whitman Hospital and Medical Center (WHMC)						
(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 Deborah Glass	Yes (Jan-Mar)	WHMC	60,479	10,000	3,901	8,540	2,305	85,225
2 Gary Peck	Yes (interim Apr-Sep)	WHMC	105,250			2,600	0	107,850
3 George H. Hanigan	Yes (Oct-Dec)	WHMC	31,154		9,246	554	292	41,246
4 Jim Heilsberg	No	WHMC	149,780	0	0	4,493	7,284	161,557
5 Denise Fowler	No	WHMC	151,544	0	0	2,301	7,284	161,129
6 Carole Williams	No	WHMC	147,341	0	0	2,533	10,926	160,799
7 Michelle Ellis	No	WHMC	107,620	0	0	1,614	10,926	120,160
8 Deborah Hoadley	No	WHMC	107,977	0	0	3,239	7,284	118,500
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/f990sj.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