

# Compensation of Hospital Employees



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

Calendar Year: 2015 Entity Name: Cascade Valley Hospital and 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	Jones, W Clark	Administrator		194,729	0	8,772	26,245	14,959	244,705
2	Sand, Michelle	Assistant Administrator		149,835	0	0	10,475	7,833	168,143
3	Logan, Heather	Assistant Administrator		136,965	0	0	9,373	7,833	154,171
4	Schmiege, Ardis	Chief Financial Officer		136,095	0	0	9,330	7,833	153,258
5	Barnett, Jolanda	Assistant Administrator		136,188	0	0	9,273	7,833	153,294
6									
7									
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