

Compensation of Hospital Employees



DOH 346-095 (REV 08/01/2016)

Calendar Year: 2020 Entity Name: Okanogan County Public hospital District No. 3 d/b/a Mid Valley 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 Alan Fisher	yes	Mid-Valley	225,000	10,000	19,064	5,159	11,433	270,656
2 Holly Stanley		Mid-Valley	158,876		21,741	3,683	11,433	195,733
3 Randy Coffell		Mid-Valley	128,133		8,579	2,795	11,433	150,940
4 Carrie Anthony		Mid-Valley	102,506		1,129	2,122	11,433	117,190
5 Becky Corson		Mid-Valley	102,506		13,164	2,105	11,433	129,208
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/1990sj.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

Community Health Systems/Hospital Financial and Charity Care Section

MS: 47853

Olympia, WA 98504-7853

email: hos@doh.wa.gov