ALAMEDA HEALTH SYSTEM

Employee ID # 10981

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIVIC RABAGO

MRABAGO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 42 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 96.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,638.98
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,127.41
****Base Wages**	$ 52,070.43
TOTAL Investment In You	$ 90,197.84
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

*****Base Wages** = hourly rate X 2080 hours x current calculated FTE.*

Dear Colleague,

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 10983

2016

SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAY FERNANDEZ

MFERNANDEZ@alamedahealthsystem.c

Alameda makes benefit contributions in the amount of 41 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,432.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,310.52
****Base Wages**	$ 67,267.20
TOTAL Investment In You	$ 114,577.72
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10996

2016

SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ISOLDA ACOSTA

IACOSTA@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 32 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.37
Long Term Disability	$ 32.75
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,314.42
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 12,474.91
****Base Wages**	$ 25,995.47
TOTAL Investment In You	$ 38,470.38
TOTAL Paid Time Off Days:	**6 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11000

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RITA GYAMFI

RGYAMFI@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 54 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 82.17
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,240.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,087.62
****Base Wages**	$ 38,804.29
TOTAL Investment In You	$ 83,891.91
TOTAL Paid Time Off Days:	**43 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11004

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SAHRA FARAH

sfarah@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 44 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,240.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,156.06
****Base Wages**	$ 55,434.70
TOTAL Investment In You	$ 99,590.77
TOTAL Paid Time Off Days:	**43 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11006

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JASMINE JOSEPH

jjoseph@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,065.74
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,301.11
****Base Wages**	$ 94,827.03
TOTAL Investment In You	$ 144,128.14
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11007

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EDGAR-ALLAN MANZANO

AManzano@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,884.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 18,134.82
****Base Wages**	$ 92,909.11
TOTAL Investment In You	$ 111,043.93
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11008

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TERRI ELLIOTT

TElliott@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,884.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,295.06
****Base Wages**	$ 92,909.11
TOTAL Investment In You	$ 122,204.17
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11009

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WILLIAM FARELLA

wfarella@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,545.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,955.85
****Base Wages**	$ 78,191.57
TOTAL Investment In You	$ 107,147.42
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11013

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

THIET PHAM

tvpham@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,025.83
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,531.18
****Base Wages**	$ 91,840.94
TOTAL Investment In You	$ 130,372.13
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11016

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BESSIE ARNOLD

barnold@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,025.83
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,261.20
****Base Wages**	$ 91,840.94
TOTAL Investment In You	$ 139,102.15
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11018

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TRACIE REAMES

TREAMES@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,013.07
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,127.82
****Base Wages**	$ 70,741.94
TOTAL Investment In You	$ 96,869.76
TOTAL Paid Time Off Days:	**43 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11020

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RICARDO LIM

RLIM@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 46 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 98.98
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,086.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,950.34
****Base Wages**	$ 53,420.43
TOTAL Investment In You	$ 98,370.77
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11021

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KATHLEEN MILLER

KMiller@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 41 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 89.51
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,806.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,287.96
****Base Wages**	$ 49,758.18
TOTAL Investment In You	$ 85,046.14
TOTAL Paid Time Off Days:	**43 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11022

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHASHI SONI

SSONI@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 48 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 65.05
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,240.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,697.76
****Base Wages**	$ 38,804.29
TOTAL Investment In You	$ 74,502.05
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11024

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

QASIM NOORZAY

qnoorzay@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 46 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 81.22
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,921.32
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,386.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,781.18
****Base Wages**	$ 44,270.51
TOTAL Investment In You	$ 82,051.69
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11028

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MILDRED WHITE

MrWhite@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 32 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 87.78
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,050.70
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,435.72
****Base Wages**	$ 52,950.35
TOTAL Investment In You	$ 77,386.07
TOTAL Paid Time Off Days:	**43 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11029

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BERNADETTE IBANEZ

BIBANEZ@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 49 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 83.25
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,425.37
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,273.31
****Base Wages**	$ 46,278.34
TOTAL Investment In You	$ 91,551.65
TOTAL Paid Time Off Days:	**43 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11032

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LUNINGNING CAMUNGAO

LCAMUNGAO@alamedahealthsystem.or

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,884.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,389.78
****Base Wages**	$ 116,136.38
TOTAL Investment In You	$ 156,526.17
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11033

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL ORDONIO

mordonio@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 46 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,439.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,668.59
****Base Wages**	$ 52,224.68
TOTAL Investment In You	$ 96,893.27
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11035

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LESLEY SHUPE

lshupe@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 38 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 101.07
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,439.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,932.12
****Base Wages**	$ 58,027.42
TOTAL Investment In You	$ 93,959.54
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11036

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NELIA DACIO DE SILVA

NDACIODESILVA@alamedahealthsyster

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,884.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,762.52
****Base Wages**	$ 116,136.38
TOTAL Investment In You	$ 165,898.91
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11037

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

THOMAS WEISENBERGER

TWeisenberger@alamedahealthsystem.c

Alameda makes benefit contributions in the amount of 35 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,884.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,762.52
****Base Wages**	$ 92,909.11
TOTAL Investment In You	$ 142,671.63
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11042

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIO COLBERT

MCOLBERT@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 109.75
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,495.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 18,742.17
****Base Wages**	$ 74,083.67
TOTAL Investment In You	$ 92,825.84
TOTAL Paid Time Off Days:	**6 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11044

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAMELA CLEMENTE

PClemente@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 64 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 42.46
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,009.09
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 42,853.45
****Base Wages**	$ 23,600.68
TOTAL Investment In You	$ 66,454.13
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11048

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SERGE LAFUENTE

SLAFUENTE@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,545.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,955.85
****Base Wages**	$ 100,532.02
TOTAL Investment In You	$ 129,487.87
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11050

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNIFER HERNANDEZ

jehernandez@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,545.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,955.85
****Base Wages**	$ 89,361.79
TOTAL Investment In You	$ 118,317.64
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11051

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIATERESA RESURRECCION

MRESURRECCION@alamedahealthsyst

Alameda makes benefit contributions in the amount of 39 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,545.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,423.31
****Base Wages**	$ 78,191.57
TOTAL Investment In You	$ 127,614.88
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11054

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TIFFANY BEAUCHAMP

tbeauchamp@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 37 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 58.97
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,068.09
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,424.29
****Base Wages**	$ 40,105.73
TOTAL Investment In You	$ 63,530.01
TOTAL Paid Time Off Days:	**43 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11055

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNIFER DIZON

JDIZON@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,545.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,423.31
****Base Wages**	$ 89,361.79
TOTAL Investment In You	$ 138,785.10
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11057

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CAROL GUTIERREZ

CGUTIERREZ@alamedahealthsystem.or

Alameda makes benefit contributions in the amount of 51 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 42.57
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,656.09
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,500.57
****Base Wages**	$ 42,604.74
TOTAL Investment In You	$ 87,105.32
TOTAL Paid Time Off Days:	**6 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11058

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHELLE MIKE

MMike@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 28 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,881.17
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,406.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,291.72
****Base Wages**	$ 83,746.42
TOTAL Investment In You	$ 116,038.14
TOTAL Paid Time Off Days:	**47 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11061

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TEGUH SUBIANTORO

tsubiantoro@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 58 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 49.49
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,086.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,900.85
****Base Wages**	$ 32,052.26
TOTAL Investment In You	$ 76,953.10
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11063

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JIMMY PHAM

jpham@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,066.76
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 17,959.61
****Base Wages**	$ 73,813.52
TOTAL Investment In You	$ 91,773.14
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11065

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JORGE LOPEZ

jolopez@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,545.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,423.31
****Base Wages**	$ 89,361.79
TOTAL Investment In You	$ 138,785.10
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11067

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL MOLDERO

MMoldero@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 39 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,541.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,437.15
****Base Wages**	$ 72,439.74
TOTAL Investment In You	$ 118,876.89
TOTAL Paid Time Off Days:	**46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11071

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANGELA FRAGULIA

AFRAGULIA@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 35 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,545.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,204.69
****Base Wages**	$ 89,361.79
TOTAL Investment In You	$ 137,566.48
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11074

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RUBY ACENA

RACENA@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 55 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 65.20
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,718.18
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 42,585.29
****Base Wages**	$ 35,531.81
TOTAL Investment In You	$ 78,117.10
TOTAL Paid Time Off Days:	**48 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11075

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ESTELITA ACOSTA

EACOSTA@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 55 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 71.62
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,002.12
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,838.42
****Base Wages**	$ 35,319.02
TOTAL Investment In You	$ 79,157.45
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11076

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HOSEA AJAYI

HAJAYI@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 32 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 64.39
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 2,700.97
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 15,142.35
****Base Wages**		$ 31,776.08
TOTAL Investment In You		$ 46,918.43
TOTAL Paid Time Off Days:		**48 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 11077

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ZEWDITU ALEMU

ZALEMU@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 39 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 64.81
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,718.18
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,080.22
****Base Wages**	$ 35,531.81
TOTAL Investment In You	$ 58,612.03
TOTAL Paid Time Off Days:	**48 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11078

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALEJANDRO ALVA

AALVA@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 55 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 64.79
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,700.97
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,530.44
****Base Wages**	$ 35,306.75
TOTAL Investment In You	$ 78,837.19
TOTAL Paid Time Off Days:	**48 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11080

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIA AYALA-ZAMBRANO

MAYALA-ZAMBRANO@alamedahealthsy

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,332.68
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 14,929.65
****Base Wages**	$ 69,708.29
TOTAL Investment In You	$ 84,637.94
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11084

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROLANDO VILLANUEVA

RVILLANUEVA1@alamedahealthsystem.

Alameda makes benefit contributions in the amount of 49 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 63.57
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,666.55
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,489.75
****Base Wages**	$ 34,856.85
TOTAL Investment In You	$ 68,346.59
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11085

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BOJANA BUDISAVLJEVIC

BBUDISAVLJEVIC@alamedahealthsyste

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,773.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,888.35
****Base Wages**	$ 62,400.00
TOTAL Investment In You	$ 87,288.35
TOTAL Paid Time Off Days:	**48 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11086

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SUSAN HAM

sham@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,884.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,295.06
****Base Wages**	$ 81,295.47
TOTAL Investment In You	$ 110,590.53
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11088

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIA MENDOZA-SANCHEZ

MMENDOZA-SANCHEZ@alamedahealth

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 92.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,167.50
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 157,793.42
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11089

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RORY BANGI

RBANGI@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,598.01
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,476.10
****Base Wages**	$ 86,248.45
TOTAL Investment In You	$ 133,724.54
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11090

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MILAGROS BANIAGO

MBANIAGO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 37 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 71.20
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,984.92
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,353.35
****Base Wages**	$ 39,018.51
TOTAL Investment In You	$ 62,371.86
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

*****Base Wages** = hourly rate X 2080 hours x current calculated FTE.*

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11093

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ADELINA BINAORO

ABINAORO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,504.77
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,915.40
****Base Wages**	$ 57,566.25
TOTAL Investment In You	$ 83,481.65
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11094

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DELMY BONILLA

DBONILLA@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 49 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 64.39
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,700.97
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,581.41
****Base Wages**	$ 35,306.75
TOTAL Investment In You	$ 68,888.16
TOTAL Paid Time Off Days:	**48 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11095

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALETH BRIONES

ALEBRIONES@alamedahealthsystem.or

Alameda makes benefit contributions in the amount of 42 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 24.82
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,511.68
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 11,673.49
****Base Wages**	$ 16,416.19
TOTAL Investment In You	$ 28,089.68
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

WATERS EDGE

Employee ID # 11097

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BASILIDES CAHILES

BCAHILES@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 17 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,218.36
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,319.22
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 21,787.97
****Base Wages**		$ 108,748.02
TOTAL Investment In You		$ 130,535.99
TOTAL Paid Time Off Days:		**35 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

WATERS EDGE

Employee ID # 11098

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MERCEDITA CAOILE

MCAOILE@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 58 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 56.69
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,363.35
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,184.72
****Base Wages**	$ 30,893.41
TOTAL Investment In You	$ 74,078.13
TOTAL Paid Time Off Days:	**48 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11099

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RAM CASTILLANO

RCASTILLANO@alamedahealthsystem.c

Alameda makes benefit contributions in the amount of 40 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 64.39
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,684.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,046.20
****Base Wages**	$ 35,092.51
TOTAL Investment In You	$ 58,138.71
TOTAL Paid Time Off Days:	**48 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11100

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RAMIRO CASTILLANO

racastillano@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 70.58
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 2,959.11
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 15,406.68
****Base Wages**		$ 34,813.02
TOTAL Investment In You		$ 50,219.70

TOTAL Paid Time Off Days: 0 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11101

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAIRA CEDULA

MCEDULA@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 71.20
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 2,984.92
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 17,054.19
****Base Wages**		$ 35,116.66
TOTAL Investment In You		$ 52,170.85

TOTAL Paid Time Off Days: 51 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11102

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALMERIAM DATUIN

ADATUIN@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 5,375.71
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 17,866.10
****Base Wages**	$ 70,270.72
TOTAL Investment In You	$ 88,136.82

TOTAL Paid Time Off Days: 48 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11104

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANGELINA DELGADO

ADELGADO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 37 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical		$ 10,517.78
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 72.44
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 3,036.53
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 23,003.75
****Base Wages**		$ 39,693.26
TOTAL Investment In You		$ 62,697.01
TOTAL Paid Time Off Days:		**51 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

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Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11105

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RYANN DICHOSO

RDICHOSO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 51 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 75.95
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,182.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,023.45
****Base Wages**	$ 41,605.41
TOTAL Investment In You	$ 85,628.86
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11107

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALEXIS ELOPRE

AELOPRE@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 40 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 63.57
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,666.55
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,027.35
****Base Wages**	$ 34,856.85
TOTAL Investment In You	$ 57,884.19
TOTAL Paid Time Off Days:	**44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11108

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JONARD ESPINOSA

JESPINOSA@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 50 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 62.31
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,597.71
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,419.65
****Base Wages**	$ 33,957.04
TOTAL Investment In You	$ 67,376.69
TOTAL Paid Time Off Days:	**48 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11109

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ARLENE FERRER

AFERRER@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 55 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 64.81
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,718.18
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 42,584.90
****Base Wages**	$ 35,531.81
TOTAL Investment In You	$ 78,116.71
TOTAL Paid Time Off Days:	**48 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11110

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSE FERRER

RFERRER@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 28 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,031.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,442.16
****Base Wages**	$ 65,771.68
TOTAL Investment In You	$ 91,213.84
TOTAL Paid Time Off Days:	**48 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11112

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CLAUDIA FONSECA

CFONSECA@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 39 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 65.22
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,735.38
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,097.83
****Base Wages**	$ 35,756.66
TOTAL Investment In You	$ 58,854.49
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11115

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNIFER GALBAN

JGALBAN@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 38 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,891.97
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,770.06
****Base Wages**	$ 77,019.28
TOTAL Investment In You	$ 123,789.34
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11116

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ARACELY GARCIA

aragarcia@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 37 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 72.42
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,019.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,388.99
****Base Wages**	$ 39,468.42
TOTAL Investment In You	$ 62,857.40
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11117

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PATRICIA HENDRIX

PHENDRIX@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 39 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 66.25
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,762.02
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,829.62
****Base Wages**	$ 36,104.85
TOTAL Investment In You	$ 58,934.47
TOTAL Paid Time Off Days:	**48 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11118

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

IRMA HAMMERLE

IHAMMERLE@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 53 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 72.03
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,019.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,856.05
****Base Wages**	$ 39,468.42
TOTAL Investment In You	$ 83,324.47
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11119

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EARLINE JENKINS

EJENKINS@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 42 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 57.58
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,417.02
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,771.83
****Base Wages**	$ 31,594.99
TOTAL Investment In You	$ 54,366.82
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11120

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CARLETTE JOHNSON

CJOHNSON1@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 38 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 66.66
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,795.61
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,863.62
****Base Wages**	$ 36,543.94
TOTAL Investment In You	$ 59,407.56
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11121

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MONICA JOHNSON

MJOHNSON1@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 53 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 71.20
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,984.92
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,820.81
****Base Wages**	$ 39,018.51
TOTAL Investment In You	$ 82,839.32
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11123

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BILJANA KUKURUZOVIC

BKUKURUZOVIC@alamedahealthsysten

Alameda makes benefit contributions in the amount of 37 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,021.04
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,936.35
****Base Wages**	$ 78,706.37
TOTAL Investment In You	$ 124,642.72
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11124

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SULPECIA LEGASPI

SLEGASPI@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 28 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,515.99
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,021.34
****Base Wages**	$ 98,248.18
TOTAL Investment In You	$ 137,269.51
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11125

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SIVANTHA LENG

SLENG@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 49 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 64.39
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,700.97
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,581.41
****Base Wages**	$ 35,306.75
TOTAL Investment In You	$ 68,888.16
TOTAL Paid Time Off Days:	**48 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

WATERS EDGE

Employee ID # 11126

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JEFFREY LINGAT

JLINGAT@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 63.96
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 2,666.55
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 15,107.50
****Base Wages**	$ 31,371.16
TOTAL Investment In You	$ 46,478.66

TOTAL Paid Time Off Days: 44 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11128

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GENERIZA MAGNO

GMAGNO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 42 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 57.62
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,418.74
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,773.59
****Base Wages**	$ 31,617.46
TOTAL Investment In You	$ 54,391.04
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11129

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARVIN MARBELLA

MMARBELLA@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 35 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,683.04
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,561.13
****Base Wages**	$ 87,360.00
TOTAL Investment In You	$ 134,921.13
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

WATERS EDGE

Employee ID # 11130

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MA MELODIA MEJIA

MMEJIA@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 642.46
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 71.60
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 2,984.92
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 15,835.96
****Base Wages**		$ 39,018.51
TOTAL Investment In You		$ 54,854.48
TOTAL Paid Time Off Days:		**51 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 11131

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NONA MEJIA

NMejia@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 7,048.79
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 21,160.26
****Base Wages**		$ 73,712.87
TOTAL Investment In You		$ 94,873.13
TOTAL Paid Time Off Days:		**35 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 11132

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CECILIA EBIDO

CMERCADO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 52 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 72.85
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,053.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,891.30
****Base Wages**	$ 39,918.32
TOTAL Investment In You	$ 83,809.62
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11133

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HELLANE MERCHANT

HMERCHANT@alamedahealthsystem.or

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 83.59
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,484.79
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,865.61
****Base Wages**	$ 45,552.83
TOTAL Investment In You	$ 69,418.44
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11134

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOHN MERCHANT

JMERCHANT@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 38 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 68.73
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,865.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,231.23
****Base Wages**	$ 37,454.56
TOTAL Investment In You	$ 60,685.79
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11135

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNEFER NAELGAS

JNAELGAS@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 55 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 64.39
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,700.97
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,530.05
****Base Wages**	$ 35,306.75
TOTAL Investment In You	$ 78,836.80
TOTAL Paid Time Off Days:	**48 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11136

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SANTANA NAVARRO

SNAVARRO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 42 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 57.17
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,399.82
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,458.34
****Base Wages**	$ 31,370.14
TOTAL Investment In You	$ 53,828.48
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11137

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

OLGA HARRIS

ONDUKO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,218.36
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 60.45
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 2,520.27
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 15,936.07
****Base Wages**		$ 32,944.70
TOTAL Investment In You		$ 48,880.78

TOTAL Paid Time Off Days: 44 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

WATERS EDGE

Employee ID # 11138

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KILAMBI NOLOT

KNOLOT@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 55 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 64.39
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,700.97
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,530.05
****Base Wages**	$ 35,306.75
TOTAL Investment In You	$ 78,836.80
TOTAL Paid Time Off Days:	**48 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11139

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ONU NWAONU

ONWAONU@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 39 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 64.81
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,718.18
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,437.76
****Base Wages**	$ 35,531.81
TOTAL Investment In You	$ 57,969.57
TOTAL Paid Time Off Days:	**48 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11141

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

IRENE PAGUD

IPAGUD@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 40 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 64.79
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,700.97
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,062.98
****Base Wages**	$ 35,306.75
TOTAL Investment In You	$ 58,369.73
TOTAL Paid Time Off Days:	**48 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11142

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARICON ARCA

MARCA@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 66.23
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 2,538.43
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 14,981.65
****Base Wages**	$ 29,863.83
TOTAL Investment In You	$ 44,845.48

TOTAL Paid Time Off Days: 44 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11143

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOSELINE PERENA

JPERENA@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 62 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 51.80
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,176.09
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 42,029.81
****Base Wages**	$ 25,601.10
TOTAL Investment In You	$ 67,630.90
TOTAL Paid Time Off Days:	**44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11144

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VERONICA PEREZ

VPEREZ1@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 92.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,524.78
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 157,150.70
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11145

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARITA PORCADAS

MPORCADAS@alamedahealthsystem.or

Alameda makes benefit contributions in the amount of 55 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 73.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,088.17
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,926.54
****Base Wages**	$ 36,331.40
TOTAL Investment In You	$ 80,257.94
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11146

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LILIBETH PUZON

LPUZON@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 28 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 72.03
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 3,019.33
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 15,468.35
****Base Wages**		$ 39,468.42
TOTAL Investment In You		$ 54,936.77
TOTAL Paid Time Off Days:		**51 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 11147

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELAINE REEVE

EREEVE@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 32 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 64.39
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 2,700.97
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 16,763.43
****Base Wages**		$ 35,306.75
TOTAL Investment In You		$ 52,070.18

TOTAL Paid Time Off Days: 48 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11148

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARICRIS REYES

MREYES@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 38 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 66.66
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,795.61
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,863.62
****Base Wages**	$ 36,543.94
TOTAL Investment In You	$ 59,407.56
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

WATERS EDGE

Employee ID # 11149

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOSE ROJAS

jorojas@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 71.20
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 2,984.92
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 15,433.11
****Base Wages**		$ 35,116.66
TOTAL Investment In You		$ 50,549.77
TOTAL Paid Time Off Days:		**51 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11150

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANTONIO SALINDO

ASALINDO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 57 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 58.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,417.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 42,277.75
****Base Wages**	$ 31,605.81
TOTAL Investment In You	$ 73,883.56
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11151

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LOLITA SANCHEZ

LSANCHEZ1@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 64 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 28.78
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,399.82
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,820.55
****Base Wages**	$ 18,822.09
TOTAL Investment In You	$ 52,642.63
TOTAL Paid Time Off Days:	**44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11152

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DANIELLE SCOTT

DSCOTT@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 346.58
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 66.02
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 2,523.15
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 15,072.74
****Base Wages**		$ 29,684.12
TOTAL Investment In You		$ 44,756.86
TOTAL Paid Time Off Days:		**44 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 11153

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JEOUNG SHIN

JSHIN@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 35 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,598.01
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,513.32
****Base Wages**	$ 86,248.45
TOTAL Investment In You	$ 132,761.76
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11154

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LUDELYN SOSA

LSOSA@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 53 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 72.01
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,002.12
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,838.82
****Base Wages**	$ 39,243.36
TOTAL Investment In You	$ 83,082.18
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11156

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VEZ TOLENTINO

VTOLENTINO@alamedahealthsystem.or

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,638.98
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,144.33
****Base Wages**	$ 86,784.05
TOTAL Investment In You	$ 124,928.38
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11158

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ETHYL VILLEGAS

evilligas@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,352.12
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,230.21
****Base Wages**	$ 83,034.22
TOTAL Investment In You	$ 130,264.43
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11159

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KULDIP WARRAICH

KWARRAICH@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 77.79
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 3,243.04
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 15,697.82
****Base Wages**		$ 38,153.42
TOTAL Investment In You		$ 53,851.24

TOTAL Paid Time Off Days: 0 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11161

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAELENA YPARRAGUIRRE

MYPARRAGUIRRE@alamedahealthsyst

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,007.82
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,513.17
****Base Wages**	$ 91,605.49
TOTAL Investment In You	$ 130,118.66
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11162

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ORLANDO YPARRAGUIRRE

OYPARRAGUIRRE@alamedahealthsyst

Alameda makes benefit contributions in the amount of 37 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 71.20
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,984.92
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,353.35
****Base Wages**	$ 39,018.51
TOTAL Investment In You	$ 62,371.86
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

ALAMEDA HOSPTIAL

Employee ID # 11163

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SLAWOMIR GRUSZCZYNSKI

SGRUSZCZYNSKI@alamedahealthsyste

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,840.83
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,713.86
****Base Wages**	$ 102,494.50
TOTAL Investment In You	$ 141,208.35
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11165

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KATHY LE

kle@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 23 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,218.36
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,066.76
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 21,535.51
****Base Wages**		$ 73,813.52
TOTAL Investment In You		$ 95,349.04

TOTAL Paid Time Off Days: 42 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11172

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHEILA TANEDO-TE

STANEDO-TE@alamedahealthsystem.or

Alameda makes benefit contributions in the amount of 38 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,796.41
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,674.50
****Base Wages**	$ 75,770.03
TOTAL Investment In You	$ 122,444.53
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11173

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DARLENE MILLER

DMILLER1@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 50 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 38.39
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 1,632.51
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,672.25
****Base Wages**	$ 21,339.97
TOTAL Investment In You	$ 43,012.21
TOTAL Paid Time Off Days:	**44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11178

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NAREISHA WILLIAMS

NWILLIAMS@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 54 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 43.31
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,222.15
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,030.14
****Base Wages**	$ 37,907.63
TOTAL Investment In You	$ 81,937.77
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11184

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARINO CONTILLO

MCONTILLO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 48 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 58.41
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,086.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,909.77
****Base Wages**	$ 48,078.39
TOTAL Investment In You	$ 92,988.16
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11188

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JESUS OCAMPO

JOCAMPO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 28 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 109.97
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,796.41
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,203.60
****Base Wages**	$ 68,193.03
TOTAL Investment In You	$ 94,396.63
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11189

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANDREALALAINE PAREDES

AParades@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 51 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 65.60
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,425.37
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,882.92
****Base Wages**	$ 34,708.75
TOTAL Investment In You	$ 70,591.67
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11192

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LEOPOLDO BERNARDOJR

LBERNARDOJR@alamedahealthsystem.

Alameda makes benefit contributions in the amount of 43 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 58.41
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,086.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,537.03
****Base Wages**	$ 48,078.39
TOTAL Investment In You	$ 83,615.42
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11195

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHARON GABINETE

SSEVANDAL@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 82.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,796.41
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,176.11
****Base Wages**	$ 60,616.03
TOTAL Investment In You	$ 86,792.14
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11203

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARCOS DAYAO

MDAYAO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 57 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 50.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,086.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,529.10
****Base Wages**	$ 26,710.22
TOTAL Investment In You	$ 62,239.31
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11215

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DOLMA YANGZOM

DYANGZOM@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,327.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,314.11
****Base Wages**	$ 69,641.52
TOTAL Investment In You	$ 95,955.63
TOTAL Paid Time Off Days:	**25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11216

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RUTHIEANNE VERDEFLOR

RVERDEFLOR@alamedahealthsystem.c

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 50.98
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,098.86
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,151.19
****Base Wages**	$ 40,508.00
TOTAL Investment In You	$ 63,659.19
TOTAL Paid Time Off Days:	**25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11217

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL AVILLA

MAVILLA1@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,545.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,955.85
****Base Wages**	$ 89,361.79
TOTAL Investment In You	$ 118,317.64
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11224

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANNIE BEASLEY

anbeasley@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 39 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 49.77
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,240.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,587.76
****Base Wages**	$ 38,804.29
TOTAL Investment In You	$ 63,392.05
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11225

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WENDYLYN KITAYAMA

wkitayama@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 50 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 59.72
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,240.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,422.45
****Base Wages**	$ 44,347.76
TOTAL Investment In You	$ 88,770.21
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

WATERS EDGE

Employee ID # 11229

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ISAAC MENSAH

IMENSAH@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 47 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 50.98
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,141.68
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,194.00
****Base Wages**	$ 25,196.18
TOTAL Investment In You	$ 47,390.19
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11231

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHIDINMA UZOZIE

CUZOZIE@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 47 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 59.72
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,240.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,065.17
****Base Wages**	$ 49,891.23
TOTAL Investment In You	$ 94,956.40
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11232

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MATILDA IMBUKWA

MIMBUKWA@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,991.10
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 42.10
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,240.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,053.40
****Base Wages**	$ 44,347.76
TOTAL Investment In You	$ 66,401.16
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11235

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BERTHA HERNANDEZ

BHERNANDEZ@alamedahealthsystem.c

Alameda makes benefit contributions in the amount of 63 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 50.98
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,141.68
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,994.56
****Base Wages**	$ 25,196.18
TOTAL Investment In You	$ 67,190.75
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11236

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARJORIE DAVISON

MDAVISON@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 59 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 23.43
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 1,969.59
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,994.36
****Base Wages**	$ 15,447.74
TOTAL Investment In You	$ 37,442.11
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11241

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAULETTE JONES

PJONES1@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 54 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 61.89
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,240.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,067.34
****Base Wages**	$ 38,804.29
TOTAL Investment In You	$ 83,871.63
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11242

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CRISTINA GARCIA

CGARCIA1@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 62 % of your income.

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ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 61.89
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,240.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,067.34
****Base Wages**	$ 27,717.35
TOTAL Investment In You	$ 72,784.69
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11246

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ESTHER DAMIAN

EDAMIAN@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 45 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 105.24
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,259.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,129.57
****Base Wages**	$ 55,681.60
TOTAL Investment In You	$ 100,811.17
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11247

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TSERING LHAZOM

TLHAZOM@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 38 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 84.21
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,429.23
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,905.39
****Base Wages**	$ 57,898.46
TOTAL Investment In You	$ 93,803.85
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11248

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOSIE BACUYANI

JBACUYANI@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 57 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 59.23
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,485.85
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,309.78
****Base Wages**	$ 32,494.80
TOTAL Investment In You	$ 75,804.58
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11250

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ARTHUR ADRIANO

aadriano@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 49 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 49.71
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,439.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,253.50
****Base Wages**	$ 46,421.94
TOTAL Investment In You	$ 91,675.44
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11251

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RONALDO BERDAN

RBERDAN@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 46 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 46.85
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 1,969.59
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,313.67
****Base Wages**	$ 25,746.24
TOTAL Investment In You	$ 48,059.91
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11256

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANTHONY OKEKE

AOKEKE@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 64.34
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,109.61
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 13,310.94
****Base Wages**	$ 32,232.22
TOTAL Investment In You	$ 45,543.16
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11268

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELIZABETH ROGERS

EROGERS1@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 55 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 72.14
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,007.45
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,844.28
****Base Wages**	$ 35,381.74
TOTAL Investment In You	$ 79,226.01
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11270

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CYNTHIA JOHNSON

cjohnson@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 35 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 62.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,312.87
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,672.78
****Base Wages**	$ 45,101.89
TOTAL Investment In You	$ 69,774.66
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11275

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHERI SMITH

SSMITH1@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,884.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 18,134.82
****Base Wages**	$ 69,681.83
TOTAL Investment In You	$ 87,816.65
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11276

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LINDA STALLINGS

LSTALLINGS@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,884.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,295.06
****Base Wages**	$ 69,681.83
TOTAL Investment In You	$ 98,976.89
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11279

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TSGEREDA HAILEMARIAM

THAILEMARIAM@alamedahealthsystem

Alameda makes benefit contributions in the amount of 42 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,884.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,762.52
****Base Wages**	$ 69,681.83
TOTAL Investment In You	$ 119,444.35
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11280

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

INES CORONEL

ICORONEL@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,545.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,050.57
****Base Wages**	$ 89,361.79
TOTAL Investment In You	$ 129,412.36
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11288

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARY RUSSELL

MRUSSELL@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,099.89
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,972.92
****Base Wages**	$ 96,711.01
TOTAL Investment In You	$ 136,683.93
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11297

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALECDIANA KMETZ

AKMETZ@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 63 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 50.96
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,124.47
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 42,940.12
****Base Wages**	$ 24,993.82
TOTAL Investment In You	$ 67,933.94
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11307

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LINDA STRACK

LSTRACK@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 32 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,840.83
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,346.18
****Base Wages**	$ 81,995.60
TOTAL Investment In You	$ 121,341.78
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11313

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANTHONY SAMORANOS

ASAMORANOS@alamedahealthsystem.

Alameda makes benefit contributions in the amount of 56 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 39.61
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,048.67
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,480.23
****Base Wages**	$ 26,780.00
TOTAL Investment In You	$ 60,260.23
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11320

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANGELINA BREWSTER

ABREWSTER1@alamedahealthsystem.c

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,840.83
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,955.58
****Base Wages**	$ 81,995.60
TOTAL Investment In You	$ 109,951.18
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11337

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EMAL ALI

EALI@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 39 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,648.86
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,526.95
****Base Wages**	$ 73,841.25
TOTAL Investment In You	$ 120,368.19
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11342

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIO AUSTRIA

MAUSTRIA@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 49 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 62.95
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,640.74
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,463.32
****Base Wages**	$ 34,519.47
TOTAL Investment In You	$ 67,982.79
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11343

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GLENN ROMABILES

GROMABILES@alamedahealthsystem.o

Alameda makes benefit contributions in the amount of 39 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,545.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,423.31
****Base Wages**	$ 78,191.57
TOTAL Investment In You	$ 127,614.88
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11344

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSARIO LOMIBAO

RLOMIBAO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 46 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,234.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,112.34
****Base Wages**	$ 54,737.28
TOTAL Investment In You	$ 100,849.62
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11345

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KIMBERLY CHRISTIAN

KCHRISTIAN@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 28 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,686.86
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,097.49
****Base Wages**	$ 69,927.94
TOTAL Investment In You	$ 97,025.42
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11346

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROYCHIA GOLONDRINA

RGOLONDRINA@alamedahealthsystem.

Alameda makes benefit contributions in the amount of 46 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 45.41
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,048.67
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,391.31
****Base Wages**	$ 26,780.00
TOTAL Investment In You	$ 49,171.31
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

WATERS EDGE

Employee ID # 11348

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MABEL UMIPIG

MDebelen@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 54 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 67.08
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,812.83
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,644.59
****Base Wages**	$ 36,768.99
TOTAL Investment In You	$ 80,413.59
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11349

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANDY GUZMAN

ADGuzman@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 47.17
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,156.94
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,501.35
****Base Wages**	$ 41,267.20
TOTAL Investment In You	$ 64,768.55
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

WATERS EDGE

Employee ID # 11359

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FRANCISCO PAREJA III

pfrancisco@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 58 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 38.13
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,363.35
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,166.17
****Base Wages**	$ 30,893.41
TOTAL Investment In You	$ 74,059.58
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11360

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WINTER ROXO

WRoxo@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 53 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 49.80
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,624.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,220.45
****Base Wages**	$ 37,904.09
TOTAL Investment In You	$ 81,124.54
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11362

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PRINCESS INOCENTES

pinocentes@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 55 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 38.13
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,065.06
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,495.14
****Base Wages**	$ 26,994.24
TOTAL Investment In You	$ 60,489.38
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11364

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GINA ENSLEY

GEnsley@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 39 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 49.80
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,529.82
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,876.86
****Base Wages**	$ 36,913.18
TOTAL Investment In You	$ 60,790.03
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11365

2016

SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NERISSA MEULIO

nmeulio@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 38 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 65.75
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,653.73
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,016.71
****Base Wages**	$ 43,488.43
TOTAL Investment In You	$ 70,505.15
TOTAL Paid Time Off Days:	**6 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

WATERS EDGE

Employee ID # 11370

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOHN GALVEZ

jgalvez@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 47 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 46.44
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,167.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,511.17
****Base Wages**	$ 25,500.01
TOTAL Investment In You	$ 48,011.18
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11371

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANGELA HALL

ahall@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 37 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 642.46
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 50.52
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 2,122.42
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 14,952.39
****Base Wages**		$ 24,969.67
TOTAL Investment In You		$ 39,922.06
TOTAL Paid Time Off Days:		**42 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11380

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KRISTINE TELMO-BOTIN

kbotin@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 70.76
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 2,921.44
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 15,369.19
****Base Wages**		$ 38,188.80
TOTAL Investment In You		$ 53,557.99
TOTAL Paid Time Off Days:		**38 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 11387

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GILBERT SALAZAR

GSalazar@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 37 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 50.52
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 2,122.42
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 14,549.93
****Base Wages**		$ 24,969.67
TOTAL Investment In You		$ 39,519.60

TOTAL Paid Time Off Days: 42 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11390

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAURA WISE

lwise@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 12 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 10,285.77
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 19,553.58
****Base Wages**	$ 141,871.77
TOTAL Investment In You	$ 161,425.35
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11394

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAURICE GRANGENT

mgrangent@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 93.86
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,798.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,445.85
****Base Wages**	$ 49,659.17
TOTAL Investment In You	$ 74,105.02
TOTAL Paid Time Off Days:	**34 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11395

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAN YU CHAN-LEE

mchanlee@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 47.95
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 4,224.78
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 16,649.72
****Base Wages**	$ 38,658.11
TOTAL Investment In You	$ 55,307.83

TOTAL Paid Time Off Days: 41 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11396

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TRACY LAIGO

tlaigo@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 65 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 89.05
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,604.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,458.31
****Base Wages**	$ 23,559.22
TOTAL Investment In You	$ 68,017.53
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11407

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

REKHA GEORGE

rgeorge@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 13 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,612.46
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 18,862.85
****Base Wages**	$ 124,991.03
TOTAL Investment In You	$ 143,853.88
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11410

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNIFER ARBUCKLE

jarbuckle@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,742.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,170.54
****Base Wages**	$ 88,137.09
TOTAL Investment In You	$ 115,307.63
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11418

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNIFER PARKER

jeparker@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,172.67
****Base Wages**	$ 120,884.40
TOTAL Investment In You	$ 171,057.07
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11419

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALEXANDRA SHERMAN

asherman@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,028.84
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,539.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,037.43
****Base Wages**	$ 120,984.12
TOTAL Investment In You	$ 161,021.54
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11423

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JAYCEE GALVEZ

jagalvez@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 35 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 46.96
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,100.73
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,740.12
****Base Wages**	$ 53,604.30
TOTAL Investment In You	$ 82,344.42
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

EASTMONT WELLNESS

Employee ID # 11425

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MEGHAN MARKOWSKI

mmarkowski@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 17 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,404.07
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,814.70
****Base Wages**	$ 141,867.02
TOTAL Investment In You	$ 171,681.73
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11429

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROHINI BAJAJ

rbajaj@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 35 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,985.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,863.25
****Base Wages**	$ 93,962.42
TOTAL Investment In You	$ 143,825.67
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11434

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NANCY GE

nancge@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,985.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,395.79
****Base Wages**	$ 93,962.42
TOTAL Investment In You	$ 123,358.21
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11435

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PERPETUA ONWUVUARIRI

ponwuvuariri@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,182.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,687.91
****Base Wages**	$ 113,931.60
TOTAL Investment In You	$ 154,619.52
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11436 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHIDDY ESOMONU cesomonu@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,357.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,235.22
****Base Wages**	$ 124,766.93
TOTAL Investment In You	$ 175,002.15
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11438

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AILEKA PENNEWELL

apennewell@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 32 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 19,097.26
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,357.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,603.08
****Base Wages**	$ 83,177.95
TOTAL Investment In You	$ 121,781.04
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11440 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SARAH CARRILLO scarrillo@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,563.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,974.38
****Base Wages**	$ 152,879.17
TOTAL Investment In You	$ 182,853.55
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11442

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LI FANG

lifang@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 198.75
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,357.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,061.23
****Base Wages**	$ 124,766.93
TOTAL Investment In You	$ 165,828.16
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11444

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROLANDO ARCOS-PEREZ

roperez@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 32 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,121.37
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,999.46
****Base Wages**	$ 106,161.74
TOTAL Investment In You	$ 155,161.21
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11446

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHERRIMAINE DIZON

cdizon@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 17 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 9,001.15
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 21,508.96
****Base Wages**		$ 105,895.86
TOTAL Investment In You		$ 127,404.82
TOTAL Paid Time Off Days:		**31 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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Dear Colleague,

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11447

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAWN PARROTT

dparrott@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,467.98
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,346.07
****Base Wages**	$ 97,620.64
TOTAL Investment In You	$ 145,966.71
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11452

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAMELA GARCIA

pgarcia@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 65 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 42.29
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,423.40
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 42,369.30
****Base Wages**	$ 22,375.18
TOTAL Investment In You	$ 64,744.49
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11456

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EDEN FOLEY

efoley@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 1.06
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,099.15
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,101.57
****Base Wages**	$ 48,225.34
TOTAL Investment In You	$ 72,326.91
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11457 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CARLA JUSTICE

cjustice@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 39 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,483.82
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 94.79
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,836.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,770.81
****Base Wages**	$ 45,139.35
TOTAL Investment In You	$ 73,910.16
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11458

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARGIE SANTOS

margsantos@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 42 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 19,131.32
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 55.22
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,993.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,177.77
****Base Wages**	$ 46,978.40
TOTAL Investment In You	$ 81,156.17
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11459

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DEONTE TAYLOR

deotaylor@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,192.69
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,975.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,468.09
****Base Wages**	$ 91,188.66
TOTAL Investment In You	$ 119,656.75
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11465

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CARMEN HOFFMAN

choffman@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 32 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,252.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,130.09
****Base Wages**	$ 105,103.56
TOTAL Investment In You	$ 155,233.66
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11477

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

UGONNA AKWANI

uakwani@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,077.46
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,169.01
****Base Wages**	$ 107,452.80
TOTAL Investment In You	$ 133,621.81
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11482

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARISAL ANTE

maante@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,985.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,284.63
****Base Wages**	$ 117,453.02
TOTAL Investment In You	$ 143,737.65
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11484 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BENJAMIN CASTILLO JR bcastillo@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 17 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 17,560.27
****Base Wages**	$ 86,900.74
TOTAL Investment In You	$ 104,461.01
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11495

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARISSA BERNARDO

mbernardo@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 32 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,236.83
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,132.34
****Base Wages**	$ 104,266.24
TOTAL Investment In You	$ 154,398.58
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11496

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KIM JOHNSON

kimjohnson@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 35 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,661.36
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,889.95
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,074.08
****Base Wages**	$ 76,992.86
TOTAL Investment In You	$ 118,066.95
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11502

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KARLA AVILA

kavila@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 15 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,721.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 19,849.89
****Base Wages**	$ 114,000.02
TOTAL Investment In You	$ 133,849.91
TOTAL Paid Time Off Days:	**44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11506

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JACQUELINE WHARTON

jwharton@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 51 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 41.06
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,597.38
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,403.13
****Base Wages**	$ 42,322.18
TOTAL Investment In You	$ 86,725.31
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11513

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIBEL ROBERTS

maroberts@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 51 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 44.42
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,595.59
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,441.91
****Base Wages**	$ 42,301.02
TOTAL Investment In You	$ 85,742.94
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11514

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALEXANDER UBALDO

aubaldo@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 57 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 53.33
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,597.38
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,415.40
****Base Wages**	$ 32,917.25
TOTAL Investment In You	$ 77,332.65
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11515

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MORGAN BROOKS

mobrooks@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 41 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,320.52
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 85.17
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,858.04
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,299.02
****Base Wages**	$ 50,431.89
TOTAL Investment In You	$ 85,730.90
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11518

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TANVI GANDHI

tgandhi@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,667.44
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,190.21
****Base Wages**	$ 113,299.89
TOTAL Investment In You	$ 153,490.10
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11520

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANGELA ORR

angorr@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 101.67
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,367.45
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,470.46
****Base Wages**	$ 57,090.80
TOTAL Investment In You	$ 81,561.26
TOTAL Paid Time Off Days:	**34 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11525

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FORUM SHAH

fonaik@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,667.44
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,562.95
****Base Wages**	$ 113,299.89
TOTAL Investment In You	$ 162,862.84
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

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Dear Colleague,

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ALAMEDA HEALTH SYSTEM

Employee ID # 11527

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ADRIANA JOHNSON

adjohnson@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 37 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 85.17
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,858.04
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,111.54
****Base Wages**	$ 50,431.89
TOTAL Investment In You	$ 79,543.42
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11528

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANNETTE TOY

anntoy@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,124.70
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,630.05
****Base Wages**	$ 122,599.98
TOTAL Investment In You	$ 163,230.03
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11534

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WONDWOSEN ABAINEH

wabaineh@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,985.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 18,235.55
****Base Wages**	$ 93,962.42
TOTAL Investment In You	$ 112,197.97
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11537

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YVETTE DREW

yvdrew@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 41 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 642.46
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 41.06
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 3,597.38
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 16,417.89
****Base Wages**		$ 23,512.32
TOTAL Investment In You		$ 39,930.21
TOTAL Paid Time Off Days:		**36 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11538

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FASIKA GEBEREGIORGIS

fgeberegiorg@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 17 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,560.78
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 21,051.17
****Base Wages**	$ 100,715.10
TOTAL Investment In You	$ 121,766.27

TOTAL Paid Time Off Days: 40 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11544

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHARLENE BLANCHARD KALLUSCH

cblanchard@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,960.42
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,329.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,400.99
****Base Wages**	$ 95,805.22
TOTAL Investment In You	$ 135,206.21
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11547

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSE WILSON

rwilson@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 32 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 93.34
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,068.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,459.13
****Base Wages**	$ 53,004.56
TOTAL Investment In You	$ 78,463.69
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11552 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EON HUNTLEY

ehuntley@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 15 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 9,357.13
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 21,847.52
****Base Wages**	$ 124,766.93
TOTAL Investment In You	$ 146,614.45

TOTAL Paid Time Off Days: 40 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11554

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNY CHHOEUP

jchoeup@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 49 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 44.62
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,764.54
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,810.51
****Base Wages**	$ 24,604.84
TOTAL Investment In You	$ 48,415.35
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11563 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BERNARDO CUEVAS bcuevas@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,912.88
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,100.31
****Base Wages**	$ 94,021.20
TOTAL Investment In You	$ 120,121.51
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11567 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JANETTE MURDOCK jmurdock@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,357.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,360.72
****Base Wages**	$ 138,629.92
TOTAL Investment In You	$ 164,990.64
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11569

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHIDINMA NWAKUDU

cnwakudu@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 44 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 100.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,487.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,353.01
****Base Wages**	$ 58,664.53
TOTAL Investment In You	$ 104,017.54
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11573

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHAD BAKER

cbaker@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,977.13
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,203.65
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,703.55
****Base Wages**	$ 102,435.84
TOTAL Investment In You	$ 148,139.39
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11574

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSEANNE DURAN

rduran@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 40 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 51.82
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,448.55
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,896.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,693.73
****Base Wages**	$ 40,743.87
TOTAL Investment In You	$ 67,437.61
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11575

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARRISA COSSEY

mcossey@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 19 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,201.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,629.89
****Base Wages**	$ 127,920.00
TOTAL Investment In You	$ 157,549.89
TOTAL Paid Time Off Days:	**25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11577

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ERIC MILLORA

emillora@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 51 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 84.12
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,675.09
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,523.90
****Base Wages**	$ 44,510.54
TOTAL Investment In You	$ 91,034.45
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11584

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RITA URBINA

rurbina@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,357.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,767.76
****Base Wages**	$ 69,314.96
TOTAL Investment In You	$ 99,082.72
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11587

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOSIE ALOMAR

jalomar@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,154.66
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,182.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,173.65
****Base Wages**	$ 101,272.54
TOTAL Investment In You	$ 134,446.19
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11589

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CARMELITA ALCANTARA

calcantara@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,028.84
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,357.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,497.44
****Base Wages**	$ 110,903.94
TOTAL Investment In You	$ 151,401.38
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11594

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KAMALJIT MAHIL

kmahil@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 42 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 85.17
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,458.58
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,993.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,928.86
****Base Wages**	$ 52,198.22
TOTAL Investment In You	$ 90,127.08
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11598

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FATIMA HASAN

fhasan@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 100.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,047.63
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,148.98
****Base Wages**	$ 52,910.21
TOTAL Investment In You	$ 77,059.19
TOTAL Paid Time Off Days:	**25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11609

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELINOR PEREZ

elperez@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 13 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,357.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 19,825.88
****Base Wages**	$ 138,629.92
TOTAL Investment In You	$ 158,455.80
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11613

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JIMMY JORDAN

jijordan@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 35 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 95.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,089.61
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,334.46
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,055.60
****Base Wages**	$ 56,659.62
TOTAL Investment In You	$ 86,715.21
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11616

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HUNG LE

hungle@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,421.70
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,721.17
****Base Wages**	$ 143,082.99
TOTAL Investment In You	$ 169,804.17
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11617

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KENNETH ERVIN

kervin@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,640.98
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,163.75
****Base Wages**	$ 73,738.29
TOTAL Investment In You	$ 110,902.04
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11623 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EMMANUEL GALIWANGO egaliwango@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 28 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,252.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,130.09
****Base Wages**	$ 131,379.46
TOTAL Investment In You	$ 181,509.55
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11624

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SABRINA HOFFMAN

shoffman@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 23 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,845.26
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,960.01
****Base Wages**	$ 89,480.56
TOTAL Investment In You	$ 116,440.57
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11626

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TINA QUON

tiquon@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,539.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,045.19
****Base Wages**	$ 151,230.14
TOTAL Investment In You	$ 192,275.33
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11629

2016

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JEFFREY BLANKENSHIP

jblankenship@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,518.31
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,928.94
****Base Wages**	$ 98,278.54
TOTAL Investment In You	$ 126,207.48
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11640

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MESFIN YIRGA

myirga@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,252.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,130.09
****Base Wages**	$ 118,241.51
TOTAL Investment In You	$ 168,371.60
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11643

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CRISPINO DALMACIO JR

cdalmacio@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,077.46
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 99.66
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,560.78
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,221.47
****Base Wages**	$ 89,524.53
TOTAL Investment In You	$ 114,746.01
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11648

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FARHOD CIGARCHI

fcigarchi@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 48 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 89.66
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,104.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,959.04
****Base Wages**	$ 48,290.49
TOTAL Investment In You	$ 93,249.53
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11650

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

REBECCA ALVARADO

ralvarado@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,207.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,103.35
****Base Wages**	$ 107,292.02
TOTAL Investment In You	$ 156,395.37
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11651

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHRISTOPHER CARRICK

ccarrick@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,601.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 13,729.06
****Base Wages**	$ 30,076.38
TOTAL Investment In You	$ 43,805.44
TOTAL Paid Time Off Days:	**15 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11654 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JIDE AKINSILO jakinsilo@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,991.10
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,357.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,145.20
****Base Wages**	$ 138,629.92
TOTAL Investment In You	$ 165,775.12
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11658

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAWN SHAW

dashaw@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 42 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 80.25
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,101.08
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,573.28
****Base Wages**	$ 48,247.99
TOTAL Investment In You	$ 83,821.28
TOTAL Paid Time Off Days:	**34 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11659

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELSIE DURAN

eduran@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,529.06
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,424.57
****Base Wages**	$ 150,487.17
TOTAL Investment In You	$ 200,911.74
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11660

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SUZANNA YUN

suzyun@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,985.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,988.75
****Base Wages**	$ 117,453.02
TOTAL Investment In You	$ 143,441.77
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11665

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GEOFFREY AGUAS

ageoffrey@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,129.46
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,024.97
****Base Wages**	$ 122,928.00
TOTAL Investment In You	$ 172,952.97
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11666

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RONLI LEVI

rolevi@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,320.60
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,402.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,616.03
****Base Wages**	$ 83,693.79
TOTAL Investment In You	$ 106,309.82
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11667

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARTHA LIPKIN

mlipkin@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 23 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,154.66
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,357.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,348.22
****Base Wages**	$ 110,903.94
TOTAL Investment In You	$ 144,252.16
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11668

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DANIEL MILLER

dmiller@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

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ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 100.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,751.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,149.04
****Base Wages**	$ 62,108.80
TOTAL Investment In You	$ 87,257.84
TOTAL Paid Time Off Days:	**44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11673

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TATIHANA THOMAS

tathomas@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 85.17
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,858.04
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,129.28
****Base Wages**	$ 50,431.89
TOTAL Investment In You	$ 71,561.16
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11678 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WILLIAM BONNER JR

wibonner@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,242.04
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,273.44
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,408.33
****Base Wages**	$ 119,571.94
TOTAL Investment In You	$ 145,980.27
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11679 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHANIKA HARRIS sharris@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,960.42
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,381.77
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 149,007.69
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11680 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JEFFREY UNG

jefung@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,464.92
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,875.55
****Base Wages**	$ 97,580.70
TOTAL Investment In You	$ 125,456.26
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11681

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TRAVIS LEICHSSENRING

tleichssenri@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 23 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 104.53
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 4,891.35
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 18,993.95
****Base Wages**		$ 63,939.20
TOTAL Investment In You		$ 82,933.15
TOTAL Paid Time Off Days:		**44 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11683

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AMANDA PITTMAN

apittman@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 38 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,200.66
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 101.34
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,444.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,781.41
****Base Wages**	$ 58,093.15
TOTAL Investment In You	$ 93,874.57
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

ALAMEDA HOSPTIAL

Employee ID # 11685

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HUAN WANG

huwang@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,545.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,050.57
****Base Wages**	$ 78,191.57
TOTAL Investment In You	$ 118,242.14
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11687

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MONSERRAT SILVA

msilva@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 51 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 37.15
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,048.67
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,383.05
****Base Wages**	$ 21,424.00
TOTAL Investment In You	$ 43,807.05
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11691 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JESSICA TRUPIANO jtrupiano@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,110.18
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,520.81
****Base Wages**	$ 83,649.20
TOTAL Investment In You	$ 111,170.01
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11696

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HANA GROBEL

hgrobel@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 12 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 10,432.71
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 22,940.52
****Base Wages**		$ 170,246.17
TOTAL Investment In You		$ 193,186.69
TOTAL Paid Time Off Days:		**40 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 11697

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MOHAMMED KHAN

kmohammed@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 39 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 105.63
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,275.55
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,415.86
****Base Wages**	$ 55,889.60
TOTAL Investment In You	$ 92,305.46
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11702 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LOVEPREET SINGH lsingh@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,985.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,096.63
****Base Wages**	$ 105,707.72
TOTAL Investment In You	$ 125,804.35
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11703

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SCOTT CHIMENTO

schimento@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 35 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 93.80
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,442.57
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,833.60
****Base Wages**	$ 46,458.21
TOTAL Investment In You	$ 71,291.82
TOTAL Paid Time Off Days:	**34 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11708

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MEGAN SOBOL

msobol@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 17 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,252.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,551.47
****Base Wages**	$ 131,379.46
TOTAL Investment In You	$ 157,930.93
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11709

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JASON JEW

jasjew@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,985.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,099.91
****Base Wages**	$ 82,217.12
TOTAL Investment In You	$ 111,317.02
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11710

2016

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DEEPIKA JANNAPUREDDY

djannapuredd@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 10 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 10,285.77
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 22,793.58
****Base Wages**		$ 202,673.95
TOTAL Investment In You		$ 225,467.53
TOTAL Paid Time Off Days:		**40 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11711

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CALVERT JONES

caljones@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 39 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,748.30
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 59.18
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 245.49
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,277.48
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,109.90
****Base Wages**	$ 33,548.86
TOTAL Investment In You	$ 54,658.76
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11716

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANALICIA AZPEITIA

aazpeitia@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,845.26
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,718.29
****Base Wages**	$ 89,480.56
TOTAL Investment In You	$ 127,198.85
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11717

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PHOEBE GAYLE CORPUZ

pcorpuz@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,066.12
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,494.17
****Base Wages**	$ 118,560.00
TOTAL Investment In You	$ 148,054.17
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11718

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JAMIE CHOI

jachoi@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,403.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,925.90
****Base Wages**	$ 87,875.84
TOTAL Investment In You	$ 127,801.74
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11725

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MOLLIE ALLEN

mallen@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 199.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,821.59
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,024.18
****Base Wages**	$ 102,243.02
TOTAL Investment In You	$ 127,267.21
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11731

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WANDA JOHNSON

wajohnson@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 17 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,799.87
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,449.28
****Base Wages**	$ 169,163.28
TOTAL Investment In You	$ 203,612.56
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11734

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MONICA CHAN

mochan@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 19 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,313.47
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 133,939.39
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11735

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHAT-JU WANG

chwang@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,424.63
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 137,050.55
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11736

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MELISSA YAP

melyap@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,424.63
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 137,050.55
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11737

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LUCAS FRESHMAN

lfreshman@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,960.42
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,418.99
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 148,044.91
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11744 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BICH TRAN bitran@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,985.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,395.79
****Base Wages**	$ 70,471.81
TOTAL Investment In You	$ 99,867.60
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11747

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FARAH OSMANI

fosmani@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 23 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,403.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,831.18
****Base Wages**	$ 98,860.32
TOTAL Investment In You	$ 127,691.50
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11749 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GEORGINIA EZEKWESILI

gezekwesili@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,960.42
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,135.05
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,206.94
****Base Wages**	$ 123,313.63
TOTAL Investment In You	$ 164,520.57
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11761

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIA KIEU

makieu@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,464.92
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,468.51
****Base Wages**	$ 97,580.70
TOTAL Investment In You	$ 122,049.22
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11762

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

REYNOLD FUJIKAWA

rfujikawa@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 898.30
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 6,998.29
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 20,146.98
****Base Wages**		$ 91,480.90
TOTAL Investment In You		$ 111,627.87
TOTAL Paid Time Off Days:		**41 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 11763

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TUONG TRAN

tutran@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,320.60
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 111.32
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,869.15
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,784.64
****Base Wages**	$ 89,792.77
TOTAL Investment In You	$ 112,577.41
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11765 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DARYL WU

darywu@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,591.61
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 142,217.53
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11770

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PRADEEP SAGAR

psagar@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 7,224.49
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 21,335.96
****Base Wages**		$ 94,437.82
TOTAL Investment In You		$ 115,773.79
TOTAL Paid Time Off Days:		**40 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11771

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JILLANE PEREZ

jiperez@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 39 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,200.66
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 103.96
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,333.95
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,636.64
****Base Wages**	$ 56,652.96
TOTAL Investment In You	$ 93,289.60
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11773

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FANNY DOMIJAN

fdomijan@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 40 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 63.81
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,998.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,063.43
****Base Wages**	$ 36,585.49
TOTAL Investment In You	$ 60,648.93
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11774

2016

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARCUS HOWARD

mahoward@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 39 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,200.66
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 99.35
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,305.79
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,603.87
****Base Wages**	$ 56,284.80
TOTAL Investment In You	$ 92,888.67
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11776

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNIFER DELA PAZ

jennguyen@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,483.82
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,560.78
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,513.35
****Base Wages**	$ 100,715.10
TOTAL Investment In You	$ 134,228.45
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11777

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHRISTINA DE LA ROSA

cdelarosa@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical		$ 21,036.60
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 6,108.54
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 36,635.53
****Base Wages**		$ 63,880.13
TOTAL Investment In You		$ 100,515.66
TOTAL Paid Time Off Days:		**36 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11778 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LILIANA AGUIRRE

laguirre@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 48 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 17.81
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,604.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,424.28
****Base Wages**	$ 47,118.45
TOTAL Investment In You	$ 90,542.73
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

EASTMONT WELLNESS

Employee ID # 11784

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KENNETH LESTER

klester@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 100.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,487.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,885.55
****Base Wages**	$ 58,664.53
TOTAL Investment In You	$ 83,550.08
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11789

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GERALDINE SHUTE

gshute@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,200.66
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 111.32
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,569.70
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,879.75
****Base Wages**	$ 85,878.42
TOTAL Investment In You	$ 124,758.17
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11792

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CESAR CASTELLON

ccastellon@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,077.46
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 50.75
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,423.40
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,035.18
****Base Wages**	$ 35,800.29
TOTAL Investment In You	$ 55,835.47
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11794

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RIZALDO RADONA JR

rradona@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 40 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 94.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,969.57
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,824.12
****Base Wages**	$ 51,889.76
TOTAL Investment In You	$ 86,713.88
TOTAL Paid Time Off Days:	**34 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11797

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GEORGE FREEMAN

gfreeman@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,648.86
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,154.21
****Base Wages**	$ 73,841.25
TOTAL Investment In You	$ 110,995.45
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11799

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CATHERINE ENCINAS

cencinas@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,252.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,130.09
****Base Wages**	$ 118,241.51
TOTAL Investment In You	$ 168,371.60
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11800

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELIZA SIBAL

esibal@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 92.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,162.44
****Base Wages**	$ 97,763.33
TOTAL Investment In You	$ 136,925.76
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11801

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALEMNESH HANDISO

ahandiso@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 23 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,424.63
****Base Wages**	$ 97,763.33
TOTAL Investment In You	$ 126,187.96
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11805 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRYAN FERRER bferrer@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,218.36
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 9,252.00
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 22,720.75
****Base Wages**		$ 105,103.56
TOTAL Investment In You		$ 127,824.32
TOTAL Paid Time Off Days:		**35 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11806

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EMILY FLORES

emflores@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 90.59
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,099.15
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,191.09
****Base Wages**	$ 53,583.71
TOTAL Investment In You	$ 77,774.80
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11812

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NSANSI MAVUZI

nmavuzi@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 85.10
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,444.55
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 12,666.64
****Base Wages**	$ 45,026.80
TOTAL Investment In You	$ 57,693.44
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11813

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JACKIE ALAMILLO

jalamilo@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 61 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 51.60
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,113.98
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,930.27
****Base Wages**	$ 28,493.92
TOTAL Investment In You	$ 72,424.19
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11816

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOSE MEJIA

josmejia@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 89.05
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,604.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,990.85
****Base Wages**	$ 47,118.45
TOTAL Investment In You	$ 71,109.29
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11820

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MYRA LUZ LEE

myrlee@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 92.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,167.50
****Base Wages**	$ 97,763.33
TOTAL Investment In You	$ 146,930.82
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

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Dear Colleague,

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11821

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MITCHELL MERCADO

mimercado@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 92.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,404.16
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 137,030.08
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11823

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRIDGET SAEPARN

bsaeparn@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 23 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 92.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,700.04
****Base Wages**	$ 97,763.33
TOTAL Investment In You	$ 126,463.36
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11824

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HALLEY DARIGAN

hdarigan@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 92.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,794.76
****Base Wages**	$ 86,900.74
TOTAL Investment In You	$ 126,695.49
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11825

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SARA NORTON

sanorton@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 23 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 92.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,700.04
****Base Wages**	$ 97,763.33
TOTAL Investment In You	$ 126,463.36
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11827

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CEBASTIEN ZEPHYR

czephyr@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 92.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,404.16
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 137,030.08
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11828

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MEKEDES LEMMA

mlemma@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 38 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 92.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,794.76
****Base Wages**	$ 65,175.55
TOTAL Investment In You	$ 104,970.31
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11829 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TAOFIQ BELLO

tbello@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,985.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,595.79
****Base Wages**	$ 105,707.72
TOTAL Investment In You	$ 135,303.51
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11834

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSHEMAH BRENT

rbrent@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,007.92
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 14,258.31
****Base Wages**	$ 65,463.01
TOTAL Investment In You	$ 79,721.32
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11835

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RODERICK DURANT

rdurant@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,121.37
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,532.00
****Base Wages**	$ 106,161.74
TOTAL Investment In You	$ 134,693.75
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11836

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SORIN NEAGU

sneagu@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 37 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 97.19
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,062.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,456.74
****Base Wages**	$ 42,481.75
TOTAL Investment In You	$ 66,938.49
TOTAL Paid Time Off Days:	**34 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11837

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LEIGH VON RUEDEN

lvonrueden@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,129.46
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,024.97
****Base Wages**	$ 98,342.40
TOTAL Investment In You	$ 148,367.37
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11838

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KIMIKO TAHARA

ktahara@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 28 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 98.38
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 3,982.09
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 16,457.46
****Base Wages**		$ 41,642.76
TOTAL Investment In You		$ 58,100.22

TOTAL Paid Time Off Days: 41 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11841

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAURA FRANCO

lfranco@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 13,664.30
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,278.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,411.67
****Base Wages**	$ 133,215.47
TOTAL Investment In You	$ 166,627.15
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11846

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AKBERET TESFAY

atesfay@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,309.88
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 20,800.27
****Base Wages**		$ 97,763.33
TOTAL Investment In You		$ 118,563.60
TOTAL Paid Time Off Days:		**40 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11848

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NEILA ANGLO

nanglo@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 32 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,910.72
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,788.81
****Base Wages**	$ 104,832.00
TOTAL Investment In You	$ 154,620.81
TOTAL Paid Time Off Days:	**25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11850

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAVIS BRAXTON

mbraxton@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,069.74
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,368.89
****Base Wages**	$ 118,809.60
TOTAL Investment In You	$ 153,178.49
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11852

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JEANENE JOHNSON

jejohnson@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,815.23
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 148,441.15
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11855

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DESIREE MENDONCA

dnieva@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 17 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 7,530.93
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 20,021.32
****Base Wages**	$ 98,443.49
TOTAL Investment In You	$ 118,464.80

TOTAL Paid Time Off Days: 36 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11856

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHINH DURAZZO

cdurazzo@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 4,177.92
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,309.88
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 24,978.19
****Base Wages**	$ 97,763.33
TOTAL Investment In You	$ 122,741.52

TOTAL Paid Time Off Days: 35 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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*****Base Wages** = hourly rate X 2080 hours x current calculated FTE.*

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11857

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALISON HAMILTON

alhamilton@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 6,683.04
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 19,173.43
****Base Wages**		$ 87,360.00
TOTAL Investment In You		$ 106,533.43

TOTAL Paid Time Off Days: 37 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11860

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL GREEN

mgreen@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,650.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,782.17
****Base Wages**	$ 99,999.95
TOTAL Investment In You	$ 127,782.12
TOTAL Paid Time Off Days:	**44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11869

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LILY DUONG

lduong@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,985.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,490.51
****Base Wages**	$ 93,962.42
TOTAL Investment In You	$ 134,452.93
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11871

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EDNA SANA-HORTINELA

eshortinela@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 99.32
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 9,294.58
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 21,770.89
****Base Wages**		$ 67,158.00
TOTAL Investment In You		$ 88,928.89
TOTAL Paid Time Off Days:		**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11874

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHERICE YOUNGBLOOD

syoungblood@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 37 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,120.01
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,015.52
****Base Wages**	$ 80,000.13
TOTAL Investment In You	$ 127,015.65
TOTAL Paid Time Off Days:	**25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11875

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NANIK HATSAKORZIAN

nhatsakorizi@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 17 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,421.70
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,832.33
****Base Wages**	$ 143,082.99
TOTAL Investment In You	$ 172,915.33
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11877

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALIANA LITTLE

alittle@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,771.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,181.93
****Base Wages**	$ 114,657.50
TOTAL Investment In You	$ 143,839.43
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11882

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

IHUOMA OCHURU

iochuru@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 19,421.35
****Base Wages**	$ 86,900.74
TOTAL Investment In You	$ 106,322.09
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11883

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BELKIS ZHONG

bzhong@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 19 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,560.78
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 17,811.17
****Base Wages**	$ 78,333.96
TOTAL Investment In You	$ 96,145.14
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11887 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DON PHILLIPS

dophillips@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,357.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,471.88
****Base Wages**	$ 138,629.92
TOTAL Investment In You	$ 168,101.80
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11890

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

THU LE

thulex@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,719.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,129.88
****Base Wages**	$ 100,905.17
TOTAL Investment In You	$ 129,035.04
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11892

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VI THU HUYEN LU

vlu@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,832.02
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,590.01
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,036.42
****Base Wages**	$ 60,000.10
TOTAL Investment In You	$ 81,036.51
TOTAL Paid Time Off Days:	**44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11893

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SUELLEN JACKSON

sljackson@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 17 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,377.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,509.17
****Base Wages**	$ 140,000.02
TOTAL Investment In You	$ 169,509.19
TOTAL Paid Time Off Days:	**44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11894

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SRILA BHATTACHARYA

sbhattacharya@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,960.42
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,159.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,248.81
****Base Wages**	$ 125,000.10
TOTAL Investment In You	$ 166,248.91
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11896

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RICHARD JARRATT

rjarratt@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,224.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,506.22
****Base Wages**	$ 94,437.82
TOTAL Investment In You	$ 126,944.05
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11898

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARJORIE MACQUEEN

mmacqueen@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,704.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,115.12
****Base Wages**	$ 162,585.28
TOTAL Investment In You	$ 192,700.40
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11901

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TERRIE DIXON

tdixon@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,345.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,240.61
****Base Wages**	$ 137,800.00
TOTAL Investment In You	$ 188,040.61
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11902

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MEGAN MONTOYA

mmontoya@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 38 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,569.20
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,501.93
****Base Wages**	$ 72,800.00
TOTAL Investment In You	$ 118,301.93
TOTAL Paid Time Off Days:	**17 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11903

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VIKTORIA BARRDAHL

vbarrdahl@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,560.78
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,066.13
****Base Wages**	$ 78,333.96
TOTAL Investment In You	$ 118,400.10
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

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Dear Colleague,

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11909 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AILEEN MCCLINTOCK

ahoffman@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,187.97
****Base Wages**	$ 97,763.33
TOTAL Investment In You	$ 146,951.30
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11912

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SANDRA CORPUS

scorpus@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 19 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,797.51
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,114.40
****Base Wages**	$ 115,000.08
TOTAL Investment In You	$ 141,114.48
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11914

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DARRYLENA BERKLEY

dberkley@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 61 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 49.14
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,048.67
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,899.72
****Base Wages**	$ 26,780.00
TOTAL Investment In You	$ 68,679.72
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11915

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAE ANNEGELI MUNAR

mmunar@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,560.78
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,971.41
****Base Wages**	$ 100,715.10
TOTAL Investment In You	$ 129,686.51
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11918

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LILY WONG

liwong@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 35 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,091.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,597.19
****Base Wages**	$ 66,560.00
TOTAL Investment In You	$ 103,157.19
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11919

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ILEITA LAFITTE

ilafitte@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 28 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,573.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,078.91
****Base Wages**	$ 99,000.72
TOTAL Investment In You	$ 138,079.63
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11920

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOHN BRAVO

jobravo@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,252.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,757.35
****Base Wages**	$ 131,379.46
TOTAL Investment In You	$ 172,136.81
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11921

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MULU YIMER

myimer@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,187.97
****Base Wages**	$ 86,900.74
TOTAL Investment In You	$ 136,088.71
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11925

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHARLENE PAULINO

cpaulino@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,912.88
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,560.78
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,366.51
****Base Wages**	$ 78,333.96
TOTAL Investment In You	$ 103,700.48
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11928

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL MELENDRES

mmelendres@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 42 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 30.99
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,136.26
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,464.48
****Base Wages**	$ 32,797.44
TOTAL Investment In You	$ 56,261.92
TOTAL Paid Time Off Days:	**33 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11930

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALYSSA SANTOS

alsantos@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 19 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,309.88
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 20,800.27
****Base Wages**	$ 86,900.74
TOTAL Investment In You	$ 107,701.01

TOTAL Paid Time Off Days: 35 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11933

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALVIN TONG

altong@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 88.83
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,595.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,981.55
****Base Wages**	$ 46,999.89
TOTAL Investment In You	$ 70,981.44
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11934

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALFORD MCWRIGHT

amcwright@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 37 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 49.57
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,595.59
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,181.17
****Base Wages**	$ 47,001.14
TOTAL Investment In You	$ 75,182.31
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11935

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNIFER PHAM

jepham@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 88.83
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,595.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,981.55
****Base Wages**	$ 46,999.89
TOTAL Investment In You	$ 70,981.44
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11936

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FRANCESCA AU

franau@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,329.70
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,644.45
****Base Wages**	$ 109,390.53
TOTAL Investment In You	$ 139,034.98
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11939

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANTHONY NGUYEN

antnguyen@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 88.83
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,595.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,685.67
****Base Wages**	$ 46,999.89
TOTAL Investment In You	$ 70,685.56
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11943

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MATTHEW AUYOUNG

mauyoung@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 23 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,832.02
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 17,133.50
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 74,204.54
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11944

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AMY BACA

ambaca@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,209.86
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 89,280.90
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11945

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

INGRID BAUER

inbauer@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 44 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,158.22
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 101,229.26
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Dear Colleague,

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11947

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GARLAND CASTANEDA

gcastaneda@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,115.14
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 78,186.18
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11952

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DANIEL GEORGIE

dgeorgie@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,819.26
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 77,890.30
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11953

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DONOVAN HUYNH

dohuynh@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,819.26
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 77,890.30
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11956

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LESLIE LITTLEFIELD

llittlefield@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 39 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,748.26
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 92,819.30
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11957

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ARISTEO LOPEZ

arlopez@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,357.66
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 81,428.70
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11958

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RAUL MACIAS GIL

ramacias@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 23 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 0.00
Long Term Disability		$ 0.00
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 4,365.93
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 16,733.30
****Base Wages**		$ 57,071.04
TOTAL Investment In You		$ 73,804.34
TOTAL Paid Time Off Days:		**23 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11959

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRITTANY MCUNU

bmcunu@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 28 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,991.10
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,830.98
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 78,902.02
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11960

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARVIN MIRANDA

mamiranda@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 32 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 12,641.20
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,352.86
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 84,423.90
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11962

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARTIN ROFAEL

mrofael@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,357.66
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 81,428.70
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11965

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LOTON SHIPPEY

lshippey@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,440.64
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,613.90
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 89,684.94
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

*****Base Wages** = hourly rate X 2080 hours x current calculated FTE.*

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11966

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RAMAN SOI

ramsoi@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 200.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,019.26
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 78,090.30
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11967

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL SONG

misong@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,320.60
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,456.36
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 77,527.40
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11969

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SIDRA SUESS

ssuess@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 44 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,158.22
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 101,229.26
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11971

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SERENE CHEN

sechen@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,115.14
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 78,186.18
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11972

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PETRINA CRAINE

pcraine@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

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ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,115.14
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 78,186.18
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11973

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRITTANY DIXON

bdixon@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,653.54
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 81,724.58
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11974

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KEVIN GARDNER

kgardner@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

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ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,115.14
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 78,186.18
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11975

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HANNAH SIROKER

haharrison@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 15 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 9,954.90
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 67,025.94
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11976

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHAD MCCARTHY

chmccarthy@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 15 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 200.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 10,154.90
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 67,225.94
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11977

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALEXANDER HOANG

ahoang@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,115.14
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 78,186.18
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11978

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ASHLEY RIDER

arider@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

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ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,819.26
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 77,890.30
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11979

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KASEBAOTH MEKONNEN

kmekonnen@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,209.86
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 89,280.90
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11980

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARTHA MONTGOMERY

mmontgomery@alamedahealthsystem.or

Alameda makes benefit contributions in the amount of 27 % of your income.

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ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
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Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,115.14
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Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11981

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JASPREET VOHRA

jvohra@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,209.86
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 89,280.90
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11982

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ERICA VALDOVINOS

ervaldovinos@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

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ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,209.86
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TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11983

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YAEL BOGLER

ybogler@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 42 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,619.82
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 97,690.86
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11984

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SULMA HERRERA

sherrera@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 198.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,090.32
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 86,161.36
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11985

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOSHUA PARFITT

jparfitt@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 35 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,991.50
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 88,062.54
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11986

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GIAO VU

giaovu@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 827.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,472.68
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 77,543.72
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11987

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHENG LIN

shenglin@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,011.08
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 81,082.12
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11988

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JUVY MONTES

jmontes@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 37 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,842.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,720.25
****Base Wages**	$ 80,496.00
TOTAL Investment In You	$ 128,216.25
TOTAL Paid Time Off Days:	**17 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11990

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TSEHAY MESFIN

tmesfin@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 19 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,309.88
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 20,800.27
****Base Wages**	$ 86,900.74
TOTAL Investment In You	$ 107,701.01

TOTAL Paid Time Off Days: 35 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11993

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARC ARIZALA

marizala@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 28 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,494.76
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 92.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,932.86
****Base Wages**	$ 97,763.33
TOTAL Investment In You	$ 136,696.18
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11994

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRENDA CASTANEDA AYALA

bcayala@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,960.42
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,418.99
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 148,044.91
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11996

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TINA MARIE CHANEY

tchaney@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 92.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,571.14
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 142,197.06
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11997

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHEN CHENG

ccheng@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,720.51
****Base Wages**	$ 86,900.74
TOTAL Investment In You	$ 115,621.25
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11998

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AARON CLINE

acline@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 19 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,313.47
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 133,939.39
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11999

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARY CHRISTER ESPENIDA

mespenida@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,751.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,666.91
****Base Wages**	$ 114,400.00
TOTAL Investment In You	$ 163,066.91
TOTAL Paid Time Off Days:	**25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12000

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CAROL HARDY

chardy@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,309.88
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 22,421.35
****Base Wages**		$ 86,900.74
TOTAL Investment In You		$ 109,322.09
TOTAL Paid Time Off Days:		**35 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12002

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MATTHEW LECH

malech@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,424.63
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 137,050.55
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12003

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARCUS LUCERO

mlucero@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,424.63
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 137,050.55
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12005

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CEDRICK MAJOR

cmajor@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 6,000.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,156.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 56,052.11
****Base Wages**	$ 124,800.00
TOTAL Investment In You	$ 180,852.11
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12008

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DINO POLLASTRINI

dpollastrini@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

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ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,424.63
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 137,050.55
TOTAL Paid Time Off Days:	**35 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12009

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GHEMIE SANGIL

gsangil@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,309.88
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 20,800.27
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 129,426.19

TOTAL Paid Time Off Days: 35 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12010

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NICHOLE SOLIS

nsolis@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,591.61
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 142,217.53
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12011

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

UWAEZU UMEH

uwumeh@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 898.30
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,309.88
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 21,458.57
****Base Wages**		$ 97,763.33
TOTAL Investment In You		$ 119,221.90
TOTAL Paid Time Off Days:		**35 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12013

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MONICA BRUNETTO

mbrunetto@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,720.51
****Base Wages**	$ 86,900.74
TOTAL Investment In You	$ 115,621.25
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12014

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

QUOC HUYNH

qhuynh@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,225.19
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 156,851.11
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12016

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHIA-FENG LI

chiali@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 112.44
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,503.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 18,753.05
****Base Wages**	$ 74,366.24
TOTAL Investment In You	$ 93,119.29
TOTAL Paid Time Off Days:	**25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12020

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

IRA HOLLEY

iholley@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 14 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 1,131.00
Long Term Disability	$ 1,427.33
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 10,174.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,020.44
****Base Wages**	$ 195,000.00
TOTAL Investment In You	$ 228,020.44
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12024

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VANESSA ANTOLINEZ MORALES

vamorales@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,653.54
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 81,724.58
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12025

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LUIS JEREZ ROMERO

ljromero@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,653.54
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 81,724.58
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12026

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NABEL CAJEE

ncajee@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

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ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,653.54
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 81,724.58
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12027

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SUMMER LANE

sulane@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 44 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,121.00
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 102,192.04
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12029

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MEHRDAD MOSADDAD

mmosaddad@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,434.02
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,844.65
****Base Wages**	$ 97,176.77
TOTAL Investment In You	$ 125,021.42
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12030

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAUL WILLIAMS

pawilliams@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 40 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,092.14
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,970.23
****Base Wages**	$ 74,045.75
TOTAL Investment In You	$ 123,015.99
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12031 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NONSO EGWUATU negwuatu@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,092.14
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,007.45
****Base Wages**	$ 84,623.72
TOTAL Investment In You	$ 132,631.17
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12033

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAURIE BAGLEY

labagley@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 23 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,326.29
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,219.08
****Base Wages**	$ 82,696.64
TOTAL Investment In You	$ 106,915.72
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 12034

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CLAUDIA CANAVERAL

CCanaveral@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,433.36
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,686.15
****Base Wages**	$ 110,240.00
TOTAL Investment In You	$ 158,926.15
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12035

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NATHAN CHUNG

nchung@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,038.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,933.51
****Base Wages**	$ 92,000.06
TOTAL Investment In You	$ 139,933.58
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12037

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JESSICA PITT

jepitt@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 12 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,696.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 18,963.81
****Base Wages**	$ 145,799.97
TOTAL Investment In You	$ 164,763.78
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12045

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NANCY MAWYER

nmawyer@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,172.67
****Base Wages**	$ 134,316.00
TOTAL Investment In You	$ 184,488.67
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12046

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PIYANOOT BATH

pibath@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,960.42
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,135.05
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,206.94
****Base Wages**	$ 123,313.63
TOTAL Investment In You	$ 164,520.57
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12047

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KRISTINE RESURRECCION

kresurreccio@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 28 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,560.78
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,066.13
****Base Wages**	$ 100,715.10
TOTAL Investment In You	$ 140,781.23
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12049

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHELLE LEBRUN

mlebrun@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,320.60
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,456.36
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 77,527.40
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12050

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MELINDA PHAN

mephan@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 93.31
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,937.92
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,199.55
****Base Wages**	$ 51,476.05
TOTAL Investment In You	$ 80,675.60
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12052

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HEE KYUNG SOHN

hesohn@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,309.88
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 20,800.27
****Base Wages**	$ 65,175.55
TOTAL Investment In You	$ 85,975.82

TOTAL Paid Time Off Days: 35 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12059

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SARAH HOFFMAN

sahoffman@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 42 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 63.28
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,268.55
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,333.18
****Base Wages**	$ 33,478.85
TOTAL Investment In You	$ 57,812.03
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Dear Colleague,

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12060

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHRISTINA KIM

chrkim@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,704.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,582.58
****Base Wages**	$ 97,551.17
TOTAL Investment In You	$ 148,133.74
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12062

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RENAE BADGER

rbadger@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,252.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,662.63
****Base Wages**	$ 118,241.51
TOTAL Investment In You	$ 147,904.14
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12063

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARYLIN WAKEFIELD

mwakefield@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,080.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,013.57
****Base Wages**	$ 92,560.00
TOTAL Investment In You	$ 139,573.57
TOTAL Paid Time Off Days:	**25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12064

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAURA WONG

lawong@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 109.83
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,445.34
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,445.35
****Base Wages**	$ 58,108.96
TOTAL Investment In You	$ 79,554.31
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12068

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PUREVSUREN DAVAADORJ

pdavaadorj@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 43 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,748.30
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 51.06
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 432.95
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,444.55
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,160.43
****Base Wages**	$ 27,016.08
TOTAL Investment In You	$ 47,176.51
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12070

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELIZABETH POINDEXTER

epoindexter@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,737.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,148.13
****Base Wages**	$ 75,000.02
TOTAL Investment In You	$ 101,148.15
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12071 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL GRUBB

mgrubb@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 15 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,092.14
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 17,342.53
****Base Wages**	$ 95,201.68
TOTAL Investment In You	$ 112,544.22
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12072

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROXANNE MONLUX

rmonlux@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,242.04
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,429.47
****Base Wages**	$ 120,884.40
TOTAL Investment In You	$ 147,313.87
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

WATERS EDGE

Employee ID # 12074

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LEONILIZA MESIONA

lmesiona@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,243.85
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,159.16
****Base Wages**	$ 81,618.99
TOTAL Investment In You	$ 127,778.15
TOTAL Paid Time Off Days:	**17 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 12077

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHERYL SCHLICHTMAN

cschlichtman@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,410.08
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,820.71
****Base Wages**	$ 70,720.00
TOTAL Investment In You	$ 96,540.71
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12079

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHULIN LIN

shulin@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,097.61
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,993.12
****Base Wages**	$ 120,731.52
TOTAL Investment In You	$ 170,724.64
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12080 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MEGAN MILLS mmills@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,705.21
****Base Wages**	$ 80,589.60
TOTAL Investment In You	$ 110,294.81
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12081

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AMANDA BEESON

abeeson@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,571.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 15,822.27
****Base Wages**	$ 85,906.91
TOTAL Investment In You	$ 101,729.18
TOTAL Paid Time Off Days:	**36 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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ALAMEDA HEALTH SYSTEM

Employee ID # 12082

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TRONG CAO

trocao@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,960.42
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,224.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,333.60
****Base Wages**	$ 94,437.82
TOTAL Investment In You	$ 132,771.43
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12085

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAVID ROTRAMEL

drotramel@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 52 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 76.59
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,444.55
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,285.83
****Base Wages**	$ 40,524.12
TOTAL Investment In You	$ 84,809.95
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12086

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KRISTA SIMKINS

ksimkins@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,502.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,392.95
****Base Wages**	$ 85,000.03
TOTAL Investment In You	$ 122,392.98
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12090

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DELVECCHIO FINLEY

dfinley@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 9 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 495.04
Long Term Disability	$ 1,427.33
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 16,047.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 58,724.44
****Base Wages**	$ 599,999.92
TOTAL Investment In You	$ 658,724.36
TOTAL Paid Time Off Days:	**44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12096

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAVID HARDY

dhardy@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,099.89
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 18,350.28
****Base Wages**	$ 96,711.01
TOTAL Investment In You	$ 115,061.29
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12097

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSA MARES

rmares@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 49 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 45.93
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,717.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,765.08
****Base Wages**	$ 24,299.39
TOTAL Investment In You	$ 48,064.47
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12098

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SARA MENDOZA

smendoza@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 19 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 7,038.00
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 21,166.89
****Base Wages**		$ 92,000.06
TOTAL Investment In You		$ 113,166.96
TOTAL Paid Time Off Days:		**39 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 12099

2016

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

IRMA NAVARRO MORA

inavarro@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 43 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 111.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,512.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,388.50
****Base Wages**	$ 58,984.64
TOTAL Investment In You	$ 104,373.14
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12102

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAXIMIANO FLORES

maxflores@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,224.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,097.52
****Base Wages**	$ 94,437.82
TOTAL Investment In You	$ 132,535.35
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12104 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HABEN YOSEF hyosef@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,985.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,002.17
****Base Wages**	$ 93,962.42
TOTAL Investment In You	$ 141,964.59
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12107

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARY ANN ZALAMEA

mzalamea@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,274.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,207.26
****Base Wages**	$ 132,932.80
TOTAL Investment In You	$ 182,140.06
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12109

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RENWICK WHALEY

rwhaley@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 44 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 55.53
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,896.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,953.01
****Base Wages**	$ 30,557.90
TOTAL Investment In You	$ 54,510.91
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12113

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YONATAN ASGODOM

yasgodom@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,434.02
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,349.33
****Base Wages**	$ 97,176.77
TOTAL Investment In You	$ 144,526.10
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12117

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DIMPLE KUMAR

kdimple@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 5,039.39
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 17,547.20
****Base Wages**	$ 65,874.43
TOTAL Investment In You	$ 83,421.64

TOTAL Paid Time Off Days: 41 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12118

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TAYLOR RAE DARTEZ

tdartez@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 41 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 93.31
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,776.68
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,686.04
****Base Wages**	$ 49,368.38
TOTAL Investment In You	$ 84,054.42
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12122

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JAMES DEVOTO

jdevoto@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 32 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,960.42
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,273.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,362.31
****Base Wages**	$ 82,000.05
TOTAL Investment In You	$ 120,362.36
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

*****Base Wages** = hourly rate X 2080 hours x current calculated FTE.*

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12124

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FOLASHADE OLALEYE

folaleye@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 17 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,403.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 17,670.94
****Base Wages**	$ 87,875.84
TOTAL Investment In You	$ 105,546.78
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12130

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PERLINA SANTOS

psantos@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 51 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 42.29
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,423.40
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,467.04
****Base Wages**	$ 22,375.18
TOTAL Investment In You	$ 45,842.23
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12131

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YING FANG

yifang@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 28 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,560.78
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,433.81
****Base Wages**	$ 100,715.10
TOTAL Investment In You	$ 140,148.91
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12135

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TRACY STONE

tstone@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 19 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 8,269.23
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 10,464.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,256.50
****Base Wages**	$ 215,000.03
TOTAL Investment In You	$ 265,256.53
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12137

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LISA COOPER

licooper@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 17 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 7,467.98
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 19,958.37
****Base Wages**		$ 97,620.64
TOTAL Investment In You		$ 117,579.01
TOTAL Paid Time Off Days:		**36 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12138

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FRANCISCO DIAZ FELIX

frdiaz@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 41 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,039.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,972.12
****Base Wages**	$ 65,874.43
TOTAL Investment In You	$ 110,846.56
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12140

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LORNA JONES

lojones@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,038.46
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,884.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 54,818.47
****Base Wages**	$ 174,999.97
TOTAL Investment In You	$ 229,818.44
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12142

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BELLA VENTURANZA

bventuranza@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,185.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,862.02
****Base Wages**	$ 85,596.16
TOTAL Investment In You	$ 133,458.18
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12145

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHRISTOPHER DANIELS

chdaniels@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 50 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 42.29
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,597.38
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,936.90
****Base Wages**	$ 23,512.32
TOTAL Investment In You	$ 47,449.22
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Dear Colleague,

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 12150

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TEFERI GONFA

tgonfa@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 51 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 83.74
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,648.86
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,534.50
****Base Wages**	$ 44,304.75
TOTAL Investment In You	$ 89,839.25
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12152

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHEVON KORTH

skorth@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,960.42
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,038.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,127.31
****Base Wages**	$ 92,000.06
TOTAL Investment In You	$ 131,127.38
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12155 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EDDIE LIVINGSTON elivingston@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,705.21
****Base Wages**	$ 80,589.60
TOTAL Investment In You	$ 110,294.81
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12156

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MANWINDER SIDHU

msidhu@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,181.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,059.75
****Base Wages**	$ 106,949.86
TOTAL Investment In You	$ 156,009.61
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12157

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VICTORIA LEE

viclee@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 15 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,457.40
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,460.99
****Base Wages**	$ 145,544.67
TOTAL Investment In You	$ 172,005.66
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12159 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DALE BOWDEN

dparizi@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 28 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,182.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,060.65
****Base Wages**	$ 126,590.67
TOTAL Investment In You	$ 176,651.33
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12160

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TAMEKA JOHNSON

tajohnson@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 46 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 52.63
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,550.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,900.48
****Base Wages**	$ 27,848.00
TOTAL Investment In You	$ 51,748.48
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12164

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MILAGRO SALINAS

msalinas@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,748.30
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 71.70
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,836.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,436.35
****Base Wages**	$ 37,936.45
TOTAL Investment In You	$ 59,372.80
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12166

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAURA BAEZA

lbaeza@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,748.30
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,935.73
****Base Wages**	$ 80,589.60
TOTAL Investment In You	$ 106,525.33
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 12170

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANDREW HOLLAND

aholland@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 40 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 100.66
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,426.96
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,919.57
****Base Wages**	$ 58,250.65
TOTAL Investment In You	$ 97,170.22
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Dear Colleague,

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ALAMEDA HEALTH SYSTEM

Employee ID # 12173

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DIRK PERKINS

dperkins@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 75.80
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,129.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,502.36
****Base Wages**	$ 40,906.32
TOTAL Investment In You	$ 64,408.68
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12180

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ENORESE IGBINOGUN

eigninogun@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 68.08
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,444.55
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 12,649.62
****Base Wages**	$ 36,021.44
TOTAL Investment In You	$ 48,671.06
TOTAL Paid Time Off Days:	**36 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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ALAMEDA HEALTH SYSTEM

Employee ID # 12185

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JUANA SHELTON

jshelton@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,576.31
****Base Wages**	$ 134,316.00
TOTAL Investment In You	$ 168,892.31
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12186

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NOVILENE CLAVIDO

nclavido@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,225.85
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,103.94
****Base Wages**	$ 94,455.50
TOTAL Investment In You	$ 142,559.44
TOTAL Paid Time Off Days:	**25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12187

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SARAH GILMAN

sgilman@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,334.20
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,266.93
****Base Wages**	$ 82,800.02
TOTAL Investment In You	$ 129,066.95
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12189

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL MACDONALD

mmacdonald@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 75.80
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,129.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,206.48
****Base Wages**	$ 40,906.32
TOTAL Investment In You	$ 64,112.80
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12190

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AMY TRAN

amtran@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,497.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,925.05
****Base Wages**	$ 98,000.03
TOTAL Investment In You	$ 125,925.08
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12192

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GENEVIEVE MAJORS

gmajors@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,218.36
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,545.22
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 22,013.97
****Base Wages**		$ 67,021.34
TOTAL Investment In You		$ 89,035.32
TOTAL Paid Time Off Days:		**32 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 12193

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MYLA AYUBO

mayubo@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 35 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 346.58
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 52.05
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 2,106.75
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 14,642.37
****Base Wages**		$ 27,539.20
TOTAL Investment In You		$ 42,181.57
TOTAL Paid Time Off Days:		**35 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12195

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STEWART TRAIMAN

straiman@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,578.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,474.35
****Base Wages**	$ 153,920.00
TOTAL Investment In You	$ 204,394.35
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12199

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BETTY CLARK

bclark@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,076.08
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,504.13
****Base Wages**	$ 79,425.84
TOTAL Investment In You	$ 105,929.97
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12201

2016

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WAHIDA WARDAK

wwardak@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 47 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 97.29
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,937.92
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,799.90
****Base Wages**	$ 51,476.05
TOTAL Investment In You	$ 96,275.95
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12203

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AGNES ESTANDIAN

aestandian@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 62 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 49.14
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 1,989.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 42,802.83
****Base Wages**	$ 26,000.00
TOTAL Investment In You	$ 68,802.83
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12204

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JAMES FRAZIER

jfrazier@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,991.10
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 76.17
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,082.95
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,929.67
****Base Wages**	$ 40,300.00
TOTAL Investment In You	$ 61,229.67
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12207

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RICHARD TISHLER

rtishler@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 44 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 55.56
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,212.63
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,269.54
****Base Wages**	$ 29,396.64
TOTAL Investment In You	$ 52,666.18
TOTAL Paid Time Off Days:	**33 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12210

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARINA GRACE MORALES

mgmorales@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,545.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,955.85
****Base Wages**	$ 67,021.34
TOTAL Investment In You	$ 95,977.20
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12213

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SIA KOMBA

skomba@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,545.22
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 21,035.61
****Base Wages**	$ 67,021.34
TOTAL Investment In You	$ 88,056.96

TOTAL Paid Time Off Days: 32 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12214

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SELINA FISHER

sfisher@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 64 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 45.71
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,083.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,894.15
****Base Wages**	$ 24,186.24
TOTAL Investment In You	$ 68,080.39
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12215

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EDITH NUNEZ

enunez@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 642.46
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 102.89
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 4,627.21
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 17,509.55
****Base Wages**		$ 54,437.76
TOTAL Investment In You		$ 71,947.31
TOTAL Paid Time Off Days:		**33 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 12218

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHARON MARTIN

shmartin@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,797.51
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,225.56
****Base Wages**	$ 115,000.08
TOTAL Investment In You	$ 144,225.64
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12219

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DEVIN GAFFNEY

dgaffney@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,426.96
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,541.71
****Base Wages**	$ 67,959.09
TOTAL Investment In You	$ 95,500.80
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12220

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LINDA JOHNSON

ljohnson2@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 1,218.36
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,236.83
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 19,723.00
****Base Wages**	$ 104,266.24
TOTAL Investment In You	$ 123,989.24
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12221

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VERONICA SAN JUAN

vsanjuan@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 37 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,099.89
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,977.98
****Base Wages**	$ 84,622.14
TOTAL Investment In You	$ 134,600.11
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12223

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHANNON SIMPSON

schu@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 97.77
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 5,653.53
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 18,128.30
****Base Wages**	$ 51,731.68
TOTAL Investment In You	$ 69,859.98

TOTAL Paid Time Off Days: 35 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12224

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MATTHEW SNYDERMAN

msnyderman@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,160.40
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,055.91
****Base Wages**	$ 93,600.00
TOTAL Investment In You	$ 141,655.91
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12225

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHANTE WALKER

shwalker@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 77.91
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 3,153.33
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 17,229.30
****Base Wages**		$ 41,219.98
TOTAL Investment In You		$ 58,449.29

TOTAL Paid Time Off Days: 36 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12226

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STANLEY WALL

stwall@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 15 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,236.83
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 18,504.64
****Base Wages**	$ 104,266.24
TOTAL Investment In You	$ 122,770.88
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12228

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAHOGANY BAPTISTE

mbaptiste@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 48 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 80.07
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,154.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,999.38
****Base Wages**	$ 48,877.92
TOTAL Investment In You	$ 93,877.30
TOTAL Paid Time Off Days:	**33 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 12230

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TSERING PALDON

tpaldon@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 23 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,991.10
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,243.85
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,703.70
****Base Wages**	$ 81,618.99
TOTAL Investment In You	$ 106,322.69
TOTAL Paid Time Off Days:	**17 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12231

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROXANNE YUEN

royuen@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 90.01
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,643.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 12,870.10
****Base Wages**	$ 47,622.22
TOTAL Investment In You	$ 60,492.32
TOTAL Paid Time Off Days:	**29 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12232

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DREW PERALES

dperales@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 42 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 61.78
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,572.55
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,635.68
****Base Wages**	$ 32,689.97
TOTAL Investment In You	$ 56,325.65
TOTAL Paid Time Off Days:	**33 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12233

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JESSE GENOSICK

jgenosick@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,267.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,382.24
****Base Wages**	$ 94,999.84
TOTAL Investment In You	$ 122,382.08
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12234

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KANWALDEEP RANDHAWA

krandhawa@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 12,641.20
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,842.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,969.53
****Base Wages**	$ 89,440.00
TOTAL Investment In You	$ 119,409.53
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12237

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HAZEL DE LEON

hdeleon@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,706.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,602.39
****Base Wages**	$ 162,750.02
TOTAL Investment In You	$ 213,352.40
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12241

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIA LIN

marlin@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 15 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,539.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,839.31
****Base Wages**	$ 151,230.14
TOTAL Investment In You	$ 178,069.45
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12244

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SUDHARSHAN PARTHASARATHY

sparthasarat@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,320.60
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,456.36
****Base Wages**	$ 57,071.04
TOTAL Investment In You	$ 77,527.40
TOTAL Paid Time Off Days:	**23 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12249

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELIZABETH DEWIER

edewier@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,720.51
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,225.86
****Base Wages**	$ 91,194.85
TOTAL Investment In You	$ 131,420.71
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12251

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KIMBERLY GREER

kgreer@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,409.33
****Base Wages**	$ 134,316.00
TOTAL Investment In You	$ 163,725.33
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

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Dear Colleague,

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12254

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROGER KIRTON

rkirton@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,038.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,337.15
****Base Wages**	$ 92,000.06
TOTAL Investment In You	$ 124,337.22
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12257

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SONIA MIKETINAS

smiketinas@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 23 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,129.46
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,261.63
****Base Wages**	$ 98,342.40
TOTAL Investment In You	$ 127,604.03
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12258

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KHAYLA PAYTON

kpayton@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 17 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,421.70
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,832.33
****Base Wages**	$ 143,082.99
TOTAL Investment In You	$ 172,915.33
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12259

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LETICIA RAMIREZ VELAZQUEZ

lrvelazquez@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 86.25
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,491.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 12,714.24
****Base Wages**	$ 45,633.95
TOTAL Investment In You	$ 58,348.19
TOTAL Paid Time Off Days:	**29 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12261

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KRISTINE TAMBIO

ktambio@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 12,641.20
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,787.51
****Base Wages**	$ 108,625.92
TOTAL Investment In You	$ 139,413.43
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12262

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BENJAMIN TOLENTINO

btolentino@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,271.79
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,682.42
****Base Wages**	$ 81,984.24
TOTAL Investment In You	$ 108,666.66
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12263

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARK WATTS

mwatts@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,242.04
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 91.43
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,111.76
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,224.67
****Base Wages**	$ 48,373.60
TOTAL Investment In You	$ 69,598.28
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12266 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAUL HODGES phodges@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,409.33
****Base Wages**	$ 134,316.00
TOTAL Investment In You	$ 163,725.33
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12268

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GIL PALAS

gpalas@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 17,887.48
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,420.51
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,436.88
****Base Wages**	$ 97,000.18
TOTAL Investment In You	$ 133,437.06
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 12269

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNET RAMOS

jaramos@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 32 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,243.85
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,749.20
****Base Wages**	$ 81,618.99
TOTAL Investment In You	$ 119,368.19
TOTAL Paid Time Off Days:	**17 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

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Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12270

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KATHY TRIBUZIO

ktribuzio@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 23 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,797.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,693.01
****Base Wages**	$ 169,000.00
TOTAL Investment In You	$ 219,693.01
TOTAL Paid Time Off Days:	**25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12273

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SREE SUBHA MADHUSUDANAN

smadusudanan@alamedahealthsystem.c

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,737.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,036.65
****Base Wages**	$ 75,000.02
TOTAL Investment In You	$ 106,036.67
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12274

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RONICA SHELTON

rshelton@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 23 % of your income.

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ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,739.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,635.01
****Base Wages**	$ 164,999.95
TOTAL Investment In You	$ 215,634.96
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12275

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KELLY QUINN

kquinn@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,943.99
****Base Wages**	$ 134,316.00
TOTAL Investment In You	$ 168,259.99
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12276

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHELLE TAYLOR

mictaylor@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,065.74
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,180.49
****Base Wages**	$ 94,827.03
TOTAL Investment In You	$ 124,007.52
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12279

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL BLANCHARD

mblanchard@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,245.14
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,655.77
****Base Wages**	$ 81,635.84
TOTAL Investment In You	$ 108,291.61
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12280

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VERONICA CORTEZ

vcortez@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 11 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,522.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 18,789.81
****Base Wages**	$ 150,000.03
TOTAL Investment In You	$ 168,789.84
TOTAL Paid Time Off Days:	**25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12281

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANNA DOMINGO

adomingo@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,653.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,176.30
****Base Wages**	$ 73,902.40
TOTAL Investment In You	$ 111,078.70
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12285

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JULISSA MERCADO

jumercado@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,594.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,726.67
****Base Wages**	$ 155,000.14
TOTAL Investment In You	$ 184,726.82
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 12289

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AMANDEEP CHAHAL

achahal@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 40 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,181.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,059.75
****Base Wages**	$ 74,864.90
TOTAL Investment In You	$ 123,924.65
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12295

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOSHUA HOWARD

jhoward@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,330.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,836.01
****Base Wages**	$ 95,825.60
TOTAL Investment In You	$ 134,661.61
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12296

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TEKICIA DOUGLAS-LOTT

tdouglass@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,720.51
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 17,970.90
****Base Wages**	$ 91,194.85
TOTAL Investment In You	$ 109,165.75
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12299

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SANA LEE

saleex@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,560.78
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 22,672.25
****Base Wages**		$ 67,143.40
TOTAL Investment In You		$ 89,815.65

TOTAL Paid Time Off Days: 35 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12303

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOSEPH PETERS

jpeters@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,972.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,289.39
****Base Wages**	$ 65,000.00
TOTAL Investment In You	$ 87,289.39
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12307

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CATHLEEN O'BRIEN

cobrien@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 10,212.20
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 51,107.71
****Base Wages**	$ 197,600.00
TOTAL Investment In You	$ 248,707.71
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12308

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOILAH JAMES

jjames@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 28 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 103.94
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,207.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,201.26
****Base Wages**	$ 54,995.20
TOTAL Investment In You	$ 76,196.46
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12311

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAMELA DAVIS

padavis@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 23 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,871.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,188.42
****Base Wages**	$ 76,752.00
TOTAL Investment In You	$ 99,940.42
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12312

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EUGENE SERNA JR

rserna@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 39 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,569.20
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,447.29
****Base Wages**	$ 72,800.00
TOTAL Investment In You	$ 119,247.29
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12313

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YON ZHONGLI

yzhongli@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 35 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,182.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,055.59
****Base Wages**	$ 75,954.40
TOTAL Investment In You	$ 116,010.00
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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*****Base Wages** = hourly rate X 2080 hours x current calculated FTE.*

Dear Colleague,

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 12314

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KARINNA ORIZAL

korizal@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,426.96
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,837.59
****Base Wages**	$ 67,959.09
TOTAL Investment In You	$ 95,796.68
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12316

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHANNON PAGE

shpage@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 95.06
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,847.52
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,832.77
****Base Wages**	$ 50,294.40
TOTAL Investment In You	$ 71,127.17
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12318 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EBERE ONYEADOR eonyeador@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,092.14
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,373.87
****Base Wages**	$ 105,779.65
TOTAL Investment In You	$ 139,153.52
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12322

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAVID LIN

davlin@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,950.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,846.01
****Base Wages**	$ 117,000.00
TOTAL Investment In You	$ 166,846.01
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12323

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NATASHA RAVARE-EVANS

nevans@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,326.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,258.98
****Base Wages**	$ 136,500.00
TOTAL Investment In You	$ 185,758.98
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12325

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BERNADETTE JENSEN

bejensen@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 2,811.12
Long Term Disability	$ 1,427.33
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 10,972.23
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,593.02
****Base Wages**	$ 250,016.00
TOTAL Investment In You	$ 296,609.02
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12327

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DIANNE GRACE TECSON

dgtecson@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,545.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,418.25
****Base Wages**	$ 78,191.57
TOTAL Investment In You	$ 117,609.82
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12331

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PRECY MADULI

pmaduli@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,236.83
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,271.26
****Base Wages**	$ 130,332.80
TOTAL Investment In You	$ 178,604.06
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12334

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TAMARA MCFARLAND

tmacfarland@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 104.32
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,264.51
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,666.06
****Base Wages**	$ 55,745.25
TOTAL Investment In You	$ 80,411.30
TOTAL Paid Time Off Days:	**29 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12337

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

UREINA BRUNSON

ubrunson@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 98.38
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,982.09
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,248.80
****Base Wages**	$ 52,053.46
TOTAL Investment In You	$ 81,302.26
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

*****Base Wages** = hourly rate X 2080 hours x current calculated FTE.*

Dear Colleague,

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ALAMEDA HEALTH SYSTEM

Employee ID # 12338

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHELLE DEIRO

mdeiro@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,267.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,163.01
****Base Wages**	$ 95,000.05
TOTAL Investment In You	$ 143,163.06
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12339

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANELYNE DOMETITA

adometita@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,017.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,540.10
****Base Wages**	$ 94,298.88
TOTAL Investment In You	$ 134,838.98
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12341

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHEENA GORDON

sgordon@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

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ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 90.16
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,649.51
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,741.03
****Base Wages**	$ 47,706.05
TOTAL Investment In You	$ 71,447.08
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12343

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MELISSA NICKAS

mnickas@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

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ALAMEDA'S INVESTMENT IN YOU

Medical	$ 13,496.34
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,274.97
****Base Wages**	$ 65,175.55
TOTAL Investment In You	$ 97,450.52
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12346

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CRISTINA MONTECILLO

cmontecillo@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 47 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 94.21
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,813.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,453.38
****Base Wages**	$ 49,844.50
TOTAL Investment In You	$ 93,297.88
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12347

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TAMMIE HOLLAR

thollar@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,415.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,547.17
****Base Wages**	$ 109,999.97
TOTAL Investment In You	$ 138,547.14
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12348

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VENUS PELINGON

vpelingon@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 94.21
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,813.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,093.38
****Base Wages**	$ 49,844.50
TOTAL Investment In You	$ 70,937.88
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12349

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELOIS THOMAS

elthomas@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 94.21
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,813.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,093.38
****Base Wages**	$ 49,844.50
TOTAL Investment In You	$ 70,937.88
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12350

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TAMEKA SIMPSON

tsimpson@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 50 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 82.75
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,349.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,196.71
****Base Wages**	$ 43,781.30
TOTAL Investment In You	$ 87,978.00
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 12353

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FIORELLA MALPARTIDA

fmalpartida@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,832.02
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 90.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,662.08
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,364.03
****Base Wages**	$ 47,870.37
TOTAL Investment In You	$ 68,234.40
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12360

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JANET SICHENEDER-NASH

jsnash@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 38 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,889.95
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,785.46
****Base Wages**	$ 76,992.86
TOTAL Investment In You	$ 123,778.33
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12361

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

THERESA OSBORN

theosborn@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 90.16
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,649.51
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,036.91
****Base Wages**	$ 47,706.05
TOTAL Investment In You	$ 71,742.96
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12362 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JUDE ORAJAKA jorajaka@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 15 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,560.78
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 17,811.17
****Base Wages**	$ 100,715.10
TOTAL Investment In You	$ 118,526.27
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12363

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NICHOLAS MULLINS

nmullins@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 87.72
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,550.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,935.57
****Base Wages**	$ 46,413.33
TOTAL Investment In You	$ 70,348.90
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12365

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AMRITPAL MUSHIANA

amushiana@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,181.63
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,077.14
****Base Wages**	$ 101,221.12
TOTAL Investment In You	$ 151,298.26
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12366

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DANNI ZHANG

dzhang@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 38 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 90.16
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,649.51
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,908.01
****Base Wages**	$ 47,706.05
TOTAL Investment In You	$ 76,614.06
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12367

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MIRANDA BRADFORD

mbradford@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 50.75
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,423.40
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 12,957.72
****Base Wages**	$ 26,850.22
TOTAL Investment In You	$ 39,807.94
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12368 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

OMOLOLA AGANJUOMO oaganjuomo@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,154.66
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,917.99
****Base Wages**	$ 107,452.80
TOTAL Investment In You	$ 141,370.79
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12372

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YOLANDA MENDOZA

yomendoza@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 15 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 9,203.00
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 21,710.81
****Base Wages**	$ 128,000.29
TOTAL Investment In You	$ 149,711.10

TOTAL Paid Time Off Days: 17 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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*****Base Wages** = hourly rate X 2080 hours x current calculated FTE.*

Dear Colleague,

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 12375

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DEXTER PREDEC BUNYI

dbunyi@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 61 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 53.33
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,597.38
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,415.40
****Base Wages**	$ 28,214.78
TOTAL Investment In You	$ 72,630.18
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12376

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FUMIKO NOMURA

fnomura@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,832.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,705.52
****Base Wages**	$ 102,385.50
TOTAL Investment In You	$ 141,091.03
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12379

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DOMONIQUE SPEARS

dspears@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 5,613.79
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 19,742.68
****Base Wages**		$ 73,382.82
TOTAL Investment In You		$ 93,125.49
TOTAL Paid Time Off Days:		**35 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 12388

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TISA PINKARD

tpinkard@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 72.18
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,921.44
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 12,477.19
****Base Wages**	$ 38,188.80
TOTAL Investment In You	$ 50,665.99
TOTAL Paid Time Off Days:	**33 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12390

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALISON WIGGAM

awiggam@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,821.59
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,825.18
****Base Wages**	$ 102,243.02
TOTAL Investment In You	$ 127,068.21
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

EASTMONT WELLNESS

Employee ID # 12393

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NEERAJA MARAMREDDY

nmaramreddy@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 10 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 10,650.56
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 24,779.45
****Base Wages**		$ 227,831.97
TOTAL Investment In You		$ 252,611.42
TOTAL Paid Time Off Days:		**40 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12394

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

IRVIN SERVELLON

iservellon@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 29 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 98.38
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,982.09
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,970.66
****Base Wages**	$ 52,053.46
TOTAL Investment In You	$ 73,024.12
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

ALAMEDA HOSPTIAL

Employee ID # 12396

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAMARYS DIAZ

dadiaz@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 83.29
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 3,745.83
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 16,206.11
****Base Wages**	$ 48,965.07
TOTAL Investment In You	$ 65,171.18

TOTAL Paid Time Off Days: 33 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12400

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SCOTT BUTTERFIELD

sbutterfield@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,330.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,245.97
****Base Wages**	$ 95,825.60
TOTAL Investment In You	$ 143,071.57
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12401

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JI MIN

jiminx@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 17 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,403.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 17,670.94
****Base Wages**	$ 87,875.84
TOTAL Investment In You	$ 105,546.78
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12403

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

REGALADO SABAL

rsabal@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 44 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.67
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,358.04
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,267.62
****Base Wages**	$ 56,967.87
TOTAL Investment In You	$ 101,235.49
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12404

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NAVJOT KHANGURA

nkhangura@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 14 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,185.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 17,452.94
****Base Wages**	$ 106,995.20
TOTAL Investment In You	$ 124,448.14
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12405

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ISHWARI VENKATARAMAN

ivenkatarama@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 15 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,667.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,559.79
****Base Wages**	$ 160,000.05
TOTAL Investment In You	$ 187,559.84
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12408

2016

MINNESOTA EMPLOYEE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TODD DOONER

tdooner@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,950.50
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 23,079.39
****Base Wages**		$ 117,000.00
TOTAL Investment In You		$ 140,079.39

TOTAL Paid Time Off Days: 39 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12410

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DELESHAWN LOVE

delove@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 20 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 13.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,017.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,345.38
****Base Wages**	$ 117,873.60
TOTAL Investment In You	$ 147,218.98
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12411

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KATHLEEN BARNHART

kbarnhart@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 105.23
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,259.48
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,679.36
****Base Wages**	$ 55,679.52
TOTAL Investment In You	$ 80,358.88
TOTAL Paid Time Off Days:	**29 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12413

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MELINDA ROSA

merosa@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,410.08
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,709.23
****Base Wages**	$ 70,720.00
TOTAL Investment In You	$ 101,429.23
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12416

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KATHERINE DODSON

kdodson@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 35 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,250.96
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,756.31
****Base Wages**	$ 68,640.00
TOTAL Investment In You	$ 105,396.31
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12420

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ERIC MORALES

emorales@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 95.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,346.12
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 13,578.79
****Base Wages**	$ 51,130.87
TOTAL Investment In You	$ 64,709.67
TOTAL Paid Time Off Days:	**29 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12421

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VIVIAN WONG

vivwong@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,185.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,613.18
****Base Wages**	$ 106,995.20
TOTAL Investment In You	$ 135,608.38
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12424

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LOUISA ANYANSI

lanyansi@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,017.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,445.38
****Base Wages**	$ 94,298.88
TOTAL Investment In You	$ 123,744.26
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12427

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RICHARD RICAFORT

rricafort@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,545.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 19,013.97
****Base Wages**	$ 89,361.79
TOTAL Investment In You	$ 108,375.76
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12428

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOSHUA WRIGHT

jowright@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 43 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,320.52
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 90.61
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,667.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,076.69
****Base Wages**	$ 47,941.09
TOTAL Investment In You	$ 84,017.78
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12434

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANNA MARIE MASILANG

amasilang@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 19 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 0.37
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,545.22
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 21,026.36
****Base Wages**		$ 89,361.79
TOTAL Investment In You		$ 110,388.15
TOTAL Paid Time Off Days:		**32 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 12436

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JEDIDAH MUTURI

jmuturi@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 55 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.37
Long Term Disability	$ 53.37
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,600.71
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,036.78
****Base Wages**	$ 28,240.87
TOTAL Investment In You	$ 63,277.65
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12437

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RIA RICALDE

rricalde@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 60 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.37
Long Term Disability	$ 52.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 2,106.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,951.41
****Base Wages**	$ 27,539.20
TOTAL Investment In You	$ 69,490.61
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12438

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALBERT OHM VENZON

avenzon@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 53.38
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,600.71
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 12,791.08
****Base Wages**	$ 28,240.87
TOTAL Investment In You	$ 41,031.94
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12441

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAURISHA CHILTON

mchilton@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 43 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 59.20
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,423.40
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,483.96
****Base Wages**	$ 31,325.26
TOTAL Investment In You	$ 54,809.22
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12452

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LUZ SEQUINO

lsequino@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 13 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,203.65
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 18,471.46
****Base Wages**	$ 128,044.80
TOTAL Investment In You	$ 146,516.26
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12455

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAURA WHITTEN

lwhitten@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,995.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,252.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,140.63
****Base Wages**	$ 78,827.67
TOTAL Investment In You	$ 105,968.31
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12467

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MEETA SAXENA

msaxena@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 23 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 10,432.71
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 51,328.22
****Base Wages**	$ 170,246.17
TOTAL Investment In You	$ 221,574.39
TOTAL Paid Time Off Days:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12468

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AUBREE LARSON

aularson@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,278.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,560.35
****Base Wages**	$ 133,215.47
TOTAL Investment In You	$ 167,775.83
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12472

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARY ANN GUINTO

mguinto@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 25 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 15,983.76
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,032.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,502.43
****Base Wages**	$ 105,000.06
TOTAL Investment In You	$ 139,502.50
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12473

2016

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AMAUCHE LEBEKE

alebeke@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 34 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 0.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 52.05
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 2,106.75
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 14,295.79
****Base Wages**		$ 27,539.20
TOTAL Investment In You		$ 41,834.99

TOTAL Paid Time Off Days: 35 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12474

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SABINA LIMBU

sablimbu@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 32 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,185.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,707.90
****Base Wages**	$ 85,596.16
TOTAL Investment In You	$ 125,304.06
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12476

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SPENCER STECZ

sstecz@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 96.64
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,346.12
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,739.99
****Base Wages**	$ 51,130.87
TOTAL Investment In You	$ 75,870.86
TOTAL Paid Time Off Days:	**29 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12477

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LADY DIANA TING

ldting@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,185.13
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 22,314.02
****Base Wages**		$ 85,596.16
TOTAL Investment In You		$ 107,910.18
TOTAL Paid Time Off Days:		**32 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 12480

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RONANGEL ROJAS

rrojas@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 32 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.37
Long Term Disability	$ 110.09
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,426.96
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,529.15
****Base Wages**	$ 58,250.65
TOTAL Investment In You	$ 85,779.80
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 12481

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MYRON MOYE

mimoye@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 7 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 2,811.12
Long Term Disability	$ 1,427.33
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 12,523.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,889.33
****Base Wages**	$ 357,000.18
TOTAL Investment In You	$ 382,889.50
TOTAL Paid Time Off Days:	**44 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12487

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GARTH HUBERTY

ghuberty@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 28 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,203.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,135.73
****Base Wages**	$ 127,999.87
TOTAL Investment In You	$ 177,135.60
TOTAL Paid Time Off Days:	**25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12490

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROLANDO REYES

roreyes@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 41 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 94.21
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,813.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,299.26
****Base Wages**	$ 49,844.50
TOTAL Investment In You	$ 85,143.76
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12491

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TARA SMITH

tsmith@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 94.21
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,813.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,669.28
****Base Wages**	$ 49,844.50
TOTAL Investment In You	$ 71,513.78
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12493

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SETH SCHER

sscher@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 8,218.55
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 20,726.36
****Base Wages**		$ 107,432.00
TOTAL Investment In You		$ 128,158.36
TOTAL Paid Time Off Days:		**39 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12494

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YI-CHIH PENG

ycpeng@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,609.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,482.03
****Base Wages**	$ 156,000.00
TOTAL Investment In You	$ 196,482.03
TOTAL Paid Time Off Days:	**25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12496

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GERALDINE WONG

gewong@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 35 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 88.26
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,572.55
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,176.66
****Base Wages**	$ 46,699.95
TOTAL Investment In You	$ 71,876.61
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12497

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOHN ELLENBERG

jellenberg@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,985.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 18,235.55
****Base Wages**	$ 70,471.81
TOTAL Investment In You	$ 88,707.36
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12500

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHEILA LYZWA

slyzwa@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 18 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 1,778.92
Long Term Disability	$ 1,427.33
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 10,972.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 53,970.55
****Base Wages**	$ 250,000.19
TOTAL Investment In You	$ 303,970.74
TOTAL Paid Time Off Days:	**44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12502

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAVID GARDNER

dgardner@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,522.47
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,027.82
****Base Wages**	$ 111,404.80
TOTAL Investment In You	$ 151,432.62
TOTAL Paid Time Off Days:	**25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Dear Colleague,

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12503

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANGELA SPANGLER

aspangler@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 28 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,972.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,104.67
****Base Wages**	$ 65,000.00
TOTAL Investment In You	$ 90,104.67
TOTAL Paid Time Off Days:	**39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12506

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EVA GUARDADO

eguardado@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 15,983.76
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.13
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,631.46
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,083.69
****Base Wages**	$ 59,854.58
TOTAL Investment In You	$ 93,938.27
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12507

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AVEGAIL FABIAN

afabian@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,545.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,955.85
****Base Wages**	$ 89,361.79
TOTAL Investment In You	$ 118,317.64
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12511

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ARTHUR SANTOS

arsantos@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 45 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 105.23
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,259.48
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,129.41
****Base Wages**	$ 55,679.52
TOTAL Investment In You	$ 100,808.93
TOTAL Paid Time Off Days:	**29 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12515

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NEEMA PATEL

npatel@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,265.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,770.60
****Base Wages**	$ 132,293.20
TOTAL Investment In You	$ 173,063.80
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12516

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RICHARD CHRISTENSEN

rchristensen@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 30 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 91.33
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,696.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,973.90
****Base Wages**	$ 48,320.27
TOTAL Investment In You	$ 69,294.17
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 12520

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARKIS MITCHELL

marmitchell@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 33 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 96.64
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,346.12
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,739.99
****Base Wages**	$ 51,130.87
TOTAL Investment In You	$ 75,870.86
TOTAL Paid Time Off Days:	**38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12527

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WING KI LEUNG

wleung@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 50 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 44.62
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,611.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,953.60
****Base Wages**	$ 23,606.23
TOTAL Investment In You	$ 47,559.83
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 12529

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BILLY VANCE

bvance@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 17 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,840.83
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 17,091.22
****Base Wages**	$ 81,995.60
TOTAL Investment In You	$ 99,086.82
TOTAL Paid Time Off Days:	**32 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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The information presented to you in this statement is provided using data as of May 21, 2016 (unless otherwise noted) and may not account for changes made just before printing.

Should you have any questions after reviewing your personalized statement, please contact the Benefits Department at 510-346-7557. We will assist in answering your questions or direct your call to the appropriate department.

I am proud to have served you over the past 9+ years and thank you for your continued commitment and care for your colleagues, our patients, and the communities that we serve.

Jeanette Louden-Corbett
Chief Human Resources Officer

The data contained in this summary is based on active records as of 5/21/16 and is constructed with a combination of actual, average, and projected calculations. This statement of benefits is neither an earnings statement, nor a legal document and is provided for illustrative purposes only.

ALAMEDA HEALTH SYSTEM

Employee ID # 12531

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BOB WANG

bobwang@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.

The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 91.43
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,111.76
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,204.53
****Base Wages**	$ 53,748.45
TOTAL Investment In You	$ 77,952.98
TOTAL Paid Time Off Days:	**36 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

The **Base Wages shown in this statement only include annualized base wages and do not include overtime, shift differentials, premium pay, call back pay, or bilingual pay.*

*****Base Wages** = hourly rate X 2080 hours x current calculated FTE.*

Dear Colleague,

It is our pleasure to present you with your Alameda Health System 2016 personalized benefit statement. The total compensation package available to you demonstrates our commitment to our employees and their families. This statement will help you better understand the value of your total compensation package. The income from your paycheck is only one part of your compensation. Your total compensation also includes the pay and benefits we provide in order to enhance your employment experience and enable you to plan for and secure your future.

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