ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6611

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NICOLE DONRAD

ndonrad@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	$ 18,631.60
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	$ 9,688.47
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,448.96
****Base Wages**	$ 80,740.50
TOTAL Investment In You	$ 120,189.47

TOTAL Paid Time Off Days: **45 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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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

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6613

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ADRIANA GONZALEZ

acgonzalez@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	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,340.16
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 103,749.27

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6635

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AYRIKA MURE

amure@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	$ 21,200.66
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)	$ 4,144.84
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,813.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 42,270.29
****Base Wages**	$ 75,991.14
TOTAL Investment In You	$ 118,261.43

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6662

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SARITH REUBEN

sreuben@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		$ 9,294.58
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 21,784.97
****Base Wages**	$ 94,021.20
TOTAL Investment In You	$ 115,806.17

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 # 6666

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KENDRA AYLER

kayler@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	$ 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	$ 9,458.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,530.79
****Base Wages**	$ 145,648.05
TOTAL Investment In You	$ 187,178.83

TOTAL Paid Time Off Days: 45 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6673

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GERALD HURD

ghurd@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	$ 74.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,927.22
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,959.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,129.14
****Base Wages**	$ 51,753.10
TOTAL Investment In You	$ 83,882.25

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6674

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAVEJANEIRO BROOKINS

lbrookins@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	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 74.48
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	$ 3,959.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,425.54
****Base Wages**	$ 46,577.79
TOTAL Investment In You	$ 82,003.34
TOTAL Paid Time Off Days:	**46 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6676

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ESTHER MUN

eskang@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	$ 21,036.60
Dental	$ 1,218.36
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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,112.74
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 183,208.56

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6677

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PATRICK WOODBURY

pwoodbury@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	$ 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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,516.50
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 182,612.32

TOTAL Paid Time Off Days: 45 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6683

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

THANDAR AUNG

taung@alamedahealthsystem.org

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

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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)	$ 2,583.00
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	$ 37,159.31
****Base Wages**	$ 134,316.00
TOTAL Investment In You	$ 171,475.31

TOTAL Paid Time Off Days: 45 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 # 6690

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

POLIENA BUTLER

pbutler@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	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 101.38
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,555.01
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,418.44
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,310.78
****Base Wages**	$ 57,757.44
TOTAL Investment In You	$ 95,068.22

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6694

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

APRILMARIE GONZAGA amgonzaga@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	$ 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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,280.42
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 182,376.24

TOTAL Paid Time Off Days: 45 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 # 6698

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MERLIN PINEDA

mpineda@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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,285.48
****Base Wages**	$ 113,676.66
TOTAL Investment In You	$ 163,962.14

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 # 6699

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NIGISTI RASU

nrasu@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)	$ 2,583.00
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	$ 52,755.67
****Base Wages**	$ 134,316.00
TOTAL Investment In You	$ 187,071.67

TOTAL Paid Time Off Days: 45 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6700 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ZAKIYA CARROLL zcarroll@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	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 96.26
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	$ 4,459.05
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,314.94
****Base Wages**	$ 58,288.26
TOTAL Investment In You	$ 93,603.20
TOTAL Paid Time Off Days:	**46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6702

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RUEBEN PHILL

rphill@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	$ 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	$ 5,872.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,154.05
****Base Wages**	$ 76,762.40
TOTAL Investment In You	$ 107,916.45

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6706

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ZAYNAB HASSAN zhassan@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	$ 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	$ 5,872.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,944.21
****Base Wages**	$ 76,762.40
TOTAL Investment In You	$ 114,706.61

TOTAL Paid Time Off Days: 46 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6707

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AFISHETU IKHARO-MUSA aiokhomina@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	*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		$ 9,704.49
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 23,815.96
****Base Wages**	$ 162,585.28
TOTAL Investment In You	$ 186,401.24

TOTAL Paid Time Off Days: 45 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6708

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHABANA DEAN

sdean@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	$ 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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,479.28
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 183,575.10

TOTAL Paid Time Off Days: 45 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6711

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DEVA WOLF

dwolf@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	$ 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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,285.48
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 192,381.30

TOTAL Paid Time Off Days: 45 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 # 6712

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MURPHY NDEM

mndem@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	*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		$ 9,407.39
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 23,518.86
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 165,614.68

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6714

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KAREN RILEY

kriley@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	$ 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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,912.74
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 183,008.56

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6719

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOSE MEJIA

jamejia@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	$ 21,200.66
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 93.45
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,938.29
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,896.18
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,126.66
****Base Wages**	$ 50,930.46
TOTAL Investment In You	$ 90,057.12

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6720

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ERNESTINE GONZALEZ

egonzalez2@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	$ 6,583.46
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 46.55
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,881.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 19,995.08
****Base Wages**	$ 25,369.24
TOTAL Investment In You	$ 45,364.32
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 # 6721

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CURTIS MIXON

cmixon@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	*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		$ 102.34
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 2,166.57
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 4,351.98
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 20,618.96
****Base Wages**	$ 56,888.62
TOTAL Investment In You	$ 77,507.58

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6722

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

D'ANA DEMERRILL ddemerrill@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	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 94.60
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	$ 3,943.87
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,224.54
****Base Wages**	$ 51,553.84
TOTAL Investment In You	$ 72,778.38
TOTAL Paid Time Off Days:	**46 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6726

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GARRY GRAFFORT

ggraffort@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	$ 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)	$ 6,020.80
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,148.95
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,451.48
****Base Wages**	$ 106,522.21
TOTAL Investment In You	$ 145,973.69

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6727 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EDWARD TOMASINI etomasin@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	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,298.17
****Base Wages**	$ 134,316.00
TOTAL Investment In You	$ 160,614.17

TOTAL Paid Time Off Days: 45 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6735

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SAU WONG

stwong@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		$ 9,357.13
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 23,468.60
****Base Wages**	$ 83,177.95
TOTAL Investment In You	$ 106,646.56

TOTAL Paid Time Off Days: **45 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 # 6736

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MOLLY MEKJAVICH

mmekjavich@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	$ 9,807.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,685.36
****Base Wages**	$ 118,771.60
TOTAL Investment In You	$ 169,456.96

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 # 6737

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SONIA VAN BRADEN

svanbraden@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	$ 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	$ 9,807.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,824.28
****Base Wages**	$ 152,706.34
TOTAL Investment In You	$ 201,530.62

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 # 6740

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIA GOMEZ-PALACIOS mpalacios@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	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,340.16
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 103,749.27

TOTAL Paid Time Off Days: 46 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6742

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JAMIE GARRIDO

jgarrido@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: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6743

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROBBIE MASANGKAY rmasangkay@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	$ 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	$ 41,051.83
****Base Wages**	$ 150,487.17
TOTAL Investment In You	$ 191,539.00

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6749

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WILVER BLACK

wblack@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	$ 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	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,366.47
****Base Wages**	$ 134,316.00
TOTAL Investment In You	$ 175,682.47

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6751

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LABIB VISTA

lvista@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	$ 7,016.19
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,444.24
****Base Wages**	$ 91,714.90
TOTAL Investment In You	$ 119,159.14

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 # 6755

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PATRICK LEE

patlee@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	$ 74.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,927.22
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,959.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,725.50
****Base Wages**	$ 46,577.79
TOTAL Investment In You	$ 94,303.30
TOTAL Paid Time Off Days:	**46 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6756

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

UNDERA COLE-WILLIAMS

uwilliams@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	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 102.34
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	$ 4,706.77
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,007.84
****Base Wages**	$ 61,526.40
TOTAL Investment In You	$ 98,534.24

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6763

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNIFER THOMPSON

jethompson@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	$ 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	$ 9,458.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,568.01
****Base Wages**	$ 145,648.05
TOTAL Investment In You	$ 186,216.05

TOTAL Paid Time Off Days: **45 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 # 6765

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RODNEY GILMORE

rgilmore@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	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 101.72
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	$ 4,240.91
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 21,528.71
****Base Wages**	$ 55,436.78
TOTAL Investment In You	$ 76,965.49

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6771

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LEANDREA MACK

lmack@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	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.18
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,215.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,592.38
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 107,001.49

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6775

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BELINDA CHEUNG

bcheung@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	$ 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)	$ 2,610.42
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,192.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,680.64
****Base Wages**	$ 67,871.02
TOTAL Investment In You	$ 116,551.67

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6776

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARY COUGHLIN

mcoughlin@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	$ 106.03
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,778.17
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,420.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,602.06
****Base Wages**	$ 57,785.94
TOTAL Investment In You	$ 85,387.99

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6777

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LISA RUSSELL lrussell@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	$ 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	$ 4,974.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,890.21
****Base Wages**	$ 65,031.41
TOTAL Investment In You	$ 109,921.62

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6794

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

D'JUNA HOFFMAN

dhoffman@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		$ 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)		$ 3,195.16
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 5,295.98
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 21,088.11
****Base Wages**	$ 69,228.43
TOTAL Investment In You	$ 90,316.54

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6801

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRYAN PULLER JR

bpuller@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	$ 21,320.52
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 73.30
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 960.23
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,896.18
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,248.30
****Base Wages**	$ 50,930.46
TOTAL Investment In You	$ 88,178.76

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6802

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JANELL BUTLER

jbutler@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	$ 21,200.66
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	$ 4,877.35
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,189.48
****Base Wages**	$ 63,756.16
TOTAL Investment In You	$ 100,945.64

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6805

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YVETTE AJAYI

yajayi@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	$ 96.10
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	$ 5,008.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,869.05
****Base Wages**	$ 58,920.64
TOTAL Investment In You	$ 104,789.69
TOTAL Paid Time Off Days:	**46 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 # 6809

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LORETO AGUILAR

laguilar@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		$ 1,218.36
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 62.16
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		$ 4,405.36
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 17,822.87
****Base Wages**	$ 34,551.88
TOTAL Investment In You	$ 52,374.75

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 # 6814

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELMO SUAZO

elsuazo@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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,706.86
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 168,802.68

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6815

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ADISA AMBONISYE

aambonisye@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	$ 104.42
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	$ 7,043.96
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,149.72
****Base Wages**	$ 55,246.71
TOTAL Investment In You	$ 82,396.44

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 # 6817

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAUL DAHMEN

pdahmen@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	$ 19,334.90
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	$ 8,536.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,983.30
****Base Wages**	$ 111,593.87
TOTAL Investment In You	$ 150,577.17

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6821

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

IRENE CHEN

irchen@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	$ 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	$ 9,688.47
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,116.52
****Base Wages**	$ 80,740.50
TOTAL Investment In You	$ 110,857.03
TOTAL Paid Time Off Days:	**40 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

Employee ID # 6826

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BONNY LEUNG

bleung@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)	$ 2,088.84
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,309.41
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 51,293.76
****Base Wages**	$ 108,619.68
TOTAL Investment In You	$ 159,913.44

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 # 6828 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOEL MORANDO jmorando@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	$ 0.00
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 102.34
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,681.40
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,351.98
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 18,133.79
****Base Wages**	$ 56,888.62
TOTAL Investment In You	$ 75,022.41

TOTAL Paid Time Off Days: 46 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6830

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAND SUNG

lsung@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	$ 7,406.62
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)	$ 6,733.28
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,928.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,978.50
****Base Wages**	$ 116,710.26
TOTAL Investment In You	$ 149,688.76

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6831

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VAUGHN GIBSON

vgibson@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	$ 8,536.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,608.82
****Base Wages**	$ 111,593.87
TOTAL Investment In You	$ 152,202.69

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6834

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRANDY TRAYLOR

btraylor@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	$ 21,200.66
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)	$ 1,063.87
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,813.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,206.74
****Base Wages**	$ 75,991.14
TOTAL Investment In You	$ 115,197.88

TOTAL Paid Time Off Days: 46 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 # 6837

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHIDINMA EZEBUIRO

cezebuiro@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	$ 20,494.76
Dental	$ 1,861.08
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)	$ 4,918.70
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,132.32
****Base Wages**	$ 127,886.24
TOTAL Investment In You	$ 174,018.56

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6841

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALDO FRAUSTO-RIVERA

afrausto@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	$ 59.04
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,622.92
****Base Wages**	$ 55,773.12
TOTAL Investment In You	$ 80,396.04
TOTAL Paid Time Off Days:	**46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6844

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GARFIELD WHITTLE

gwhittle@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	$ 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	$ 9,458.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,108.31
****Base Wages**	$ 145,648.05
TOTAL Investment In You	$ 179,756.35

TOTAL Paid Time Off Days: 45 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6846

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ERICA RIOS

erios@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	$ 102.83
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,155.42
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,287.12
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 23,731.44
****Base Wages**	$ 56,040.82
TOTAL Investment In You	$ 79,772.26

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6847

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ABENA KING

aking@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	$ 9,458.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 26,462.49
****Base Wages**	$ 145,648.05
TOTAL Investment In You	$ 172,110.53

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6848

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EDNEL BELLOT

ebellot@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	$ 21,200.66
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 91.62
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,917.72
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,896.18
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,141.47
****Base Wages**	$ 50,930.46
TOTAL Investment In You	$ 90,071.94

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6850

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHANNON HEIMGARTNER

sheimgartner@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	$ 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	$ 9,357.14
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,674.03
****Base Wages**	$ 138,630.13
TOTAL Investment In You	$ 165,304.15

TOTAL Paid Time Off Days: 49 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6852

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LILIAN PORTILLO

lportillo@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	$ 20,734.74
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 74.48
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	$ 3,959.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,766.40
****Base Wages**	$ 46,577.79
TOTAL Investment In You	$ 82,344.20
TOTAL Paid Time Off Days:	**46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6854 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANTONIA VALDEZ avaldez@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	$ 21,200.66
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	$ 5,047.70
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,397.05
****Base Wages**	$ 65,983.01
TOTAL Investment In You	$ 102,380.06

TOTAL Paid Time Off Days: 46 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6855

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GINO ROGERS

GinRogers@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	$ 9,236.83
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,132.34
****Base Wages**	$ 78,199.68
TOTAL Investment In You	$ 128,332.02

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 # 6856

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JANE BOND

jbond@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	$ 7,406.62
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)	$ 6,007.88
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,633.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,941.01
****Base Wages**	$ 112,858.30
TOTAL Investment In You	$ 144,799.31

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 # 6858

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DEEANNA HURD

dhurd@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	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 101.38
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,187.48
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,418.44
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 16,844.29
****Base Wages**	$ 57,757.44
TOTAL Investment In You	$ 74,601.73

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6862

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TAM-ANH HOANG

tahoang@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	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,594.05
****Base Wages**	$ 134,316.00
TOTAL Investment In You	$ 160,910.05

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 # 6866

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YESENIA RODRIGUEZ-CALVILLO yrodriguez@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	$ 106.43
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	$ 4,437.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,742.48
****Base Wages**	$ 58,004.13
TOTAL Investment In You	$ 94,746.61

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6868

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHAUN EUSEBIO

seusebio@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		$ 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		$ 6,095.71
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 18,603.52
****Base Wages**	$ 79,682.51
TOTAL Investment In You	$ 98,286.03

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6871

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

THERESE HALL

thall@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		$ 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	$ 22,825.88
****Base Wages**	$ 124,766.93
TOTAL Investment In You	$ 147,592.81

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6881

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOYCE ROBERTSON

joyrobertson@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	$ 21,200.66
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 99.77
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	$ 4,159.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,457.83
****Base Wages**	$ 54,370.37
TOTAL Investment In You	$ 90,828.20

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6884

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHALADA JONES

chjones@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	$ 16,098.68
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	$ 9,393.14
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,603.29
****Base Wages**	$ 127,001.91
TOTAL Investment In You	$ 163,605.20

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6885

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CARA RUTTGEN

cruttgen@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	$ 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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,056.80
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 176,152.62

TOTAL Paid Time Off Days: **45 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 # 6886

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DEBRA MONTOYA

dmontoya@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	$ 21,200.66
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 108.37
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,952.88
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,517.91
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,777.89
****Base Wages**	$ 59,057.65
TOTAL Investment In You	$ 98,835.54

TOTAL Paid Time Off Days: 46 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 # 6891

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TELLY DAVIS

tdavis@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)	$ 2,800.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,364.80
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,060.31
****Base Wages**	$ 83,200.00
TOTAL Investment In You	$ 133,260.31

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 # 6892

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JEFFREY RICE

jerice@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	$ 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)	$ 3,136.28
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,203.86
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,639.29
****Base Wages**	$ 68,024.32
TOTAL Investment In You	$ 101,663.61

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 # 6900

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RENEBOY JUGARAP

rjugarap@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	$ 21,200.66
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)	$ 4,255.49
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,813.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 42,398.36
****Base Wages**	$ 75,991.14
TOTAL Investment In You	$ 118,389.50

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6906

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNIFER BANAGA

jbanaga@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	$ 1,861.08
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	$ 20,363.47
****Base Wages**	$ 131,379.46
TOTAL Investment In You	$ 151,742.93

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6908

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARCIA HALE

mholmes@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	$ 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	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,799.93
****Base Wages**	$ 134,316.00
TOTAL Investment In You	$ 175,115.93

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6913 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAVID MC ELVEEN dmcelveen@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	$ 9,357.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,638.86
****Base Wages**	$ 138,629.92
TOTAL Investment In You	$ 173,268.78

TOTAL Paid Time Off Days: 45 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6916

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NEIL LIEBERT

nliebert@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	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 110.33
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	$ 7,665.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,168.12
****Base Wages**	$ 50,103.56
TOTAL Investment In You	$ 89,271.68
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 # 6924

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KARLA SANTOS

ksantos@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)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,974.20
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 95,383.31

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6927 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

OLAYINKA OWOLABI oowolabi@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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,285.48
****Base Wages**	$ 113,676.66
TOTAL Investment In You	$ 163,962.14

TOTAL Paid Time Off Days: 45 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 # 6929

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DEWAYNE MACKLIN

dmacklin@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	$ 7,077.46
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 65.17
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	$ 3,959.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,881.19
****Base Wages**	$ 41,402.48
TOTAL Investment In You	$ 62,283.68

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6932

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DONNA COLE

dcole@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	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 102.34
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	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 21,555.05
****Base Wages**	$ 55,773.12
TOTAL Investment In You	$ 77,328.17

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6933

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNIFER YUNG TU

jyung@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	$ 8,121.37
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,193.26
****Base Wages**	$ 106,161.74
TOTAL Investment In You	$ 146,355.01

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6935

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANTONIO PONCE

aponce@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)		$ 4,803.85
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 7,802.26
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 25,096.50
****Base Wages**	$ 101,990.30
TOTAL Investment In You	$ 127,086.80

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6936

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

OLGA VEGA

ovega@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		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 62.88
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 2,195.42
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 3,881.49
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 20,137.86
****Base Wages**	$ 45,664.63
TOTAL Investment In You	$ 65,802.49

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 # 6939

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LETICIA MARES

lmares@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	$ 106.43
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	$ 4,437.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,742.48
****Base Wages**	$ 58,004.13
TOTAL Investment In You	$ 94,746.61

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6944

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CATHY LEE

catlee@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	$ 19,563.18
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	$ 8,536.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,350.50
****Base Wages**	$ 78,115.71
TOTAL Investment In You	$ 115,466.21
TOTAL Paid Time Off Days:	**46 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6945

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MINDY BROWN-LECHNER mblechner@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	$ 9,658.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,536.36
****Base Wages**	$ 79,698.84
TOTAL Investment In You	$ 130,235.20
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 # 6949 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VALERIE ESPINA vespina@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	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 102.34
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	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,604.93
****Base Wages**	$ 55,773.12
TOTAL Investment In You	$ 91,378.05
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**46 Days**

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6954

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WALTER BORROMEO

wborromeo@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	$ 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)	$ 9,151.28
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,036.77
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 58,083.56
****Base Wages**	$ 105,055.81
TOTAL Investment In You	$ 163,139.37

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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Dear Colleague,

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6955

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARISELA NAVARRO

manavarro@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	$ 106.03
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,944.72
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,420.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 26,768.61
****Base Wages**	$ 57,785.94
TOTAL Investment In You	$ 84,554.54

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6956

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RITVA LAINE

rlaine@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	$ 7,624.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,234.93
****Base Wages**	$ 99,664.03
TOTAL Investment In You	$ 127,898.96

TOTAL Paid Time Off Days: 46 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

Employee ID # 6957

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NICHOLE THOMAS

nthomas@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	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,774.20
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 95,183.31

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6983

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALISSON SOMBREDERO

asombredero@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	$ 7,077.46
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	$ 10,174.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,162.66
****Base Wages**	$ 156,023.80
TOTAL Investment In You	$ 183,186.46

TOTAL Paid Time Off Days: 45 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 7011

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SANDEEP KAUR

sakaur@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	$ 20,028.84
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.14
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	$ 9,182.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,322.61
****Base Wages**	$ 101,272.54
TOTAL Investment In You	$ 141,595.15

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 # 7012

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MEERIM LEE

meelee@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	$ 1,861.08
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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,331.84
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 177,427.66

TOTAL Paid Time Off Days: 45 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 7019 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DONALD MARTIN domartin@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	$ 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	$ 9,617.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,916.37
****Base Wages**	$ 156,567.01
TOTAL Investment In You	$ 191,483.38

TOTAL Paid Time Off Days: 46 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 7022

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YOSHITERU TAKADA

ytakada@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	$ 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)	$ 8,197.84
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,677.12
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 191,772.94

TOTAL Paid Time Off Days: 45 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 7033

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAMON ROWDEN

drowden@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)	$ 9,344.70
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,619.87
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 51,036.46
****Base Wages**	$ 156,749.84
TOTAL Investment In You	$ 207,786.30

TOTAL Paid Time Off Days: **47 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 # 7035

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JULIE WILLKOM

jwillkom@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	$ 9,182.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 18,432.95
****Base Wages**	$ 126,590.67
TOTAL Investment In You	$ 145,023.63

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 7037

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELVIA GUEVARA

eguevara@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	$ 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)	$ 5,137.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,840.17
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,066.48
****Base Wages**	$ 115,557.73
TOTAL Investment In You	$ 161,624.20

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 # 7043

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YOLANDA FABELA

yguerra@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,659.68
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,303.13
****Base Wages**	$ 101,878.55
TOTAL Investment In You	$ 141,181.67

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 # 7046

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NAI SAECHAO

nsaechao@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	$ 20,028.84
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	$ 9,252.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,392.31
****Base Wages**	$ 105,103.56
TOTAL Investment In You	$ 145,495.88

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 7048

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CATHY YIN

cyin@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: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 7055

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAISY GERMAN

dgerman@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	$ 20,734.74
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,308.28
****Base Wages**	$ 52,568.19
TOTAL Investment In You	$ 88,876.48
TOTAL Paid Time Off Days:	**46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 7056

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CATALINA HERNANDEZ GUTIERREZ cahernandez@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	$ 107.18
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,286.12
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,626.28
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 105,035.39

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 7058

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STEPHANIE RIVAS

srivas@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	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,340.16
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 103,749.27

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8002

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARCIANO RAMIREZ

mramirez@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	$ 7,487.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,559.19
****Base Wages**	$ 97,873.15
TOTAL Investment In You	$ 137,432.34

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8005

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CLAUDIA MARTINEZ

cdelgadillo@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	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,377.38
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 102,786.49
TOTAL Paid Time Off Days:	**46 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 # 8009 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HARJIT GILL hsgill@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	$ 8,128.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,200.28
****Base Wages**	$ 106,253.47
TOTAL Investment In You	$ 146,453.75

TOTAL Paid Time Off Days: 49 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8019

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TRIFON TADIARCA

ttadiarca@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	$ 8,771.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,774.89
****Base Wages**	$ 114,657.50
TOTAL Investment In You	$ 140,432.39

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8020

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SASHI MAHARAJ

smaharaj@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	$ 21,200.66
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 102.20
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	$ 4,260.74
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,561.67
****Base Wages**	$ 55,695.95
TOTAL Investment In You	$ 92,257.62

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8023

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

COREY JEFFERS

cjeffers@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)	$ 3,415.77
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 53,701.25
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 195,797.07

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 # 8024

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HARPAL DEOL

hdeol@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	$ 6,320.60
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	$ 7,802.26
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,719.83
****Base Wages**	$ 101,990.30
TOTAL Investment In You	$ 125,710.13

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8025

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KEELEY BUCCELLATO kbuccellato@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	$ 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	$ 7,802.26
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,717.57
****Base Wages**	$ 91,791.27
TOTAL Investment In You	$ 139,508.84

TOTAL Paid Time Off Days: 46 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8027

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TERESITA HUFANA

thufana@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	$ 103.60
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	$ 4,405.36
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,806.19
****Base Wages**	$ 57,586.46
TOTAL Investment In You	$ 82,392.66

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8029

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HOWARD THOMPSON

hthompson@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)	$ 4,803.85
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,802.26
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,720.86
****Base Wages**	$ 101,990.30
TOTAL Investment In You	$ 134,711.16

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8040

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STACY LAMB

slamb@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	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 96.26
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,737.43
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,459.05
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,052.37
****Base Wages**	$ 58,288.26
TOTAL Investment In You	$ 95,340.63
TOTAL Paid Time Off Days:	**46 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 # 8050

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALBERT GRAY

algrey@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	$ 94.96
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	$ 3,959.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,351.31
****Base Wages**	$ 51,753.10
TOTAL Investment In You	$ 76,104.41

TOTAL Paid Time Off Days: 51 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 # 8052

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TONY LEMA

tlema@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	$ 8,536.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,415.02
****Base Wages**	$ 111,593.87
TOTAL Investment In You	$ 161,008.89

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8054

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NESBIT CRUTCHFIELD

ncrutchfield@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	$ 6,832.02
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	$ 7,665.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,390.71
****Base Wages**	$ 100,207.12
TOTAL Investment In You	$ 124,597.83

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 # 8056

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TEDROS HAGOS

thagos@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		$ 7,802.26
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 21,271.01
****Base Wages**	$ 101,990.30
TOTAL Investment In You	$ 123,261.31

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8057

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROBERT BOWIE JR

rbowie@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	$ 101.38
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,054.48
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,418.44
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 24,760.37
****Base Wages**	$ 57,757.44
TOTAL Investment In You	$ 82,517.81

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8060

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TYTUS TAYLOR

ttaylor@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	$ 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)	$ 1,023.74
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,872.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,769.09
****Base Wages**	$ 76,762.40
TOTAL Investment In You	$ 114,531.49

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8065

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LILLY SLATER

lslater@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	$ 9.62
Long Term Disability	$ 102.34
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	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,760.93
****Base Wages**	$ 55,773.12
TOTAL Investment In You	$ 91,534.05
TOTAL Paid Time Off Days:	**46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8074

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GEORGE PETTY

gpetty@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	$ 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)	$ 6,659.93
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,359.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 54,914.66
****Base Wages**	$ 96,198.96
TOTAL Investment In You	$ 151,113.62

TOTAL Paid Time Off Days: 49 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8077

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CRAIG SMITH

crsmith@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	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 98.04
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,168.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 21,453.00
****Base Wages**	$ 54,495.38
TOTAL Investment In You	$ 75,948.38

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8082

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TERESA YOUNG

tkyoung@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	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 93.91
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 410.10
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,350.29
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,040.38
****Base Wages**	$ 56,866.58
TOTAL Investment In You	$ 78,906.95

TOTAL Paid Time Off Days: 46 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 # 8088

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PEDRO HERRERA

pherrera@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	$ 105.10
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,304.43
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,643.89
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 42,445.37
****Base Wages**	$ 79,936.06
TOTAL Investment In You	$ 122,381.43

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 # 8089 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELISSE AZOFEIFA esliwinski@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	$ 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	$ 8,536.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,823.92
****Base Wages**	$ 111,593.87
TOTAL Investment In You	$ 150,417.79

TOTAL Paid Time Off Days: 46 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8092 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CINDY LE cle@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	$ 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	$ 11,614.82
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,042.87
****Base Wages**	$ 176,599.36
TOTAL Investment In You	$ 208,642.23
TOTAL Paid Time Off Days:	**45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8097 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MONIKA DHALIWAL mdhaliwal@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	$ 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	$ 9,357.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,429.02
****Base Wages**	$ 138,629.92
TOTAL Investment In You	$ 180,058.94

TOTAL Paid Time Off Days: 45 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8099 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ORIN WATSON owatson@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	$ 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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,302.90
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 192,398.72

TOTAL Paid Time Off Days: 45 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8104

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CARLA EATON

ceaton@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	$ 21,200.66
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 101.38
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,534.21
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,418.44
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,252.76
****Base Wages**	$ 57,757.44
TOTAL Investment In You	$ 97,010.20
TOTAL Paid Time Off Days:	**46 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8105

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JAMES REDFERN jredfern@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	$ 6,583.46
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)	$ 5,171.42
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,688.47
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,353.62
****Base Wages**	$ 80,740.50
TOTAL Investment In You	$ 112,094.13

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 # 8106

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOAQUIN RODRIGUEZ jcrodriguez@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	$ 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)	$ 3,511.89
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,859.24
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,652.86
****Base Wages**	$ 63,519.46
TOTAL Investment In You	$ 97,172.31

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8111

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIA LUISA RAMOS

marramos@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: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8112 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SANDRA BAGGETT sbaggett@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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,818.02
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 171,913.84

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

2016

Employee ID # 8115

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KNUTE ANDERSON

kanderson@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	$ 14,812.98
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	$ 7,665.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,947.57
****Base Wages**	$ 100,207.12
TOTAL Investment In You	$ 133,154.69

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8117

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JACQUELYNN ROBINSON jrobinson@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	$ 7,242.04
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 61.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,681.40
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 24,030.94
****Base Wages**	$ 50,195.81
TOTAL Investment In You	$ 74,226.75

TOTAL Paid Time Off Days: 46 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8119

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHANETTE CHATMAN

schatman@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	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 101.76
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	$ 4,242.54
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,580.25
****Base Wages**	$ 55,458.00
TOTAL Investment In You	$ 91,038.25

TOTAL Paid Time Off Days: 56 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8122

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NGOC HOANG

nhoang@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	$ 1,218.36
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)	$ 4,589.49
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,643.89
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,662.55
****Base Wages**	$ 99,920.08
TOTAL Investment In You	$ 143,582.63
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 # 8123 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AMANDA PRESTON apreston@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	$ 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	$ 48,960.18
****Base Wages**	$ 97,040.94
TOTAL Investment In You	$ 146,001.13

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 # 8137

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHADEN AL JAMMAL

saljammal@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	$ 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	$ 5,872.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,944.21
****Base Wages**	$ 76,762.40
TOTAL Investment In You	$ 114,706.61
TOTAL Paid Time Off Days:	**46 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8139

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BEATRICE ONYENEKE

bonyeneke@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	$ 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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,322.70
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 191,418.52

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8177

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NATALIE FAN

nfan@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)	$ 3,471.75
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,673.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,556.22
****Base Wages**	$ 160,472.00
TOTAL Investment In You	$ 194,028.22

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8180

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CECELIA HOWARD

choward@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	$ 103.86
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	$ 4,330.07
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,324.12
****Base Wages**	$ 56,602.21
TOTAL Investment In You	$ 77,926.33
TOTAL Paid Time Off Days:	**46 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 # 8186

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TINA YOO

tjliu@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 *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	$ 9,673.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,930.85
****Base Wages**	$ 160,472.00
TOTAL Investment In You	$ 209,402.85

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8187

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DANIEL ARCE

darce@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	$ 56.27
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,062.62
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 23,571.61
****Base Wages**	$ 55,773.12
TOTAL Investment In You	$ 79,344.73

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 # 8190

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LIZRA AMES

lames@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	$ 21,200.66
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 99.07
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	$ 4,130.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,428.05
****Base Wages**	$ 53,990.14
TOTAL Investment In You	$ 90,418.19

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8191

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RAM MAGAR

rmagar@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	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 111.89
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	$ 5,009.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,886.08
****Base Wages**	$ 65,483.60
TOTAL Investment In You	$ 111,369.68

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8194 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WENDY GORTON wgorton@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	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 111.31
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	$ 4,967.73
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,843.73
****Base Wages**	$ 64,937.60
TOTAL Investment In You	$ 110,781.33

TOTAL Paid Time Off Days: 45 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8197

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAUREANO GATCHALIAN lgatchalian@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	$ 90.19
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 987.92
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,929.95
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,772.74
****Base Wages**	$ 51,371.84
TOTAL Investment In You	$ 97,144.58

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 # 8199

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SYLVIA WASHINGTON swashington@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	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 97.81
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,091.17
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,159.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,238.50
****Base Wages**	$ 54,370.37
TOTAL Investment In You	$ 77,608.87

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8204

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHARAE GANDY

sgandy@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	$ 21,200.66
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 102.34
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,217.68
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,785.39
****Base Wages**	$ 55,773.12
TOTAL Investment In You	$ 95,558.51

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8206

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARION SIMON

msimon@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	$ 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	$ 9,510.65
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,388.74
****Base Wages**	$ 149,217.54
TOTAL Investment In You	$ 199,606.28
TOTAL Paid Time Off Days:	**45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8207

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHELSEA DEMARTE

cdemarte@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	$ 110.33
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	$ 7,665.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,535.80
****Base Wages**	$ 90,186.41
TOTAL Investment In You	$ 128,722.21

TOTAL Paid Time Off Days: **46 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 # 8209

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LISA HEIL

lheil@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	$ 8,542.72
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,970.77
****Base Wages**	$ 111,669.58
TOTAL Investment In You	$ 140,640.36

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 # 8216

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DEBRA WASHINGTON

dwashington@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)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 78.25
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	$ 4,159.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,438.93
****Base Wages**	$ 54,370.37
TOTAL Investment In You	$ 78,809.30

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8219

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PETER MCGOVERN

pmcgovern@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		$ 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	$ 23,406.05
****Base Wages**	$ 134,316.00
TOTAL Investment In You	$ 157,722.05

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8222

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOE PORTA

jporta@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	$ 5,421.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,832.13
****Base Wages**	$ 70,869.34
TOTAL Investment In You	$ 96,701.48

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 # 8223

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AIDA FREGOSO

afregoso@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	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 106.43
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	$ 4,437.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,336.18
****Base Wages**	$ 58,004.13
TOTAL Investment In You	$ 87,340.31

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8225 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GREGG DE LONG gdelong@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	$ 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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,479.28
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 183,575.10

TOTAL Paid Time Off Days: 45 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8232

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JIMMYLY SALINAS

jsalinas@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	$ 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	$ 45,202.60
****Base Wages**	$ 56,652.96
TOTAL Investment In You	$ 101,855.56

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8233

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSEMARIE ANDAL randal@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 *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	$ 9,182.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,079.57
****Base Wages**	$ 126,590.67
TOTAL Investment In You	$ 152,670.25

TOTAL Paid Time Off Days: 45 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8234

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GUIFANG SHI

gshi@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	$ 20,494.76
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	$ 40,788.79
****Base Wages**	$ 113,931.60
TOTAL Investment In You	$ 154,720.40

TOTAL Paid Time Off Days: **40 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

Employee ID # 8237

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GLORIA CHAVARIN

gchavarin@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)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,167.42
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 94,576.53

TOTAL Paid Time Off Days: 46 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 # 8240

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRENDA RHODES

brhodes@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	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,774.20
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 95,183.31

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8241

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NYREE REYES

nreyes@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	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 106.43
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	$ 4,437.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 21,729.82
****Base Wages**	$ 58,004.13
TOTAL Investment In You	$ 79,733.95

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8244 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHRISTOPHER STALLWORTH cstallworth@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	$ 60.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,538.76
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,562.07
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,925.52
****Base Wages**	$ 53,671.36
TOTAL Investment In You	$ 102,596.88

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 # 8245 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHAWN WILSON shwilson@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	$ 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)	$ 722.78
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 51,008.26
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 193,104.08

TOTAL Paid Time Off Days: 45 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8247

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KRISTINE CLAIRE FERNANDEZ kfernandez@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	$ 8,997.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,407.74
****Base Wages**	$ 117,609.23
TOTAL Investment In You	$ 147,016.97

TOTAL Paid Time Off Days: 46 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8248

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CALVIN CHU

calchu@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	$ 96.70
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,332.86
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,418.44
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,738.19
****Base Wages**	$ 57,757.44
TOTAL Investment In You	$ 80,495.63

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8250 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TAIWO SAWYERR tsawyerr@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	$ 9.62
Long Term Disability	$ 100.95
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	$ 4,676.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,963.12
****Base Wages**	$ 61,125.58
TOTAL Investment In You	$ 83,088.71

TOTAL Paid Time Off Days: 46 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8253 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BASIL ONYEWUCHI bonyewuchi@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)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 109.43
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,867.06
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,653.31
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 48,594.48
****Base Wages**	$ 60,827.52
TOTAL Investment In You	$ 109,422.00

TOTAL Paid Time Off Days: 46 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8254

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIA FLORES-LOZANO maflores@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	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 97.81
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	$ 4,159.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,443.21
****Base Wages**	$ 54,370.37
TOTAL Investment In You	$ 75,813.58

TOTAL Paid Time Off Days: 46 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 # 8255 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ODION IKHILE ooikhile@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	$ 100.95
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,938.73
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,676.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,013.01
****Base Wages**	$ 61,125.58
TOTAL Investment In You	$ 89,138.60
TOTAL Paid Time Off Days:	**46 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8257

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GLADYS MEJIA

gmejia@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	$ 7,077.46
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	$ 26,327.44
****Base Wages**	$ 110,903.94
TOTAL Investment In You	$ 137,231.38

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 # 8258

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALISHA LOVETT

alovett@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	$ 9,182.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,254.45
****Base Wages**	$ 126,590.67
TOTAL Investment In You	$ 167,845.13

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 # 8259

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHELLE TRAN

mictran@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	$ 21,200.66
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 102.34
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	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,567.71
****Base Wages**	$ 55,773.12
TOTAL Investment In You	$ 92,340.83
TOTAL Paid Time Off Days:	**46 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8263

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RACHEL POULOSE

rpoulose@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		$ 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)		$ 7,670.54
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 9,212.67
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 30,049.32
****Base Wages**	$ 128,667.14
TOTAL Investment In You	$ 158,716.46

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 # 8264

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VERONICA UBAH

vubah@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: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8265

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MY THUY DAM

mdam@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	$ 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	$ 33,805.97
****Base Wages**	$ 101,272.54
TOTAL Investment In You	$ 135,078.51

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 # 8266

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENALYN VILLEGAS

jvillegas@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	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 21,761.54
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 80,170.65

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8267

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EUGENIA TURK

eturk@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	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 102.34
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	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 21,555.05
****Base Wages**	$ 55,773.12
TOTAL Investment In You	$ 77,328.17

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8268 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JANA TIFFANY BREWER jbrewer@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	$ 6,912.88
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	$ 9,510.65
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,316.38
****Base Wages**	$ 104,452.28
TOTAL Investment In You	$ 130,768.66
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 # 8269

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAYRA CUEVAS

mcuevas@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	$ 21,200.66
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 90.30
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,102.54
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,391.57
****Base Wages**	$ 53,628.02
TOTAL Investment In You	$ 90,019.59

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 # 8274

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LIZETH RIVERA

lrivera@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	$ 102.34
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	$ 4,437.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,304.35
****Base Wages**	$ 58,004.13
TOTAL Investment In You	$ 103,308.47

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8275

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JUNER VALENCIA jvalencia@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	$ 9,182.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,482.03
****Base Wages**	$ 126,590.67
TOTAL Investment In You	$ 153,072.71

TOTAL Paid Time Off Days: 45 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8277

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PRISCILLA PRESENTATION

ppresentation@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/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	$ 29,593.19
****Base Wages**	$ 101,272.54
TOTAL Investment In You	$ 130,865.73
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 # 8287

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LOAN NGUYEN

longuyen@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	$ 112.70
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	$ 4,698.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,576.02
****Base Wages**	$ 61,419.90
TOTAL Investment In You	$ 106,995.92
TOTAL Paid Time Off Days:	**46 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8288

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRANDI JOHNSON

bljohnson@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	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 102.34
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,072.56
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,252.59
****Base Wages**	$ 55,773.12
TOTAL Investment In You	$ 87,025.71

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8289

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FELICIA HORTON

fhorton@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	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 102.34
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	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 22,773.67
****Base Wages**	$ 55,773.12
TOTAL Investment In You	$ 78,546.79

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 # 8292

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHANICA DURKEE

sbwilliams@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	*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		$ 105.10
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		$ 7,302.80
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 21,405.97
****Base Wages**	$ 57,276.84
TOTAL Investment In You	$ 78,682.80

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 # 8297

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CELIA MONTES

cmontes@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	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 111.89
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	$ 4,664.91
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,945.13
****Base Wages**	$ 60,979.15
TOTAL Investment In You	$ 90,924.28

TOTAL Paid Time Off Days: 46 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 # 8302

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALEXANDRA JOSE-CHANG

ajchang@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	$ 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	$ 4,859.24
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,508.65
****Base Wages**	$ 63,519.46
TOTAL Investment In You	$ 93,028.10
TOTAL Paid Time Off Days:	**46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8303

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHAMMARA VANTERPOOL svanterpool@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	$ 20,960.42
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	$ 7,643.89
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,753.00
****Base Wages**	$ 99,920.08
TOTAL Investment In You	$ 138,673.08

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8306

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JULIE CORRAL

jcorral@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	$ 18,317.26
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 53.30
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,172.68
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,664.91
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,206.21
****Base Wages**	$ 30,489.58
TOTAL Investment In You	$ 65,695.79
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 # 8307

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ASHA BILN

abiln@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	$ 58.91
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	$ 4,285.63
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,641.76
****Base Wages**	$ 44,817.01
TOTAL Investment In You	$ 69,458.77

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 # 8310

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROMONA SLAY

rslay@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	$ 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)	$ 574.00
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	$ 30,341.76
****Base Wages**	$ 138,629.92
TOTAL Investment In You	$ 168,971.68

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8311

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ERIC MAHONE

emahone@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	$ 6,832.02
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	$ 9,673.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,398.71
****Base Wages**	$ 160,472.00
TOTAL Investment In You	$ 186,870.71

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8312

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAY LAC

mlal@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	$ 14,483.82
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 69.93
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	$ 4,859.24
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,136.02
****Base Wages**	$ 57,167.51
TOTAL Investment In You	$ 86,303.53

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 # 8319

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHARRONNE MCNAIR

slmcnair@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	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 97.81
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	$ 4,159.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,059.05
****Base Wages**	$ 54,370.37
TOTAL Investment In You	$ 98,429.42

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 # 8321 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GOITEOM LEGESSE glegesse@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	$ 9.62
Long Term Disability	$ 100.95
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	$ 4,676.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,963.12
****Base Wages**	$ 61,125.58
TOTAL Investment In You	$ 83,088.71

TOTAL Paid Time Off Days: 46 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8323 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VINCENT ACHA vacha@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	$ 21,200.66
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 67.30
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 6,535.73
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,769.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 42,296.34
****Base Wages**	$ 62,348.00
TOTAL Investment In You	$ 104,644.34

TOTAL Paid Time Off Days: 46 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 # 8327

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TERESA NICHOLS

tnichols@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	$ 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)	$ 3,586.96
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,510.65
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,602.96
****Base Wages**	$ 149,217.54
TOTAL Investment In You	$ 193,820.50

TOTAL Paid Time Off Days: 45 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8332 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MIKAEL PAUL mpaul@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	$ 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	$ 5,532.97
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,536.56
****Base Wages**	$ 72,326.38
TOTAL Investment In You	$ 94,862.94
TOTAL Paid Time Off Days:	**46 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8335

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CAROLYN MCCORKINDALE cmccorkindale@alamedahealthsystem.or

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	$ 7,624.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,034.93
****Base Wages**	$ 69,764.82
TOTAL Investment In You	$ 97,799.75

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 # 8340 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSE ZHANG rzhang@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	$ 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	$ 9,637.95
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,709.84
****Base Wages**	$ 157,996.80
TOTAL Investment In You	$ 199,706.64

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 # 8341

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YOLANDA BURNS

yburns@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 102.34
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	$ 4,706.77
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,682.24
****Base Wages**	$ 61,526.40
TOTAL Investment In You	$ 87,208.64

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 # 8342 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BISOLA BARUWA bbaruwa@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	*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		$ 9,294.58
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 21,784.97
****Base Wages**	$ 134,316.00
TOTAL Investment In You	$ 156,100.97

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 # 8349

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANTONIO SARDENIA

asardenia@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	$ 21,200.66
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)	$ 2,004.83
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,316.82
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,633.78
****Base Wages**	$ 69,500.91
TOTAL Investment In You	$ 109,134.69

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8353

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AISHA WRIGHT

aiwright@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	$ 21,200.66
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 102.34
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	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,567.71
****Base Wages**	$ 55,773.12
TOTAL Investment In You	$ 92,340.83
TOTAL Paid Time Off Days:	**46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8354

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNIFER ALVAREZ

jnavarro@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 106.43
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	$ 4,437.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,712.08
****Base Wages**	$ 58,004.13
TOTAL Investment In You	$ 87,716.21
TOTAL Paid Time Off Days:	**46 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

Employee ID # 8355

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KATHLEEN SHEA

kshea@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	$ 9,568.19
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,073.54
****Base Wages**	$ 153,185.34
TOTAL Investment In You	$ 194,258.88

TOTAL Paid Time Off Days: **45 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 # 8356

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SCHOLA IDEM

sidem@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.14
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	$ 9,182.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,805.71
****Base Wages**	$ 101,272.54
TOTAL Investment In You	$ 135,078.25

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 # 8357

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CAMILLE BLACKMAN cblackman@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	$ 102.34
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	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,666.21
****Base Wages**	$ 55,773.12
TOTAL Investment In You	$ 80,439.33
TOTAL Paid Time Off Days:	**46 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8358

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

XUEJUN QIAO

xqiao@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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,818.02
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 171,913.84

TOTAL Paid Time Off Days: **45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8360

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SIMON LUI

slui@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)	$ 155.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,189.46
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,416.35
****Base Wages**	$ 107,051.78
TOTAL Investment In You	$ 147,468.13

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8363

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LESLEY LINTON

llinton@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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,706.86
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 168,802.68

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 # 8364

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JACQUELINE BUNTON

jbunton@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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,285.48
****Base Wages**	$ 127,886.24
TOTAL Investment In You	$ 178,171.72

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 # 8365

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

INGRID PAMPALONE

ipampalone@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	$ 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	$ 9,612.46
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,825.91
****Base Wages**	$ 156,238.78
TOTAL Investment In You	$ 182,064.70
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 # 8367

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JASON BROWN

jabrown@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	$ 104.27
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 390.12
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,433.99
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,225.61
****Base Wages**	$ 57,960.66
TOTAL Investment In You	$ 83,186.27

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8375 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DEWANA JOHNSON dtjohnson@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 60.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,048.03
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,365.03
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,595.03
****Base Wages**	$ 39,941.43
TOTAL Investment In You	$ 85,536.46

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 # 8376 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

IFEYINWA IKEKHIDE iikekhide@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	$ 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	$ 18,544.97
****Base Wages**	$ 134,316.00
TOTAL Investment In You	$ 152,860.97
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 # 8377

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LESLIE RAINEY

lrainey@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	$ 102.34
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	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,133.67
****Base Wages**	$ 55,773.12
TOTAL Investment In You	$ 100,906.79

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8386

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSALINA SULLIVAN rmontoya@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		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 106.43
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		$ 4,437.32
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 18,541.82
****Base Wages**	$ 58,004.13
TOTAL Investment In You	$ 76,545.95

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 # 8389

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRIAN HICKMAN

bhickman@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	$ 6,832.02
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)	$ 199.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,536.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,460.80
****Base Wages**	$ 111,593.87
TOTAL Investment In You	$ 137,054.67

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 # 8390

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROBIN LITT

rlitt@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	$ 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	$ 9,751.94
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,611.41
****Base Wages**	$ 165,858.16
TOTAL Investment In You	$ 215,469.57

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 # 8394

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STACY LEE

stlee@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)	$ 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	$ 8,536.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,615.02
****Base Wages**	$ 111,593.87
TOTAL Investment In You	$ 161,208.89

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 # 8400 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NIKESHA VERCHER nvercher@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	$ 76.52
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	$ 5,316.82
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,158.03
****Base Wages**	$ 55,600.73
TOTAL Investment In You	$ 101,758.76

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 # 8402

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALEJANDRA OCHOA

arubiodeochoa@alamedahealthsystem.o

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:	**40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8407

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PHILLIP MCKEOWN

pmckeown@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	$ 7,242.04
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 102.88
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,199.52
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,374.86
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,698.75
****Base Wages**	$ 51,468.96
TOTAL Investment In You	$ 75,167.71
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 # 8414

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SWEENA BURROUGHS

sburroughs@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	$ 9,704.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 18,954.88
****Base Wages**	$ 130,068.22
TOTAL Investment In You	$ 149,023.10

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 # 8417

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KIRK HOFLAND

khofland@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	$ 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	$ 9,510.65
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,792.38
****Base Wages**	$ 149,217.54
TOTAL Investment In You	$ 184,009.92

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 # 8427 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

IKPOMWNOSA EKHATOR iekhator@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	$ 21,200.66
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 61.50
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,357.78
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,676.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,294.12
****Base Wages**	$ 61,125.58
TOTAL Investment In You	$ 101,419.70

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 # 8432

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DORENE DONALDSON ddonaldson@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	$ 642.46
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	$ 21,623.98
****Base Wages**	$ 56,652.96
TOTAL Investment In You	$ 78,276.94
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 # 8434

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOSEPH PADILLA

jpadilla@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		$ 7,867.31
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 21,978.78
****Base Wages**	$ 102,840.61
TOTAL Investment In You	$ 124,819.38

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 # 8436

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LEIGH MILLER

lemiller@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	$ 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	$ 9,144.51
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,555.14
****Base Wages**	$ 123,966.54
TOTAL Investment In You	$ 153,521.69

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 # 8438

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JEAN GARNER

jgarner@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)	$ 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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,906.86
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 169,002.68

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 # 8442

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RAJINDER KAUR

rajkaur@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	$ 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)	$ 3,174.45
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,203.86
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,273.82
****Base Wages**	$ 68,024.32
TOTAL Investment In You	$ 117,298.14

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8443

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DONALD MILLER

dpmiller@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)	$ 4,813.74
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,363.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,476.70
****Base Wages**	$ 83,187.10
TOTAL Investment In You	$ 119,663.81

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 # 8452 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KAREN HAUBEN khauben@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	$ 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)	$ 1,939.51
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,654.05
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,893.03
****Base Wages**	$ 86,981.02
TOTAL Investment In You	$ 112,874.05

TOTAL Paid Time Off Days: 46 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 # 8453

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHEZELL SAZON-MUSE

cmuse@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	$ 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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,285.48
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 192,381.30

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.*

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

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8459

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JIZHEN MAO

jmao@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	$ 20,960.42
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)	$ 7,322.29
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,187.34
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,598.94
****Base Wages**	$ 126,919.73
TOTAL Investment In You	$ 175,518.66

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 # 8465

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHAWANNA EMERSON

semerson@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	$ 87.07
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,003.35
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,980.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,368.49
****Base Wages**	$ 52,087.19
TOTAL Investment In You	$ 79,455.68

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 # 8466

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MANUEL MARAVILLA-PINO

mmaravilla@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,743.80
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 88,152.91
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 # 8468

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JANET KUHN

jkuhn@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	$ 61.68
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	$ 4,459.05
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,817.96
****Base Wages**	$ 40,801.78
TOTAL Investment In You	$ 65,619.74

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 # 8469

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DEBORAH GALBERT

dgalbert@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	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 197.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.18
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 870.52
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,402.62
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 94,811.73

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 # 8471

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAYRA GONZALEZ

mfgonzalez@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	$ 21,200.66
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.18
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,808.13
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,619.55
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 97,028.66
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 # 8472

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JAMES BONACORSO jbonacorso@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	$ 7,643.89
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,149.24
****Base Wages**	$ 99,920.08
TOTAL Investment In You	$ 139,069.32

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 # 8474

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AMY SMITH

aesmith@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	$ 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**	$ 162,585.28
TOTAL Investment In You	$ 213,167.86

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 # 8475 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANU SHARMA asharma@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	$ 92.25
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	$ 4,474.14
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,765.12
****Base Wages**	$ 58,485.44
TOTAL Investment In You	$ 95,250.56
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 # 8477

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

UCHENNA OBI-OFODILE

uofodile@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	$ 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	$ 9,315.15
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,230.46
****Base Wages**	$ 135,734.56
TOTAL Investment In You	$ 184,965.02

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 # 8480

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SARA WAHLIN

swahlin@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	$ 7,077.46
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	$ 7,007.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 23,978.21
****Base Wages**	$ 73,285.22
TOTAL Investment In You	$ 97,263.43

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 # 8484

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VITALINE BRIGGS

vbriggs@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	$ 7,815.31
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,225.94
****Base Wages**	$ 102,160.86
TOTAL Investment In You	$ 130,386.80

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 # 8495

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LUPE URIBE

lvuribe@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	$ 99.57
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,361.85
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	$ 26,092.60
****Base Wages**	$ 56,652.96
TOTAL Investment In You	$ 82,745.56

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 # 8498

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHONNE HARRIS

miharris@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	$ 102.34
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,984.24
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 37,745.17
****Base Wages**	$ 55,773.12
TOTAL Investment In You	$ 93,518.29

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 # 8510 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CAROLINE MASANJE cmasanje@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	$ 6,748.30
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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,048.54
****Base Wages**	$ 85,257.49
TOTAL Investment In You	$ 111,306.03

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 # 8513 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAWRENCE EVANS levans@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	$ 21,320.52
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 91.62
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	$ 3,896.18
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,306.39
****Base Wages**	$ 50,930.46
TOTAL Investment In You	$ 87,236.86
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 # 8515 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DARRIN WILSON darwilson@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	$ 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	$ 9,444.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,377.06
****Base Wages**	$ 101,250.39
TOTAL Investment In You	$ 150,627.45

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 # 8549

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KIANA JOHNSON

kijohnson@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 98.32
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	$ 4,262.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,528.94
****Base Wages**	$ 55,716.13
TOTAL Investment In You	$ 85,245.07

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 # 8554

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YOLANDA DICKEY

ydickey@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	$ 21,036.60
Dental	$ 586.04
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)	$ 3,703.20
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,673.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 44,450.07
****Base Wages**	$ 160,472.00
TOTAL Investment In You	$ 204,922.07

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 # 8556

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARY ANN GELERA

mgelera@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	$ 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	$ 9,704.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,776.38
****Base Wages**	$ 162,585.28
TOTAL Investment In You	$ 204,361.66

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 # 8562

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CYNTHIA HOGAN

chogan@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	$ 9,144.51
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,649.86
****Base Wages**	$ 123,966.54
TOTAL Investment In You	$ 164,616.41

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 # 8570

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIAH SEWELL

msewell@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	$ 82.83
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	$ 3,993.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,373.22
****Base Wages**	$ 52,198.22
TOTAL Investment In You	$ 76,571.45

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 # 8571

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KHATLEEN MATEO kmateo@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	$ 103.60
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	$ 4,318.99
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,719.82
****Base Wages**	$ 56,457.44
TOTAL Investment In You	$ 81,177.26

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 # 8575

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TRANG NGUYEN

trnguyen@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	$ 0.00
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	$ 13,409.72
****Base Wages**	$ 27,612.94
TOTAL Investment In You	$ 41,022.66

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 # 8578

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VALDRIANA OAKES

voakes@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	$ 21,320.52
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 87.50
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,819.79
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,225.87
****Base Wages**	$ 49,931.86
TOTAL Investment In You	$ 86,157.73

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 # 8580 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KUBURAT AWOSANYA kawosanya@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	$ 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	$ 5,316.82
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,966.23
****Base Wages**	$ 69,500.91
TOTAL Investment In You	$ 99,467.14

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 # 8581 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ISOLDE SEDANO isedano@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	$ 14,483.82
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 76.22
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	$ 5,295.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,211.32
****Base Wages**	$ 62,305.03
TOTAL Investment In You	$ 92,516.34

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 # 8584 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MEHRDAD MAQSOODI mmaqsoodi@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	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 61.80
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	$ 4,169.06
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 13,367.85
****Base Wages**	$ 43,597.96
TOTAL Investment In You	$ 56,965.81

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 # 8587 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CLIFTON GREEN cgreen@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		$ 60.00
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		$ 4,365.03
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 16,802.02
****Base Wages**	$ 51,353.27
TOTAL Investment In You	$ 68,155.28

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.*

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

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8590

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NADIA WHITEHEAD

nwhitehead@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	$ 20,734.74
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	$ 5,316.82
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,163.03
****Base Wages**	$ 62,550.82
TOTAL Investment In You	$ 99,713.85
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 # 8600

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GALE DOWNS

gadowns@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	$ 14,483.82
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 76.52
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	$ 5,316.82
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,656.61
****Base Wages**	$ 62,550.82
TOTAL Investment In You	$ 92,207.43

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 # 8604 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TAWANDA GILBERT tgilbert@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	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 52.50
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,819.79
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,674.19
****Base Wages**	$ 49,931.86
TOTAL Investment In You	$ 93,606.05
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 # 8605

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JONATHAN RAMSDEN jramsden@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	$ 8,633.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,044.29
****Base Wages**	$ 112,858.30
TOTAL Investment In You	$ 141,902.59

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 # 8606 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL GONZALEZ migonzalez@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	$ 91.62
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	$ 3,819.79
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,267.22
****Base Wages**	$ 49,931.86
TOTAL Investment In You	$ 85,199.08

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 # 8607 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FREDDERICK COLEMAN fcoleman@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)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 87.50
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,819.79
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 13,244.27
****Base Wages**	$ 49,931.86
TOTAL Investment In You	$ 63,176.13

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 # 8608

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JESSICA PEREZ

jcontreras@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,943.80
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 88,352.91

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 # 8609

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ERIKA FLORES

eflores@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	$ 7,598.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,476.58
****Base Wages**	$ 99,326.66
TOTAL Investment In You	$ 147,803.24

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 # 8610 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FREDERICK TATUM ftatum@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)	$ 7,002.69
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,730.85
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,382.95
****Base Wages**	$ 164,403.20
TOTAL Investment In You	$ 205,786.15

TOTAL Paid Time Off Days: 47 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 # 8612

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FESSEHA ADHANA

fadhana@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	$ 53.84
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)	$ 140.00
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	$ 53,446.34
****Base Wages**	$ 97,763.33
TOTAL Investment In You	$ 151,209.66
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 # 8614

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MILLER CRISOSTOMO

mcrisostomo@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	$ 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)	$ 4,323.47
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,643.89
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,249.09
****Base Wages**	$ 99,920.08
TOTAL Investment In You	$ 137,169.17

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 # 8618

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ARNETTA BROX

abrox@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 99.80
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	$ 4,160.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,022.52
****Base Wages**	$ 54,388.88
TOTAL Investment In You	$ 76,411.40

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 # 8623

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHARLOTTE KOUM

ckoum@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)		$ 200.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 87.50
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 3,819.79
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 16,484.27
****Base Wages**	$ 49,931.86
TOTAL Investment In You	$ 66,416.13

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 # 8625 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GLENEN GRIVAS ggrivas@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	$ 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	$ 30,169.09
****Base Wages**	$ 126,590.67
TOTAL Investment In You	$ 156,759.77

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 # 8631

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FELICIA WOODS

fwoods@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	$ 20,388.94
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 73.30
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,819.79
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,280.10
****Base Wages**	$ 39,945.48
TOTAL Investment In You	$ 75,225.58

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 # 8633

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NADIA POBLETE

napoblete@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	$ 20,960.42
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	$ 8,536.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,966.10
****Base Wages**	$ 111,593.87
TOTAL Investment In You	$ 151,559.97

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 # 8634

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARY RHONDA ALAPATI

mralapati2@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	$ 20,734.74
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 108.23
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	$ 4,698.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,539.67
****Base Wages**	$ 55,277.91
TOTAL Investment In You	$ 91,817.58
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 # 8635

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHERRY FULLER

sfuller@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	$ 14,154.66
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 99.43
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	$ 4,318.99
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,128.43
****Base Wages**	$ 45,165.95
TOTAL Investment In You	$ 74,294.38

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 # 8637 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DORIN DEVI dodevi@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	$ 0.00
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 100.29
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	$ 4,181.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 15,279.46
****Base Wages**	$ 43,723.93
TOTAL Investment In You	$ 59,003.39

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 # 8640

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BELLE WOSKOW

bwoskow@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	$ 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	$ 8,536.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,836.40
****Base Wages**	$ 111,593.87
TOTAL Investment In You	$ 137,430.27

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 # 8641

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NICHOLAS EHENEMBA nehenemba@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	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 105.09
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	$ 5,316.82
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,076.68
****Base Wages**	$ 55,600.73
TOTAL Investment In You	$ 80,677.40
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 # 8642

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

INGRID HERNANDEZ

ihernandez@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,897.44
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 103,306.55

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 # 8644 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NATASHA PRASAD nprasad@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	$ 14,483.82
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 93.91
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	$ 4,350.29
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,707.48
****Base Wages**	$ 51,179.92
TOTAL Investment In You	$ 79,887.39

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 # 8646

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DENISE DRUMMER-TAYLOR

detaylor@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	$ 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	$ 7,665.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,315.25
****Base Wages**	$ 100,207.12
TOTAL Investment In You	$ 132,522.37

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 # 8648 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KIMBERLY EGBUNA kegbuna@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	$ 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	$ 49,050.36
****Base Wages**	$ 123,313.63
TOTAL Investment In You	$ 172,363.99

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 # 8656

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EVA MARAVILLA

eamaravilla@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,743.80
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 88,152.91
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 # 8658 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GLADYS GALLEGUILLOS ggalleguillos@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	$ 0.00
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 97.06
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	$ 4,365.03
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 15,460.16
****Base Wages**	$ 51,353.27
TOTAL Investment In You	$ 66,813.42

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 # 8660

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNY SERRANO

jserrano@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	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,774.20
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 95,183.31
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 # 8661

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAISY GARCIA

dramos@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	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 21,761.54
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 80,170.65

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 # 8662

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AMY HAMILTON

ahamilton@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	$ 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	$ 29,545.68
****Base Wages**	$ 123,313.63
TOTAL Investment In You	$ 152,859.31

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 # 8663

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MANUEL MARAVILLA-PINO

mapino@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	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 98.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,551.12
****Base Wages**	$ 55,773.12
TOTAL Investment In You	$ 77,324.24

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 # 8670

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHERILYNNE GARRIDO

sgarrido@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	$ 14,483.82
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 58.28
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	$ 4,859.24
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,124.37
****Base Wages**	$ 57,167.51
TOTAL Investment In You	$ 86,291.88

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 # 8671

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MEGHAN WOULFE

mwoulfe@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	$ 9,135.05
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,434.52
****Base Wages**	$ 123,313.63
TOTAL Investment In You	$ 149,748.15

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 # 8672

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOYCE SHEN

jshen@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	$ 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	$ 8,536.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,836.40
****Base Wages**	$ 111,593.87
TOTAL Investment In You	$ 137,430.27

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 # 8676

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KENNETH MEJIA

kmejia@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		$ 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)		$ 5,074.28
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 7,300.36
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 26,503.53
****Base Wages**	$ 95,429.57
TOTAL Investment In You	$ 121,933.10

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8677

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FRANK WILLIS

fwillis@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	$ 91.62
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 480.11
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,896.18
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,653.98
****Base Wages**	$ 50,930.46
TOTAL Investment In You	$ 72,584.45
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 # 8678

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KATHIA DIAZ

kdiaz@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	$ 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	$ 5,813.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,928.07
****Base Wages**	$ 75,991.14
TOTAL Investment In You	$ 101,919.21

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8684

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VANESSA DIAZ

vdiaz@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	$ 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	$ 5,316.82
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 16,428.29
****Base Wages**	$ 69,500.91
TOTAL Investment In You	$ 85,929.20
TOTAL Paid Time Off Days:	**41 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 # 8689 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SCOTT BREAUD sbreaud@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	$ 18,928.00
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)	$ 2,434.44
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	$ 41,656.47
****Base Wages**	$ 101,272.54
TOTAL Investment In You	$ 142,929.01

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 # 8693 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LUCILE EDWARDS ledwards@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)	$ 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	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,018.02
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 172,113.84

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 # 8694

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NII ADDY

naddy@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	$ 91.85
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	$ 3,829.18
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,107.09
****Base Wages**	$ 50,054.58
TOTAL Investment In You	$ 71,161.67
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

Employee ID # 8698

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NORMAN BELL

nbell@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	*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		$ 52.50
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 3,819.79
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 16,249.27
****Base Wages**	$ 44,938.67
TOTAL Investment In You	$ 61,187.94

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 # 8700

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ADRIAN JACKSON

ajackson@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	$ 7,643.89
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,758.64
****Base Wages**	$ 99,920.08
TOTAL Investment In You	$ 127,678.72

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 # 8703

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CLARA PEREZ

ciperez@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	$ 102.34
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,681.40
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 27,347.61
****Base Wages**	$ 55,773.12
TOTAL Investment In You	$ 83,120.73

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 # 8705

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GEVAUGHN WHITE

gwhite@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	$ 67.20
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	$ 3,647.71
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,106.87
****Base Wages**	$ 47,682.54
TOTAL Investment In You	$ 82,789.41
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 # 8708

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHARLENE WILLIAMS

chwilliams@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	$ 65.10
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	$ 3,764.54
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,594.33
****Base Wages**	$ 39,367.74
TOTAL Investment In You	$ 83,962.08
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 # 8709

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DANIELLE SIMMONS

dsimmons@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	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 102.34
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 804.42
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,266.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,208.07
****Base Wages**	$ 55,773.12
TOTAL Investment In You	$ 92,981.19
TOTAL Paid Time Off Days:	**41 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 # 8718

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MALIKA BELL

mbell@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	$ 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	$ 7,643.89
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,943.36
****Base Wages**	$ 99,920.08
TOTAL Investment In You	$ 124,863.44

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 # 8721

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CARLOS MARTINEZ

cimartinez@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)	$ 3,552.93
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,057.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,505.72
****Base Wages**	$ 79,180.19
TOTAL Investment In You	$ 129,685.92

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8722

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JEFFREY HURLEY jehurley@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	$ 9,294.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,705.21
****Base Wages**	$ 94,021.20
TOTAL Investment In You	$ 123,726.41
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 # 8724

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VICTOR MA

vma@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	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 65.10
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	$ 3,764.54
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,830.99
****Base Wages**	$ 34,446.78
TOTAL Investment In You	$ 58,277.77

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 # 8731

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DANIELLE COLLETTE

dcollette@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	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 99.43
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	$ 4,620.02
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,905.51
****Base Wages**	$ 60,392.38
TOTAL Investment In You	$ 82,297.90

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 # 8737 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STEWART SLOWLEY sslowley@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		$ 9,407.39
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 21,897.78
****Base Wages**	$ 127,886.24
TOTAL Investment In You	$ 149,784.02

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 # 8738

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOY AGUIRRE

jaguirre@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: 40 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8739 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CASSANDRA TAYLOR cataylor@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	$ 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	$ 9,135.05
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,784.46
****Base Wages**	$ 123,313.63
TOTAL Investment In You	$ 157,098.09

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 # 8742

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JESSICA HALLOWELL jhallowell@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	$ 6,654.05
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,064.68
****Base Wages**	$ 86,981.02
TOTAL Investment In You	$ 114,045.70

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 # 8744

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DEBORAH HOSKINSON dhoskinson@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	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 51.77
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	$ 3,744.78
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,188.50
****Base Wages**	$ 44,056.21
TOTAL Investment In You	$ 79,244.71
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 # 8745

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROBERT ENRIQUEZ

renriquez@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	$ 9,182.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,687.91
****Base Wages**	$ 126,590.67
TOTAL Investment In You	$ 167,278.59

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 # 8746

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOSEPH RENNER

jrenner@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	$ 6,885.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,974.31
****Base Wages**	$ 89,999.94
TOTAL Investment In You	$ 128,974.24

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 # 8748

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

REGINA BELL-VERONA

rebell@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	$ 18,928.00
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	$ 9,135.05
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,174.52
****Base Wages**	$ 98,650.91
TOTAL Investment In You	$ 137,825.42

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 # 8749

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SABRINA FOSTER

sfoster@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	$ 51.77
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	$ 3,744.78
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,093.78
****Base Wages**	$ 39,161.08
TOTAL Investment In You	$ 63,254.86

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 # 8751

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LYNDE ROUCHE lrouche@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	$ 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	$ 9,704.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,815.96
****Base Wages**	$ 130,068.22
TOTAL Investment In You	$ 150,884.18

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 # 8754

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANDREA THOMAS

andthomas@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		$ 1,218.36
Vision Reimbursement (fiscal yr 2016)		$ 200.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 46.68
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 2,870.24
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 4,077.78
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 20,550.05
****Base Wages**	$ 53,304.37
TOTAL Investment In You	$ 73,854.42

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 # 8755

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AMANDA KUNWAR

akunwar@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	$ 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	$ 5,489.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,404.74
****Base Wages**	$ 64,581.57
TOTAL Investment In You	$ 109,986.31

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 # 8764

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LESLIE COSTA

leaguilar@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	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,259.70
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 93,668.81
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 # 8769

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANNA PEARL

apearl@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		$ 54.10
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		$ 3,933.84
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 16,364.93
****Base Wages**	$ 41,138.24
TOTAL Investment In You	$ 57,503.17

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 # 8770

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ERIKA DEMONSANT

edemonsant@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	$ 7,929.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,802.30
****Base Wages**	$ 103,650.56
TOTAL Investment In You	$ 142,452.86

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 # 8772

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GLENFORD LOCHIN

glochin@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	$ 0.00
Dental	
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 69.22
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	$ 3,502.07
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 12,708.28
****Base Wages**	$ 36,622.98
TOTAL Investment In You	$ 49,331.26
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 # 8773

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MENSAH EDWARDS

menedwards@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	$ 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)	$ 4,292.72
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,813.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,848.33
****Base Wages**	$ 75,991.14
TOTAL Investment In You	$ 102,839.47

TOTAL Paid Time Off Days: **46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8776

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JACQUES MAGILL

jmagill@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	$ 6,960.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,856.26
****Base Wages**	$ 90,990.22
TOTAL Investment In You	$ 138,846.49

TOTAL Paid Time Off Days: 46 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8777

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHUNG LIU

cliu@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	$ 7,643.89
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,054.52
****Base Wages**	$ 99,920.08
TOTAL Investment In You	$ 127,974.60

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 # 8779

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARY HO

mho@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	$ 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	$ 8,536.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,646.88
****Base Wages**	$ 111,593.87
TOTAL Investment In You	$ 143,240.75

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 # 8780

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALLAN BERRY

aberry@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	$ 52.50
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,819.79
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,169.51
****Base Wages**	$ 49,931.86
TOTAL Investment In You	$ 74,101.37
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 # 8786

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHARELLE OLIVER

soliver@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	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.18
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,404.07
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,165.61
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 81,574.72

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 # 8787

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JONATHAN COVER

jcover@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: 40 Days

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8791

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

REBECCA TSENG

rtseng@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		$ 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		$ 10,224.10
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 22,714.49
****Base Wages**	$ 198,420.77
TOTAL Investment In You	$ 221,135.26

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 # 8792

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HOMA HOMAYOUN

hhomayoun@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	$ 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	$ 29,593.19
****Base Wages**	$ 126,590.67
TOTAL Investment In You	$ 156,183.87

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 # 8795

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIA MORENO

mleach@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	$ 107.18
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	$ 4,468.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,340.16
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 103,749.27

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 # 8801 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SATSUKI UESUGI suesugi@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	$ 95.78
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	$ 4,350.29
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,336.26
****Base Wages**	$ 56,866.58
TOTAL Investment In You	$ 78,202.84
TOTAL Paid Time Off Days:	**41 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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