ALAMEDA HEALTH SYSTEM

2016

Employee ID # 107 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DONALD FORBES dforbes@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,386.30
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,746.36
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,414.39
****Base Wages**	$ 62,043.90
TOTAL Investment In You	$ 94,458.29
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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

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

Dear Colleague,

It is our pleasure to present you with your Alameda Health System 2016 personalized benefit statement. The total compensation package available to you demonstrates our commitment to our employees and their families. This statement will help you better understand the value of your total compensation package. The income from your paycheck is only one part of your compensation. Your total compensation also includes the pay and benefits we provide in order to enhance your employment experience and enable you to plan for and secure your future.

AHS leaders value the contributions of each of our team members. Over the past several years, we have continued to enhance our salary and benefits package. Your diverse benefits and compensation package includes offerings designed to provide coverage for your present and future health and financial needs. This year's enhancements to the AHS benefits package include a new Whole Life Insurance plan and Long Term Care, as well as a growing number of wellness offerings from our Healthy Me Wellness Program to guide you down the trail towards personal health and future financial stability for you and your family.

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Should you have any questions after reviewing your personalized statement, please contact the Benefits Department at 510-346-7557. We will assist in answering your questions or direct your call to the appropriate department.

I am proud to have served you over the past 9+ years and thank you for your continued commitment and care for your colleagues, our patients, and the communities that we serve.

Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 116

2016

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RHODORA POSA

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	$ 9,099.89
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,510.52
****Base Wages**	$ 72,533.26
TOTAL Investment In You	$ 102,043.78
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 # 125

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BETH SCHWEITZER

bschweitzer@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	$ 10,517.78
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 10,650.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,654.51
****Base Wages**	$ 227,831.97
TOTAL Investment In You	$ 259,486.48
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 136

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NANCY DUMAN

nduman@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		$ 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		$ 9,617.22
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 22,527.49
****Base Wages**		$ 109,596.91
TOTAL Investment In You		$ 132,124.40
TOTAL Paid Time Off Days:		**56 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 148

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KATHRYN HALL

kihall@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)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 3.07
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	$ 9,775.68
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,275.99
****Base Wages**	$ 100,497.20
TOTAL Investment In You	$ 130,773.18
TOTAL Paid Time Off Days:	**9 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 151

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KATHERINE MCKEE

kmckee@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)	$ 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	$ 9,906.06
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,611.41
****Base Wages**	$ 123,541.02
TOTAL Investment In You	$ 165,152.43
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 # 163 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

OMAR WAMUKOTA owamukota@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	$ 19,097.26
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	$ 9,511.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,720.42
****Base Wages**	$ 89,573.58
TOTAL Investment In You	$ 129,294.00
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 169

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHARON WOODARD

swoodard@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	$ 4,437.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,729.79
****Base Wages**	$ 58,003.71
TOTAL Investment In You	$ 79,733.50
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 176

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LUCY SANABRIA

lsanabria@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		$ 9,407.39
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 22,876.14
****Base Wages**		$ 113,676.66
TOTAL Investment In You		$ 136,552.80
TOTAL Paid Time Off Days:		**50 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 193

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VILMA CARDENAS

vcardenas@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	$ 108.16
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	$ 4,509.05
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,815.93
****Base Wages**	$ 58,941.79
TOTAL Investment In You	$ 95,757.72
TOTAL Paid Time Off Days:	**56 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 # 203 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROBERTO POMBO rpombo@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	$ 9,511.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,793.42
****Base Wages**	$ 149,289.30
TOTAL Investment In You	$ 184,082.72
TOTAL Paid Time Off Days:	**55 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

Employee ID # 206

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AUDREY FRASER

afraser@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	$ 20,494.76
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	$ 9,458.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,065.13
****Base Wages**	$ 131,083.24
TOTAL Investment In You	$ 172,148.37
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 212

2016

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALICIA FORBES

aforbes@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 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	$ 22,832.44
****Base Wages**	$ 72,326.38
TOTAL Investment In You	$ 95,158.82
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 225

2016

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

M. NEAL

sneal@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	$ 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)	$ 4,034.14
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,819.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,729.20
****Base Wages**	$ 76,074.34
TOTAL Investment In You	$ 103,803.53
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 231

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSALIND BALOLONG

rbalolong@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 6,127.34
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 9,657.01
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 29,913.24
****Base Wages**		$ 159,310.94
TOTAL Investment In You		$ 189,224.18

TOTAL Paid Time Off Days: 16 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 232

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GRACE DEL VALLE

gdelvalle@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	$ 26.07
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	$ 9,458.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,012.72
****Base Wages**	$ 87,388.83
TOTAL Investment In You	$ 113,401.55
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 # 242

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STEVEN THOMAS

sthomas@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 21,050.31
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,892.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 71,838.66
****Base Wages**	$ 175,574.88
TOTAL Investment In You	$ 247,413.54
TOTAL Paid Time Off Days:	**59 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 243

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DONNA TATUM

dotatum@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)	$ 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)	$ 3,983.82
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,876.20
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,359.49
****Base Wages**	$ 63,741.18
TOTAL Investment In You	$ 90,100.67
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 249

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAURIE NASH

lnash@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	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 6,871.39
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,649.68
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,653.24
****Base Wages**	$ 158,805.50
TOTAL Investment In You	$ 195,458.74
TOTAL Paid Time Off Days:	**54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 256

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KAREN ROSS

kross@alamedahealthsystem.org

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

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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)	$ 6,129.73
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,657.91
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,087.11
****Base Wages**	$ 159,372.93
TOTAL Investment In You	$ 192,460.04
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 261

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DANIEL SARAGO

dsarago@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		$ 642.46
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		$ 20,555.62
****Base Wages**		$ 60,124.27
TOTAL Investment In You		$ 80,679.89
TOTAL Paid Time Off Days:		**41 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 265

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANN WILCOX

awilcox@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,971.61
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,382.24
****Base Wages**	$ 104,204.05
TOTAL Investment In You	$ 132,586.29
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 269

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GABRIELA GHEREBEN

gghereben@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:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 270

2016

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIA GARCIA

margarcia@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 101.76
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,599.75
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	$ 46,708.74
****Base Wages**	$ 55,458.00
TOTAL Investment In You	$ 102,166.74
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 285

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FLORDELIZA SARINO

fsarino@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)	$ 6,032.58
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,725.75
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 204,572.73
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 288

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIAN ESPIRITU

mespiritu@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		$ 1,218.36
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		$ 9,392.15
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 22,878.32
****Base Wages**		$ 141,044.80
TOTAL Investment In You		$ 163,923.12
TOTAL Paid Time Off Days:		**59 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 293

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRENDA HARRISON

bharrison@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,031.91
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 186,878.89
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 297

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LEAH MARIE AQUINO-OLIVEROS

laquino@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	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,693.17
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 198,540.15
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 301

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRUCE FITZGERALD

bfitzgerald@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	$ 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	$ 10,732.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,160.15
****Base Wages**	$ 233,454.83
TOTAL Investment In You	$ 264,614.98
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 302

2016

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANITA KESWANI

akeswani@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 10,650.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 51,546.07
****Base Wages**	$ 227,831.97
TOTAL Investment In You	$ 279,378.04
TOTAL Paid Time Off Days:	**55 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

Employee ID # 335

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARVAS MCCLADDIE

mmccladdie@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	$ 102.00
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,124.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,252.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,242.96
****Base Wages**	$ 55,585.30
TOTAL Investment In You	$ 104,828.26
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 337

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSLYN HEAD-LYONS

rheadlyons@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,589.04
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,484.55
****Base Wages**	$ 112,275.07
TOTAL Investment In You	$ 161,759.63
TOTAL Paid Time Off Days:	**59 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 338

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ESTELLE HART

ehart@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 98.76
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	$ 4,117.41
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,217.52
****Base Wages**	$ 43,057.83
TOTAL Investment In You	$ 67,275.35
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 341

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSE FRIGO

rfrigo@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)	$ 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)	$ 24,380.28
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 10,848.47
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 67,500.64
****Base Wages**	$ 241,480.93
TOTAL Investment In You	$ 308,981.57
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 343

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PATRICIA BRYAN

pbryan@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,920.75
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 183,767.73
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 345

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STEVEN SWIFT

steswift@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	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,693.17
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 198,540.15
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 346 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GEORGE KALKO gkalko@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,401.85
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,701.32
****Base Wages**	$ 70,612.46
TOTAL Investment In You	$ 93,313.79
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 350 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL WRIGHT mfwright@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,583.46
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 109.94
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,084.57
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,557.42
****Base Wages**	$ 59,916.06
TOTAL Investment In You	$ 85,473.48
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 355

2016

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MONA MOJADIDI

mmojadidi@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	$ 107.18
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,931.38
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	$ 28,804.08
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 87,213.19
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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

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

Dear Colleague,

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 356

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DANA KELLY

dkelly@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	$ 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	$ 9,751.94
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,755.53
****Base Wages**	$ 165,858.16
TOTAL Investment In You	$ 192,613.69
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 358

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GLADYS WILLIAMS

gwilliams@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)	$ 200.00
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)	$ 510.00
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	$ 22,125.39
****Base Wages**	$ 53,990.14
TOTAL Investment In You	$ 76,115.53
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 363

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAVID CONNERS

dconners@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	$ 94.96
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	$ 21,240.15
****Base Wages**	$ 51,753.10
TOTAL Investment In You	$ 72,993.25
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 364

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELAINE DAVIDSON

eberry@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	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,357.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,466.24
****Base Wages**	$ 138,629.92
TOTAL Investment In You	$ 179,096.16
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 # 370 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MELVIN JOHNSON meljohnson@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	$ 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	$ 4,746.36
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,452.19
****Base Wages**	$ 62,043.90
TOTAL Investment In You	$ 91,496.09
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 371

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JAMES WILKIN

jwilkin@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	$ 1,218.36
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	$ 18,131.52
****Base Wages**	$ 60,124.27
TOTAL Investment In You	$ 78,255.79
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 382 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MANJANG SANYANG msanyang@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	$ 111.62
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,725.82
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,746.36
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,473.98
****Base Wages**	$ 62,043.90
TOTAL Investment In You	$ 88,517.89
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 384

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GINA CAMPBELL

gcampbell@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	$ 93.45
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,896.18
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,188.37
****Base Wages**	$ 50,930.46
TOTAL Investment In You	$ 87,118.83
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 387

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CYNTHIA SENIOR

csenior@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:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 392

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RENITA TUANQUIN-REYES

rreyes@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)	$ 5,601.85
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	$ 47,132.64
****Base Wages**	$ 145,648.05
TOTAL Investment In You	$ 192,780.68
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 414

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TAI NGUYEN

tainguyen@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	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 95.32
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,996.08
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,974.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,233.84
****Base Wages**	$ 51,949.04
TOTAL Investment In You	$ 85,182.88
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 420

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NOEMILYN ZAMORA

nzamora@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)	$ 2,714.66
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,617.67
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 194,464.65
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 424

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNICE SCHUSTER

jschuster@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	$ 9,252.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,323.89
****Base Wages**	$ 131,379.46
TOTAL Investment In You	$ 172,703.35
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 426

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BARBARA JONES

bajones@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 6,011.77
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 7,971.61
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 28,094.85
****Base Wages**		$ 104,204.05
TOTAL Investment In You		$ 132,298.90
TOTAL Paid Time Off Days:		**51 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 429

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YEN TRINH

YTrinh@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	$ 20,960.42
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)	$ 2,934.60
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,836.94
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,043.43
****Base Wages**	$ 76,299.81
TOTAL Investment In You	$ 117,343.23
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 432

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LEONOR WANG

lwang@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,903.01
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 191,749.99
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 433

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JAMES TAYLOR

jataylor@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	$ 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)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,937.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,380.05
****Base Wages**	$ 64,535.95
TOTAL Investment In You	$ 86,916.00
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 # 435

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WANDA WASHINGTON

wwashington@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,055.54
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,466.17
****Base Wages**	$ 66,085.55
TOTAL Investment In You	$ 91,551.73
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 # 439

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DONNA MYERS-CAMARA

dmyers@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	$ 9,564.74
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,070.09
****Base Wages**	$ 152,947.81
TOTAL Investment In You	$ 194,017.90
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 440

2016

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANDREW SPANIER

aspanier@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 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)	$ 14,123.13
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 10,493.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,044.43
****Base Wages**	$ 130,189.61
TOTAL Investment In You	$ 175,234.04
TOTAL Paid Time Off Days:	**50 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

Employee ID # 442

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NANCY PETERSEN

npetersen@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,735.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,145.90
****Base Wages**	$ 164,708.34
TOTAL Investment In You	$ 194,854.24
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 444 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LEONY ALFONSO lalfonso@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 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)	$ 12,919.27
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,511.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,912.69
****Base Wages**	$ 149,289.30
TOTAL Investment In You	$ 197,201.99
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 446

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WENDELL CLARK

wclark@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	$ 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	$ 37,010.06
****Base Wages**	$ 61,419.90
TOTAL Investment In You	$ 98,429.96
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 457

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GISELE WALKER

gwalker@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	$ 105.67
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,405.36
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,808.26
****Base Wages**	$ 57,586.46
TOTAL Investment In You	$ 82,394.73
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 # 481 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAQUINTA SLEDGE lsledge@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,220.10
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,853.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,385.79
****Base Wages**	$ 63,445.20
TOTAL Investment In You	$ 101,830.99
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 493

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JANETTA BARBER

jbarber@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 200.00
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	$ 45,133.30
****Base Wages**	$ 61,419.90
TOTAL Investment In You	$ 106,553.20
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 504

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CAITLIN MCCARTHY

cmccarthy@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	$ 9,564.74
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,846.47
****Base Wages**	$ 152,947.81
TOTAL Investment In You	$ 187,794.28
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 508 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LORI FITCH lfitch@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	$ 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)	$ 2,277.39
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,059.45
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,323.37
****Base Wages**	$ 118,424.18
TOTAL Investment In You	$ 150,747.55
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 512

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ZELALEM TADESSE

ztadesse@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,451.58
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,876.20
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,609.51
****Base Wages**	$ 63,741.18
TOTAL Investment In You	$ 96,350.69
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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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 513

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RANDALL SIMPSON

rsimpson@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 9,803.23
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	$ 60,140.22
****Base Wages**	$ 145,648.05
TOTAL Investment In You	$ 205,788.26
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 521 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CORAZON GONZALES ccgonzales@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	$ 14,154.66
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	$ 9,564.74
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,188.15
****Base Wages**	$ 122,358.25
TOTAL Investment In You	$ 156,546.40
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 532

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FATIMA LOMIBAO

flomibao@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	$ 7,077.46
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	$ 9,511.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,482.00
****Base Wages**	$ 119,431.44
TOTAL Investment In You	$ 145,913.44
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 539

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOHN TAYLOR

johntaylor@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,458.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,869.53
****Base Wages**	$ 116,518.44
TOTAL Investment In You	$ 146,387.97
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 541 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AILEEN ARAGON aaragon@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 12,803.68
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	$ 53,767.93
****Base Wages**	$ 145,648.05
TOTAL Investment In You	$ 199,415.97
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 542

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FELIAN DYQUIANGCO

fdyquiangco@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	$ 9,511.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,583.58
****Base Wages**	$ 149,289.30
TOTAL Investment In You	$ 190,872.88
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 545

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRENDA CHAN

brchu@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,695.81
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,415.04
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,988.94
****Base Wages**	$ 70,784.90
TOTAL Investment In You	$ 119,773.84
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 555

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LETICIA DELOSSANTOS

ldelossantos@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 7,705.79
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	$ 42,534.00
****Base Wages**	$ 150,487.17
TOTAL Investment In You	$ 193,021.17
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 558

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VICTORIA AVILA

vavila@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	$ 13,496.34
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,511.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,476.78
****Base Wages**	$ 89,573.58
TOTAL Investment In You	$ 123,050.36
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 561

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SONDRA BAILEY

sbailey@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)	$ 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)	$ 4,524.43
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,417.60
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 203,264.58
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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

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Dear Colleague,

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ALAMEDA HEALTH SYSTEM

Employee ID # 568

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JAMES JACKSON

jojackson@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	$ 95.32
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	$ 3,974.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,255.50
****Base Wages**	$ 51,949.04
TOTAL Investment In You	$ 73,204.54
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 569

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SAROJ GROVER

sgrover@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)	$ 18,089.04
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,620.19
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 52,990.96
****Base Wages**	$ 156,771.68
TOTAL Investment In You	$ 209,762.64
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 572

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAURICE FRIED

mfried@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)	$ 4,244.28
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,695.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 53,834.92
****Base Wages**	$ 113,661.81
TOTAL Investment In You	$ 167,496.73
TOTAL Paid Time Off Days:	**54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 581 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TIMOTHY JONES tjones@alamedahealthsystem.org

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

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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)	$ 5,331.92
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	$ 46,760.94
****Base Wages**	$ 138,629.92
TOTAL Investment In You	$ 185,390.86
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 583

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WANDA SANFORD

wsanford@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	$ 108.16
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	$ 4,509.05
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,803.27
****Base Wages**	$ 58,941.79
TOTAL Investment In You	$ 80,745.06
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 # 591 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOHNNY JOHNSON johjohnson@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	$ 13,664.30
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,643.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,776.65
****Base Wages**	$ 73,772.61
TOTAL Investment In You	$ 103,549.26
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 592

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANN TUTTIE

atuttie@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	$ 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	$ 9,957.37
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,239.10
****Base Wages**	$ 180,025.25
TOTAL Investment In You	$ 215,264.34
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 600

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TONYA SILVER

tsilver@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	$ 9,458.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,869.53
****Base Wages**	$ 145,648.05
TOTAL Investment In You	$ 175,517.57
TOTAL Paid Time Off Days:	**45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 605

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CARLA GILBERT

cgilbert@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,329.20
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,834.55
****Base Wages**	$ 108,878.43
TOTAL Investment In You	$ 148,712.98
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Dear Colleague,

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 613

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RYANGNEO YOO

ryoo@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 59.96
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	$ 4,999.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,451.15
****Base Wages**	$ 39,209.79
TOTAL Investment In You	$ 75,660.94
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 615

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOHANNA FOX

jfox@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	$ 8,707.65
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,118.28
****Base Wages**	$ 113,825.50
TOTAL Investment In You	$ 142,943.79
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 637

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KAREN YOUNG

kyoung@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,735.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,017.00
****Base Wages**	$ 164,708.34
TOTAL Investment In You	$ 199,725.34
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 639

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELVIE SAN JUAN

esanjuan@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	$ 106.03
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,420.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,694.99
****Base Wages**	$ 57,785.94
TOTAL Investment In You	$ 87,480.92
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 648

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PATRICIA SCOTT-MEYER

pmeyer@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,154.66
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	$ 9,751.94
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,375.35
****Base Wages**	$ 132,686.53
TOTAL Investment In You	$ 167,061.88
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 657 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RUBY SLOAN rsloan@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,746.36
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,045.83
****Base Wages**	$ 62,043.90
TOTAL Investment In You	$ 84,089.73
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 658

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KAY RAHAL

krahal@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 1,794.32
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 7,353.52
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 23,276.73
****Base Wages**		$ 96,124.50
TOTAL Investment In You		$ 119,401.23
TOTAL Paid Time Off Days:		**51 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 661

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CLINTON TATUM

ctatum@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	$ 95.32
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	$ 3,974.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,366.66
****Base Wages**	$ 51,949.04
TOTAL Investment In You	$ 76,315.70
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 670

2016

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROBBIE ROQUEMORE

rroquemore@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 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)	$ 5,851.87
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,819.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,376.91
****Base Wages**	$ 76,074.34
TOTAL Investment In You	$ 119,451.24
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 677

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DARRELL HARRIS

dharris@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	$ 108.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,522.68
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,817.24
****Base Wages**	$ 59,120.05
TOTAL Investment In You	$ 80,937.28
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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

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

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 679

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TIMOTHY HOLIFIELD

tiholifield@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	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 95.32
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,998.04
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,974.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,253.54
****Base Wages**	$ 51,949.04
TOTAL Investment In You	$ 75,202.58
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 # 682

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AMY JOHNSON

amyjohnson@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		$ 1,218.36
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 104.17
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 4,825.46
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 18,284.98
****Base Wages**		$ 63,077.87
TOTAL Investment In You		$ 81,362.85
TOTAL Paid Time Off Days:		**51 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 690

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GEORGIA HENRY

ghenry@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,620.19
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,495.56
****Base Wages**	$ 156,771.68
TOTAL Investment In You	$ 184,267.24
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 695

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TINA MC GHEE

tmcghee@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 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	$ 35,967.42
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 94,376.53
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 704

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WILLIE SIMS

wsims@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	$ 98.19
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,544.36
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,548.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,080.96
****Base Wages**	$ 59,453.89
TOTAL Investment In You	$ 84,534.85
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 # 705 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AKACHUKWU MBANUGO ambanugo@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/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	$ 37,845.10
****Base Wages**	$ 72,326.38
TOTAL Investment In You	$ 110,171.48
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 710

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JO ANN TATUM

jtatum@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)	$ 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)	$ 5,001.21
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,973.71
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,585.55
****Base Wages**	$ 65,015.81
TOTAL Investment In You	$ 95,601.36
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 716

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARK BROWN

mkbrown@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	$ 21,036.60
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)	$ 7,178.23
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	$ 44,496.90
****Base Wages**	$ 75,991.14
TOTAL Investment In You	$ 120,488.04
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 720

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DELORES HOOPER

dhooper@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	$ 103.55
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	$ 4,796.67
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,086.29
****Base Wages**	$ 62,701.60
TOTAL Investment In You	$ 84,787.89
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 724

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DEBORAH THOMAS-FOUSSENI

dethomas@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	$ 102.83
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,310.83
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	$ 33,869.11
****Base Wages**	$ 56,040.82
TOTAL Investment In You	$ 89,909.93
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 # 725 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GARY GABRIEL

ggabriel@alamedahealthsystem.org

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

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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)	$ 5,996.64
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	$ 43,841.74
****Base Wages**	$ 72,326.38
TOTAL Investment In You	$ 116,168.12
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 733

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TASHA THIBODEAUX

tthibodeaux@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,258.59
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,937.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,495.06
****Base Wages**	$ 64,535.95
TOTAL Investment In You	$ 91,031.01
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 # 735 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARY BIRDEN mbirden@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,401.85
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,701.32
****Base Wages**	$ 70,612.46
TOTAL Investment In You	$ 93,313.79
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 737

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MATTHEW THOMAS

mathomas@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)	$ 200.00
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)	$ 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	$ 44,954.33
****Base Wages**	$ 50,930.46
TOTAL Investment In You	$ 95,884.79
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 746 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TROY NIXON tnixon@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,304.06
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,985.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,361.11
****Base Wages**	$ 117,453.02
TOTAL Investment In You	$ 162,814.13
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 752 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARY WILLIAMS mywilliams@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	$ 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)	$ 4,096.17
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,539.87
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,657.05
****Base Wages**	$ 72,416.66
TOTAL Investment In You	$ 99,073.71
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 # 755 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BARBARA WILSON bjwilson@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	$ 7,242.04
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 3.15
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,836.40
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,565.16
****Base Wages**	$ 154,514.51
TOTAL Investment In You	$ 181,079.67
TOTAL Paid Time Off Days:	**6 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 758

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHELLE EVANS

micevans@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	$ 4,437.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,742.45
****Base Wages**	$ 58,003.71
TOTAL Investment In You	$ 94,746.16
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 764

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JERRYANN DUNMORE

jdunmore@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	$ 106.03
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,889.44
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	$ 28,713.33
****Base Wages**	$ 57,785.94
TOTAL Investment In You	$ 86,499.26
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

Employee ID # 767

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KARLYN ALEXANDER

karalexander@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 101.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,137.54
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,702.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,310.01
****Base Wages**	$ 61,472.11
TOTAL Investment In You	$ 95,782.12
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 769 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EDDIE JOHNSON edjohnson@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	$ 111.62
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,094.16
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	$ 49,623.77
****Base Wages**	$ 60,827.52
TOTAL Investment In You	$ 110,451.29
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 774

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JACQUELINE WILLIAMS

jawilliams@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 98.19
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,548.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,408.38
****Base Wages**	$ 59,453.89
TOTAL Investment In You	$ 81,862.27
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 785

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FAIZA NAWA

fnawa@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 5,083.50
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,055.54
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 51,017.13
****Base Wages**	$ 66,085.55
TOTAL Investment In You	$ 117,102.69
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 # 807 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOSEPH JOINER jjoiner@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 93.45
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 587.66
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	$ 29,745.63
****Base Wages**	$ 50,930.46
TOTAL Investment In You	$ 80,676.09
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 817

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LINDA RICHARD

lrichard@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	$ 98.19
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,548.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,832.48
****Base Wages**	$ 59,453.89
TOTAL Investment In You	$ 81,286.37
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 824

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SITHY KHUN

skhun@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 6,911.99
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,999.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,416.59
****Base Wages**	$ 65,349.65
TOTAL Investment In You	$ 108,766.24
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 # 826

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RHONDA JOHNSON

rjohnson@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 101.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,411.60
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,796.67
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,311.14
****Base Wages**	$ 62,701.60
TOTAL Investment In You	$ 90,012.74
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 829

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YEN LUU

yluu@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	$ 9,312.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,594.31
****Base Wages**	$ 135,557.55
TOTAL Investment In You	$ 170,151.87
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 830

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WEI TANG

wtang@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)	$ 11,487.14
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,370.83
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 52,947.28
****Base Wages**	$ 139,574.66
TOTAL Investment In You	$ 192,521.94
TOTAL Paid Time Off Days:	**59 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 831

2016

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FARRELL BARNETT

fbarnett@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	$ 21,036.60
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	$ 10,650.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,597.43
****Base Wages**	$ 227,831.97
TOTAL Investment In You	$ 269,429.40
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 839

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LUCY COLVIN

lcolvin@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	$ 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**	$ 60,124.27
TOTAL Investment In You	$ 99,292.39
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 # 848 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RUTH ALLEN rallen@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 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	$ 26,934.11
****Base Wages**	$ 156,567.01
TOTAL Investment In You	$ 183,501.12
TOTAL Paid Time Off Days:	**41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 852

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL MC CARTHY

mimccarthy@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,787.14
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,665.23
****Base Wages**	$ 88,720.74
TOTAL Investment In You	$ 136,385.96
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 853

2016

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CRAIG ENEBOE

ceneboe@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)	$ 11,203.69
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	$ 41,073.22
****Base Wages**	$ 145,648.05
TOTAL Investment In You	$ 186,721.26
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 870

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

THANH NGUYEN

thnguyen@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 111.67
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,388.90
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,819.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,488.59
****Base Wages**	$ 76,074.34
TOTAL Investment In You	$ 111,562.93
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 # 873

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BOLANLE KELANI

bkelani@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	$ 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	$ 9,490.94
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,790.09
****Base Wages**	$ 147,857.84
TOTAL Investment In You	$ 182,647.93
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 878

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

THERESA ROHR

trohr@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,065.68
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,985.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,122.73
****Base Wages**	$ 117,453.02
TOTAL Investment In You	$ 162,575.75
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 899

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SUSAN GLASSCOCK

sglasscock@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,583.46
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	$ 9,799.87
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,276.18
****Base Wages**	$ 84,581.64
TOTAL Investment In You	$ 110,857.82
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 901

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GILLIAN GONZALEZ

ggonzalez@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,903.01
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 191,749.99
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 902

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

REGINA TOLBERT

rtolbert@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	$ 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	$ 9,799.87
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,099.34
****Base Wages**	$ 169,163.28
TOTAL Investment In You	$ 196,262.62
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 919

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CASSANDRA GATHRIGHT

cgathright@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:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 927

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHERI TREGEAGLE

stregeagle@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,295.98
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,801.33
****Base Wages**	$ 69,228.43
TOTAL Investment In You	$ 106,029.76
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 936

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOYCE SAMATI

jsamati@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 7,665.84
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 21,777.31
****Base Wages**		$ 80,165.70
TOTAL Investment In You		$ 101,943.01

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

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 937

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JULIE KLIEWER

jkliewer@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
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)	$ 12,924.01
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,681.19
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,904.35
****Base Wages**	$ 160,978.90
TOTAL Investment In You	$ 208,883.25
TOTAL Paid Time Off Days:	**59 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 947

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LINDA ENEBLY

lenebly@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)	$ 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	$ 41,679.28
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 183,775.10
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 952

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LINDA WILLIAMS BEY

lbey@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	$ 109.32
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,291.44
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,557.67
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,723.13
****Base Wages**	$ 59,577.44
TOTAL Investment In You	$ 107,300.57
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 954

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EDGARDO CRUZ

ecruz@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	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,693.17
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 198,540.15
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 956

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAMELA DIZON

pdizon@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,643.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,955.73
****Base Wages**	$ 73,772.61
TOTAL Investment In You	$ 111,728.34
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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

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

Dear Colleague,

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 957

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROGELIO DE LA CRUZ

rdelacruz@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)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 98.17
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,858.20
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,092.77
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,447.87
****Base Wages**	$ 53,500.30
TOTAL Investment In You	$ 93,948.18
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 964

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAISY JOHNSON

dmjohnson@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 6,789.70
Tuition Reimbursement (fiscal yr 2016)	$ 76.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,401.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,678.23
****Base Wages**	$ 70,613.09
TOTAL Investment In You	$ 103,291.32
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 968

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DEBBIE PARISH

dparish@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	$ 9,565.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,847.54
****Base Wages**	$ 153,021.65
TOTAL Investment In You	$ 187,869.19
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 973

2016

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHARLYN ROSS

cross@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)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,927.68
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,999.57
****Base Wages**	$ 116,701.73
TOTAL Investment In You	$ 157,701.30
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 980

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STEPHANIE ROGERS

sdrogers@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 200.00
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	$ 29,080.31
****Base Wages**	$ 55,458.00
TOTAL Investment In You	$ 84,538.31
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 983

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARO ULLOA

mulloa@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	$ 7,690.06
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,339.47
****Base Wages**	$ 100,523.70
TOTAL Investment In You	$ 132,863.17
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 984

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CINDERELLA ILAS

cilas@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 199.17
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)	$ 4,461.84
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,437.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,373.06
****Base Wages**	$ 58,003.71
TOTAL Investment In You	$ 92,376.77
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 993

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROBERT BLOCK

rblock@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	$ 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	$ 10,746.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 42,251.84
****Base Wages**	$ 234,447.62
TOTAL Investment In You	$ 276,699.46
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1000

2016

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JACKIE BOLDS

jbolds@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	$ 10,517.78
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 10,650.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,654.51
****Base Wages**	$ 227,831.97
TOTAL Investment In You	$ 259,486.48
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 1003

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELEANOR TAYLOR

etaylor@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	$ 4,437.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,729.79
****Base Wages**	$ 58,003.71
TOTAL Investment In You	$ 79,733.50
TOTAL Paid Time Off Days:	**56 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 # 1009

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WANDA MORGAN

wmorgan@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,199.48
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,771.55
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,381.66
****Base Wages**	$ 62,373.17
TOTAL Investment In You	$ 88,754.83
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1017

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RHONDA CONLEY

rconley@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:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1020

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CARLITO BARTOLOME

cbartolome@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	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,693.17
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 198,540.15
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1024

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LERMA AUDENCIAL

laudencial@alamedahealthsystem.org

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

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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	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,693.17
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 198,540.15
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1031

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BETTY WYSINGER

bwysinger@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,200.66
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 95.79
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,437.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,769.02
****Base Wages**	$ 58,003.71
TOTAL Investment In You	$ 93,772.74
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 # 1033 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LOLA FIELDS lfields@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	$ 111.62
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,679.04
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	$ 26,630.03
****Base Wages**	$ 60,827.52
TOTAL Investment In You	$ 87,457.55
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1034 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TRINNEA RUFUS trufus@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	$ 17,887.48
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	$ 9,617.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,653.39
****Base Wages**	$ 156,567.01
TOTAL Investment In You	$ 194,220.40
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1040

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSA POBLETE

rpoblete@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	$ 108.61
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,527.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,822.48
****Base Wages**	$ 59,187.02
TOTAL Investment In You	$ 81,009.51
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 # 1047

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GENA BURNS

gburns@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 96.86
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	$ 4,038.31
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,303.50
****Base Wages**	$ 52,788.32
TOTAL Investment In You	$ 82,091.82
TOTAL Paid Time Off Days:	**56 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 # 1060

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIA VONNEGUT-SANCHEZ

mvonnegutsanchez@alamedahealthsyste

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	$ 21,200.66
Dental	$ 1,861.08
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)	$ 3,889.42
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	$ 40,614.81
****Base Wages**	$ 57,785.94
TOTAL Investment In You	$ 98,400.74
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1061

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JANIS FARNHOLTZ

jprovinse@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	$ 19,563.18
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	$ 9,612.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,287.27
****Base Wages**	$ 109,374.87
TOTAL Investment In You	$ 149,662.14
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1062

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALFREDO CONTRERAS

acontreras@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	$ 108.16
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	$ 4,509.05
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,815.93
****Base Wages**	$ 58,941.79
TOTAL Investment In You	$ 95,757.72
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 # 1064

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANTHONY JONES

antjones@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	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 95.32
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,998.04
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,974.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,957.66
****Base Wages**	$ 51,949.04
TOTAL Investment In You	$ 74,906.70
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1066

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JILL EBERT

jebert@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,458.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,573.65
****Base Wages**	$ 72,824.02
TOTAL Investment In You	$ 102,397.67
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 # 1067

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CATALINA GOVEA

cgovea@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	$ 6,688.24
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	$ 9,458.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,039.99
****Base Wages**	$ 116,518.44
TOTAL Investment In You	$ 142,558.43
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1071

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARITZA BROWN

MCBROWN@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,960.42
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 7,683.32
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,688.52
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,461.15
****Base Wages**	$ 100,503.52
TOTAL Investment In You	$ 147,964.67
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1075

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSA RODRIGUEZ

rrodriguez@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,755.59
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,648.38
****Base Wages**	$ 101,380.24
TOTAL Investment In You	$ 127,028.62
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1079

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOAN DENZLER

jdenzler@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	$ 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)	$ 5,415.68
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,388.71
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,327.16
****Base Wages**	$ 140,807.68
TOTAL Investment In You	$ 187,134.84
TOTAL Paid Time Off Days:	**59 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 # 1080

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANTHONY BOOTH

abooth@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	$ 96.25
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,530.38
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,012.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,403.84
****Base Wages**	$ 52,451.36
TOTAL Investment In You	$ 100,855.20
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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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1083

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TYROME EARBY

tearby@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 98.17
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,057.70
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,092.77
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,416.97
****Base Wages**	$ 53,500.30
TOTAL Investment In You	$ 84,917.28
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 # 1086

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WAYNE WILLIAMS

wwilliams@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)	$ 7,515.15
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,160.26
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,957.14
****Base Wages**	$ 125,052.10
TOTAL Investment In You	$ 167,009.23
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 # 1088

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DARLENE FONTES

dfontes@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	$ 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	$ 4,853.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,135.29
****Base Wages**	$ 63,445.20
TOTAL Investment In You	$ 93,580.49
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1090

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STACY BABBITT

sbabbitt@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 80.23
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	$ 4,459.05
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,931.23
****Base Wages**	$ 58,288.26
TOTAL Investment In You	$ 94,219.49
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 # 1094

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALLISON KENT

akent@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,750.46
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,822.35
****Base Wages**	$ 101,313.26
TOTAL Investment In You	$ 141,135.62
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 # 1098

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JESSICA CLOSE

jclose@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	$ 6,748.30
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 63.86
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	$ 4,437.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,028.89
****Base Wages**	$ 34,802.23
TOTAL Investment In You	$ 55,831.12
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1127

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GEORGE KIFLE

gkifle@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)	$ 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	$ 5,819.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,897.78
****Base Wages**	$ 76,074.34
TOTAL Investment In You	$ 122,972.11
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 # 1129

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DORI SALMON

dsalmon@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)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,059.45
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,131.34
****Base Wages**	$ 118,424.18
TOTAL Investment In You	$ 159,555.52
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1130

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELSIE ISIBOR

eisibor@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	$ 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)	$ 7,626.05
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,268.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,983.58
****Base Wages**	$ 95,009.41
TOTAL Investment In You	$ 141,992.99
TOTAL Paid Time Off Days:	**59 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 # 1136

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SAMUEL ROBERSON

SRoberson@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,643.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,925.33
****Base Wages**	$ 73,772.61
TOTAL Investment In You	$ 104,697.94
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 # 1139

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELIZABETH HARRIS

eharris@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	$ 9,458.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,740.63
****Base Wages**	$ 145,648.05
TOTAL Investment In You	$ 180,388.67
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1140

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARCELO SAN DIEGO

msandiego@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	$ 20,960.42
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)	$ 4,388.90
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,819.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 42,480.48
****Base Wages**	$ 76,074.34
TOTAL Investment In You	$ 118,554.81
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1144

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CARLOS RAIZ-ENCISO

cenciso@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)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,055.54
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,367.67
****Base Wages**	$ 66,085.55
TOTAL Investment In You	$ 103,453.23
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 # 1152

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SONNY FONG

SFong@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	$ 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)	$ 3,157.81
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,395.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 51,448.42
****Base Wages**	$ 96,668.00
TOTAL Investment In You	$ 148,116.42
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1154

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LYNNETTE TOLLIVER

ltolliver@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	$ 103.76
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	$ 4,325.74
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,597.83
****Base Wages**	$ 56,545.63
TOTAL Investment In You	$ 86,143.46
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 # 1155

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAVID ROBINSON

drobinson@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	$ 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	$ 8,429.95
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,519.26
****Base Wages**	$ 110,195.49
TOTAL Investment In You	$ 150,714.75
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1157

2016

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EMILIA ESTRADA

eestrada@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,491.86
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,956.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,953.51
****Base Wages**	$ 64,788.26
TOTAL Investment In You	$ 103,741.77
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1159 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL WRIGHT mwright2@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,960.42
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 10,663.84
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	$ 51,130.08
****Base Wages**	$ 138,629.92
TOTAL Investment In You	$ 189,760.00
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

EASTMONT WELLNESS

Employee ID # 1163

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SOCORRO SEVILLANO

ssevillano@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)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 110.73
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,616.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,113.39
****Base Wages**	$ 60,347.46
TOTAL Investment In You	$ 82,460.84
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1164

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

REBECCA HUNTER

rhunter@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	$ 9,400.08
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,699.55
****Base Wages**	$ 141,592.05
TOTAL Investment In You	$ 168,291.60
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 # 1166

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KIRTESE RIVERS

krivers@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	$ 7,242.04
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	$ 5,153.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,488.02
****Base Wages**	$ 60,625.09
TOTAL Investment In You	$ 83,113.12
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1168

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MERIAM BAGUS

mbagus@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)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,792.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,670.69
****Base Wages**	$ 62,648.35
TOTAL Investment In You	$ 108,319.04
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1170

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ILONA CLARK

iclark@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	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 199.99
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 9,565.81
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 22,256.19
****Base Wages**		$ 153,021.65
TOTAL Investment In You		$ 175,277.84
TOTAL Paid Time Off Days:		**50 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1175

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CRESENCIA REYES

creyes@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 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)	$ 5,510.13
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,490.94
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,300.22
****Base Wages**	$ 147,857.84
TOTAL Investment In You	$ 188,158.06
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 # 1183

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HIRUT TSEGAYE

htsegaye@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)	$ 2,714.66
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,407.83
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 201,254.81
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1193

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STEVEN PETERS

speters@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	$ 9,564.74
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,070.09
****Base Wages**	$ 152,947.81
TOTAL Investment In You	$ 194,017.90
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1194

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALICIA GALLEGOS

agallegos@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 105.67
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,876.01
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	$ 39,778.99
****Base Wages**	$ 57,586.46
TOTAL Investment In You	$ 97,365.46
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1195 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BETTY CRUMBY bcrumby@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,811.54
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,128.43
****Base Wages**	$ 75,967.84
TOTAL Investment In You	$ 99,096.27
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1196

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LISA HUMPHREY

lhumphrey@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 966.65
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,806.65
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,888.05
****Base Wages**	$ 62,832.02
TOTAL Investment In You	$ 88,720.07
TOTAL Paid Time Off Days:	**56 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 # 1200

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DENISE MAPES

dmapes@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	$ 19,097.26
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	$ 9,511.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,720.42
****Base Wages**	$ 89,573.58
TOTAL Investment In You	$ 129,294.00
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1203

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LUZ OZUNA

lozuna@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	$ 99.20
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	$ 4,135.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,403.10
****Base Wages**	$ 54,059.82
TOTAL Investment In You	$ 83,462.93
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 # 1206

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RINDA PINATA

rpinata@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,735.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,145.90
****Base Wages**	$ 164,708.34
TOTAL Investment In You	$ 194,854.24
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1208

2016

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DIANE MORGAN

dimorgan@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,643.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,943.07
****Base Wages**	$ 73,772.61
TOTAL Investment In You	$ 96,715.68
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 # 1210 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TERESA DAUGHERTY tdaugherty@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 11,157.23
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,381.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 61,434.40
****Base Wages**	$ 140,321.58
TOTAL Investment In You	$ 201,755.99
TOTAL Paid Time Off Days:	**59 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1216

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SANDRA DE LEON

SDeLeon@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,502.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,174.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,993.32
****Base Wages**	$ 93,783.46
TOTAL Investment In You	$ 121,776.78
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1224

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CITAS LILIENTHAL

CLilienthal@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	$ 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)	$ 2,837.41
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,643.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,962.74
****Base Wages**	$ 73,772.61
TOTAL Investment In You	$ 107,735.35
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 # 1225

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HTWE WONG

htwong@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	$ 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	$ 4,950.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,232.37
****Base Wages**	$ 64,714.21
TOTAL Investment In You	$ 94,946.57
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 # 1228

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LISA KOO

lkoo@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 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)		$ 5,146.96
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 5,273.35
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 23,906.48
****Base Wages**		$ 68,932.66
TOTAL Investment In You		$ 92,839.13
TOTAL Paid Time Off Days:		**56 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 # 1229

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RAFAELA GUILLEN

rguillen@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	$ 101.76
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	$ 36,543.03
****Base Wages**	$ 55,458.00
TOTAL Investment In You	$ 92,001.03
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

EASTMONT WELLNESS

Employee ID # 1234

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DARA HONG

dhong@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:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1250

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSA TOLENTINO

rtolentino@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)	$ 6,514.68
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,638.47
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,452.62
****Base Wages**	$ 112,921.12
TOTAL Investment In You	$ 145,373.74
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1251

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SANDRA OLAND

soland@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	$ 101.76
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	$ 21,530.37
****Base Wages**	$ 55,458.00
TOTAL Investment In You	$ 76,988.37
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1257

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARGARITA PENA

mpena@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	$ 1,861.08
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)	$ 3,733.51
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,950.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,808.60
****Base Wages**	$ 64,714.21
TOTAL Investment In You	$ 99,522.80
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 # 1259

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHRISTOPHER DEBOSE

cdebose@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	$ 95.32
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	$ 4,328.03
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,591.69
****Base Wages**	$ 56,575.58
TOTAL Investment In You	$ 86,167.27
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1261

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRENDA JACKSON

bjackson@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	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 97.25
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,777.40
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,054.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,115.21
****Base Wages**	$ 52,999.86
TOTAL Investment In You	$ 77,115.07
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1263

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARGARET HOBDY

mhodby@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	$ 101.76
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,133.00
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	$ 23,663.37
****Base Wages**	$ 55,458.00
TOTAL Investment In You	$ 79,121.37
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1264 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MILABU MUMBUSI mmumbusi@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	$ 111.62
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,713.70
Tuition Reimbursement (fiscal yr 2016)	$ 750.00
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	$ 49,993.31
****Base Wages**	$ 60,827.52
TOTAL Investment In You	$ 110,820.83
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 1271

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MINNIE TITUS

mtitus@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	$ 106.99
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,803.15
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,460.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,556.60
****Base Wages**	$ 58,305.73
TOTAL Investment In You	$ 82,862.32
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 # 1272

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DWIGHT SMITH

dwsmith@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 200.00
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)	$ 1,045.58
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	$ 30,673.01
****Base Wages**	$ 54,370.37
TOTAL Investment In You	$ 85,043.38
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1273

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GEORGIA KILGORE

gkilgore@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 93.45
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,958.86
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	$ 25,949.85
****Base Wages**	$ 50,930.46
TOTAL Investment In You	$ 76,880.31
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1287

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RACHELLE SURDILLA

rsurdilla@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	$ 21,200.66
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	$ 5,295.98
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,608.11
****Base Wages**	$ 69,228.43
TOTAL Investment In You	$ 106,836.54
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1293

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PHUONG QUACH

pquach@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	$ 106.03
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,420.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,925.39
****Base Wages**	$ 57,785.94
TOTAL Investment In You	$ 94,711.32
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1297

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CELEDONIA CRISOLO

ccrisolo@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	$ 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	$ 29,512.63
****Base Wages**	$ 55,458.00
TOTAL Investment In You	$ 84,970.63
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1299

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ERNA TRINIDAD

etrinidad@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)	$ 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	$ 9,511.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,993.42
****Base Wages**	$ 149,289.30
TOTAL Investment In You	$ 184,282.72
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1300

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GABRIELA FLORES

gaflores@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)	$ 9,502.40
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,735.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 60,115.76
****Base Wages**	$ 164,708.34
TOTAL Investment In You	$ 224,824.10
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1311

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YVONNE ESCARSEGA

yescarsega@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 8,015.70
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,971.61
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,286.78
****Base Wages**	$ 104,204.05
TOTAL Investment In You	$ 137,490.83
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 # 1312

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LUZVIMINDA MENDOZA

lmendoza@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)	$ 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	$ 5,819.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,091.58
****Base Wages**	$ 76,074.34
TOTAL Investment In You	$ 114,165.91
TOTAL Paid Time Off Days:	**56 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 # 1314 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JEAN MCINTYRE jmcintyre@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	$ 9,511.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,922.32
****Base Wages**	$ 149,289.30
TOTAL Investment In You	$ 179,211.62
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1315 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANNABELLE EMBRY aembry@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	$ 13,664.30
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,458.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,591.95
****Base Wages**	$ 145,648.05
TOTAL Investment In You	$ 179,239.99
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1316

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHERYL BRYANT

cbryant@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	$ 105.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,287.12
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,784.99
****Base Wages**	$ 56,040.82
TOTAL Investment In You	$ 91,825.81
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1324

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VILMA SANCHEZ

visanchez@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,853.37
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,152.84
****Base Wages**	$ 63,442.70
TOTAL Investment In You	$ 85,595.54
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 # 1327

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EVA CHAVARRIA

echavarria@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,912.88
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 82.11
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,705.57
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,480.01
****Base Wages**	$ 52,207.79
TOTAL Investment In You	$ 74,687.80
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 # 1331

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JULIE WANG

jwang@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	$ 9,620.19
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,125.54
****Base Wages**	$ 156,771.68
TOTAL Investment In You	$ 197,897.22
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1332 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BEVERLY CURTIS bcurtis@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	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,394.21
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,415.22
****Base Wages**	$ 83,584.38
TOTAL Investment In You	$ 106,999.60
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1337

2016

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIA PEREZ

maperez@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:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1345

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NANCY CASTELAN

ncastlan@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	$ 95.32
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,998.04
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,974.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,266.20
****Base Wages**	$ 51,949.04
TOTAL Investment In You	$ 90,215.24
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 # 1350

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STELLA IM-CORRALES

scorrales@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		$ 9,274.05
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 23,385.52
****Base Wages**		$ 132,899.73
TOTAL Investment In You		$ 156,285.24
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 # 1365

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAULETTE MARBRAY

pmarbray@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	$ 99.77
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,084.47
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	$ 39,542.30
****Base Wages**	$ 54,370.37
TOTAL Investment In You	$ 93,912.67
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1368

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAURI PAOLINETTI

lpaolinetti@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	$ 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	$ 9,799.87
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,099.34
****Base Wages**	$ 169,163.28
TOTAL Investment In You	$ 196,262.62
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1369 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DEBRA MAPP

dmapp@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	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,746.36
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,749.95
****Base Wages**	$ 62,043.90
TOTAL Investment In You	$ 83,793.85
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1371 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VALERIE MARTINEZ-GOMEZ vmartinez@alamedahealthsystem.org

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

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ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 108.61
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,527.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,837.76
****Base Wages**	$ 59,187.02
TOTAL Investment In You	$ 84,024.79
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1380

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VIRGINIA TECH

vtech@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,735.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,017.00
****Base Wages**	$ 164,708.34
TOTAL Investment In You	$ 199,725.34
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1384 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHELINE MCCRAY mmccray@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	$ 106.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,231.78
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,439.02
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,541.96
****Base Wages**	$ 58,026.38
TOTAL Investment In You	$ 105,568.35
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1387

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WILLIAM FONG

wfong@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)	$ 5,894.74
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,569.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 56,342.15
****Base Wages**	$ 153,263.14
TOTAL Investment In You	$ 209,605.28
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 # 1391

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ERROL BARRETT

ebarrett@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	$ 8,532.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,410.42
****Base Wages**	$ 111,533.76
TOTAL Investment In You	$ 160,944.18
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1392

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANN NOMURA

anomura@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 9,109.56
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,059.45
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,240.90
****Base Wages**	$ 118,424.18
TOTAL Investment In You	$ 168,665.08
TOTAL Paid Time Off Days:	**56 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 # 1412

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHARON JACKSON

sjackson@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	$ 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	$ 9,565.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,674.92
****Base Wages**	$ 153,021.65
TOTAL Investment In You	$ 193,696.57
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1417

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NAZEMA MOMAND

nmomand@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	$ 108.61
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,527.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,804.74
****Base Wages**	$ 59,187.02
TOTAL Investment In You	$ 88,991.77
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 # 1419

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ARLENE REEVES

areeves@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	*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		$ 54.30
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		$ 4,527.81
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 17,937.46
****Base Wages**		$ 29,593.51
TOTAL Investment In You		$ 47,530.97
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 # 1421

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOHN CROSBY

jcrosby@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	$ 102.00
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	$ 4,252.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,522.60
****Base Wages**	$ 55,585.30
TOTAL Investment In You	$ 85,107.90
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1423

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DONNA MITCHELL

dmitchell@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	$ 108.61
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,527.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,822.48
****Base Wages**	$ 59,187.02
TOTAL Investment In You	$ 81,009.51
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 # 1438

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALAINA SPANN

awilliams@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	$ 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)	$ 2,925.94
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,819.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,854.74
****Base Wages**	$ 76,074.34
TOTAL Investment In You	$ 115,929.07
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 # 1441

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CRISTINA HERNANDEZ

chernandez@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	$ 106.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,527.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,398.97
****Base Wages**	$ 59,187.02
TOTAL Investment In You	$ 104,586.00
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1444

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ISABEL PARRA

iparra@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)	$ 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	$ 5,047.70
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,125.79
****Base Wages**	$ 65,983.01
TOTAL Investment In You	$ 112,108.80
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1445

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GILBERT YEE

gyee@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	$ 9,805.55
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,233.60
****Base Wages**	$ 101,733.09
TOTAL Investment In You	$ 131,966.69
TOTAL Paid Time Off Days:	**45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1449

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHONG RHEE

crhee@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 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	$ 22,832.44
****Base Wages**	$ 72,326.38
TOTAL Investment In You	$ 95,158.82
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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

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

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1458

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

REMEDIOS IRLANDA

rirlanda@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)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,029.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,101.82
****Base Wages**	$ 118,038.34
TOTAL Investment In You	$ 159,140.16
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 # 1461

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NORMA CONTRERAS

CContreras@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	$ 4,866.99
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,179.12
****Base Wages**	$ 63,620.75
TOTAL Investment In You	$ 100,799.87
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 # 1468

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AMY JOHNSON

amjohnson@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		$ 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		$ 18,573.54
****Base Wages**		$ 58,409.10
TOTAL Investment In You		$ 76,982.65
TOTAL Paid Time Off Days:		**51 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1473

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KOYSENG SAECHAO

ksaechao@alamedahealthsystem.org

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

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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	$ 4,853.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,165.69
****Base Wages**	$ 63,445.20
TOTAL Investment In You	$ 100,610.89
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1475

2016

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAILA NAWABI

lnawabi@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,853.37
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,152.84
****Base Wages**	$ 63,442.70
TOTAL Investment In You	$ 85,595.54
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1478

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STEVEN LIANG

sliang@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	$ 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)	$ 6,891.24
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,187.08
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,167.63
****Base Wages**	$ 80,876.85
TOTAL Investment In You	$ 126,044.48
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1480

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHRISTINE BERTELSEN

cbertelsen@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	$ 106.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,439.02
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,842.72
****Base Wages**	$ 58,026.38
TOTAL Investment In You	$ 82,869.11
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1485

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JACQUELYN ALBERTO

jalberto@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	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 110.54
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 6,950.61
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,608.26
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,855.47
****Base Wages**	$ 60,238.67
TOTAL Investment In You	$ 89,094.15
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 # 1498

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SUSAN ADAMS

sadams@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,154.66
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	$ 9,620.19
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,243.60
****Base Wages**	$ 125,417.34
TOTAL Investment In You	$ 159,660.94
TOTAL Paid Time Off Days:	**55 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 # 1504 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAVE PAULAR dpaular@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 96.25
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		$ 4,012.53
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 18,106.84
****Base Wages**		$ 52,451.36
TOTAL Investment In You		$ 70,558.20
TOTAL Paid Time Off Days:		**51 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1510

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARGARITA ANDOLA-LOPEZ

mlopez@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,999.17
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,316.06
****Base Wages**	$ 78,420.58
TOTAL Investment In You	$ 101,736.64
TOTAL Paid Time Off Days:	**59 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1524

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DELIA CAMPANERO

dcampanero@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	$ 9,136.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,435.90
****Base Wages**	$ 123,408.90
TOTAL Investment In You	$ 149,844.80
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 # 1533

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PATRICIA REYNOLDS

preynolds@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)	$ 5,331.92
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	$ 46,811.20
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 188,907.02
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1534

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GINA DIMAANO

gdimaano@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	$ 101.76
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	$ 36,543.03
****Base Wages**	$ 55,458.00
TOTAL Investment In You	$ 92,001.03
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 # 1542 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PLAIVILLA BROADWAY

pbroadway@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	$ 586.04
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)	$ 429.02
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	$ 22,012.99
****Base Wages**	$ 56,888.62
TOTAL Investment In You	$ 78,901.61
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1547

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HEIDI CHERRY

hcherry@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 # 1568

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL ABLETT

mablett@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	$ 98.19
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,548.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,832.48
****Base Wages**	$ 59,453.89
TOTAL Investment In You	$ 81,286.37
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 # 1573

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GWENDOLYN JOHNSON

gjohnson@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	$ 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	$ 5,643.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,349.43
****Base Wages**	$ 73,772.61
TOTAL Investment In You	$ 104,122.04
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 # 1581

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANGELA EMERSON

aemerson@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	$ 96.86
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	$ 4,038.31
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,321.24
****Base Wages**	$ 52,788.32
TOTAL Investment In You	$ 74,109.56
TOTAL Paid Time Off Days:	**56 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 # 1582

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LINDA PON

lpon@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	$ 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	$ 10,682.35
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,964.08
****Base Wages**	$ 230,023.87
TOTAL Investment In You	$ 265,987.95
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1584

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ATSUKO HIRAKI

ahiraki@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,735.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,384.68
****Base Wages**	$ 164,708.34
TOTAL Investment In You	$ 199,093.02
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1588

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KAREN LEE

kalee@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	$ 101.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,702.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,990.21
****Base Wages**	$ 61,472.11
TOTAL Investment In You	$ 83,462.32
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1590

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAMELA CHAN

pchan@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)	$ 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	$ 9,136.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,408.32
****Base Wages**	$ 123,408.90
TOTAL Investment In You	$ 164,817.22
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 # 1591

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSEMARIE ROBERTS

roroberts@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,735.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,017.00
****Base Wages**	$ 164,708.34
TOTAL Investment In You	$ 199,725.34
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1604

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VERONICA COUVSON

vcouvson@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	$ 101.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,702.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,340.15
****Base Wages**	$ 61,472.11
TOTAL Investment In You	$ 90,812.26
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1605

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RICHARD CHAO

rchao@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 9,180.49
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 23,291.96
****Base Wages**		$ 126,447.36
TOTAL Investment In You		$ 149,739.32
TOTAL Paid Time Off Days:		**56 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

EASTMONT WELLNESS

Employee ID # 1611

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GRACE LAT

glat@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 11 % of your income.

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 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)	$ 600.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 10,650.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,567.45
****Base Wages**	$ 227,831.97
TOTAL Investment In You	$ 256,399.42
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1615

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BEVERLY JEW

BJew@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)	$ 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)	$ 1,270.88
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,055.54
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,825.89
****Base Wages**	$ 66,085.55
TOTAL Investment In You	$ 89,911.45
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 # 1624

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHARON ABRAM

sabram@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	$ 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)	$ 8,015.68
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,971.61
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,269.02
****Base Wages**	$ 104,204.05
TOTAL Investment In You	$ 145,473.07
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1627

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SAMUEL FULGADO

sfulgado@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)	$ 1,958.86
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	$ 38,147.23
****Base Wages**	$ 50,930.46
TOTAL Investment In You	$ 89,077.69
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1631

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LORRAINE CHAN

lchan@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 9,492.99
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,136.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,911.15
****Base Wages**	$ 123,408.90
TOTAL Investment In You	$ 167,320.05
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1635

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WARREN LEE

wlee@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 5,026.90
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,999.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,904.24
****Base Wages**	$ 65,349.65
TOTAL Investment In You	$ 116,253.89
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 # 1636

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LUZ COLON

lcolon@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	$ 93.45
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,896.18
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,175.71
****Base Wages**	$ 50,930.46
TOTAL Investment In You	$ 72,106.17
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1641

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROBIN ANDERSON

roanderson@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 6,722.21
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	$ 47,686.46
****Base Wages**	$ 131,083.24
TOTAL Investment In You	$ 178,769.70
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1646

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RODNEY ISORDA

risorda@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)	$ 4,414.09
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,565.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,261.63
****Base Wages**	$ 153,021.65
TOTAL Investment In You	$ 192,283.28
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1648

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GEORGE IDOLYANTES

gidolyantes@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,440.20
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,853.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,209.07
****Base Wages**	$ 63,445.20
TOTAL Investment In You	$ 110,654.27
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1651

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SARA LANDERS

slanders@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	$ 109.32
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,474.64
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	$ 40,489.46
****Base Wages**	$ 61,526.40
TOTAL Investment In You	$ 102,015.86
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1652

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSEIDA GASKIN

rgaskin@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	$ 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	$ 21,149.29
****Base Wages**	$ 54,370.37
TOTAL Investment In You	$ 75,519.66
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 1656

2016

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARTHA MURILLO

mmontalvan@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 106.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,439.02
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,937.44
****Base Wages**	$ 58,026.38
TOTAL Investment In You	$ 93,963.83
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1657

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NORMA MUNOZ

nmunoz@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)	$ 3,660.15
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,853.37
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,795.25
****Base Wages**	$ 63,442.70
TOTAL Investment In You	$ 97,237.95
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 # 1675

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SOLOMON SAHLE

ssahle@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	$ 103.86
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 5,986.78
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	$ 51,185.40
****Base Wages**	$ 56,602.21
TOTAL Investment In You	$ 107,787.61
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1676

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOAQUIN RODRIGUEZ

jorodriguez@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	$ 21,320.52
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 91.73
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,909.11
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,596.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,916.36
****Base Wages**	$ 60,090.58
TOTAL Investment In You	$ 100,006.94
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1677

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DOROTHY LINTON

dlinton@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 4,806.65
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 18,918.12
****Base Wages**		$ 62,832.02
TOTAL Investment In You		$ 81,750.14

TOTAL Paid Time Off Days: 56 Days
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1679

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHARLES SPEARS

cspears@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	$ 96.86
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,649.64
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,038.31
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,970.88
****Base Wages**	$ 52,788.32
TOTAL Investment In You	$ 75,759.20
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 # 1680

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELIBERTO MAGADAN

emagadan@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	$ 110.26
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	$ 4,596.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,893.26
****Base Wages**	$ 60,090.58
TOTAL Investment In You	$ 81,983.84
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 # 1682

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TAMMY DUTTON

tdutton@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 104.35
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,093.59
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	$ 25,845.46
****Base Wages**	$ 56,866.58
TOTAL Investment In You	$ 82,712.04
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1684

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DELRA WILLIAMS

delwilliams@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	$ 110.00
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	$ 4,586.16
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,894.89
****Base Wages**	$ 59,949.76
TOTAL Investment In You	$ 96,844.65
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 # 1687

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VALERIE SLACK

vslack@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)	$ 200.00
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)	$ 0.00
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	$ 25,023.89
****Base Wages**	$ 57,785.94
TOTAL Investment In You	$ 82,809.82
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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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1688

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DINA MURRAY

dcalvin@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)	$ 4,258.59
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,937.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,477.32
****Base Wages**	$ 64,535.95
TOTAL Investment In You	$ 99,013.27
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1691

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LILLIAN CAMPBELL-JONES

lfulmore@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	$ 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	$ 27,169.95
****Base Wages**	$ 134,316.00
TOTAL Investment In You	$ 161,485.95
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1692

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VIVIAN MCKOY

vmckoy@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,853.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,264.19
****Base Wages**	$ 63,445.20
TOTAL Investment In You	$ 88,709.39
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1694

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LINDA HAYES

lhayes@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	$ 98.76
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,293.81
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,322.07
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,950.59
****Base Wages**	$ 56,497.58
TOTAL Investment In You	$ 93,448.17
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1697

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VALARIE VLORIE

vvlorie@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 93.45
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,896.18
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,157.97
****Base Wages**	$ 50,930.46
TOTAL Investment In You	$ 80,088.43
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1700

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TROY BROWN

trbrown@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 105.98
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,418.44
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 13,661.42
****Base Wages**	$ 57,757.44
TOTAL Investment In You	$ 71,418.86
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1701

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HAZEL LEDEZMA

hledezma@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	$ 4,437.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,742.45
****Base Wages**	$ 58,003.71
TOTAL Investment In You	$ 94,746.16
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1702

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANITA WALLACE

awallace@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 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)	$ 4,318.47
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,811.54
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,020.46
****Base Wages**	$ 75,967.84
TOTAL Investment In You	$ 116,988.30
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1704

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TRACY POLLARD

tpollard@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	$ 21,200.66
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)	$ 2,091.16
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	$ 38,548.99
****Base Wages**	$ 54,370.37
TOTAL Investment In You	$ 92,919.36
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1706

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHERRIE WARE

sware@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	$ 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	$ 29,427.43
****Base Wages**	$ 54,370.37
TOTAL Investment In You	$ 83,797.80
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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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1708

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SANDRA SEELEY-WILLIAMS

SWilliams@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)	$ 10,592.31
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,241.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 51,923.22
****Base Wages**	$ 130,661.86
TOTAL Investment In You	$ 182,585.07
TOTAL Paid Time Off Days:	**59 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1712

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TERRANCE SHEHEE

tshehee@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	$ 21,200.66
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 95.32
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	$ 3,974.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,268.16
****Base Wages**	$ 51,949.04
TOTAL Investment In You	$ 88,217.20
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1725

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAULA NEHRLING

pnehrling@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	$ 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	$ 9,617.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,743.75
****Base Wages**	$ 156,567.01
TOTAL Investment In You	$ 197,310.76
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1727

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELENA ESCOLAR

eescolar@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,409.55
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,792.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,483.88
****Base Wages**	$ 62,648.35
TOTAL Investment In You	$ 95,132.23
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

EASTMONT WELLNESS

Employee ID # 1730

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PETER KUSNIERCZYK

pkusnierczyk@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 11 % of your income.

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,751.94
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 19,644.79
****Base Wages**	$ 165,858.16
TOTAL Investment In You	$ 185,502.95
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1737

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

THOME TUCKER

ttucker@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	$ 1,218.36
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	$ 5,532.97
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,202.38
****Base Wages**	$ 72,326.38
TOTAL Investment In You	$ 109,528.76
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1740

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PARLA FEARN

pfearn@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:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1747

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LETICIA TORRES

ltorres@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	$ 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)	$ 7,802.99
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,732.18
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,834.32
****Base Wages**	$ 101,074.27
TOTAL Investment In You	$ 141,908.59
TOTAL Paid Time Off Days:	**59 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1750

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNIFER ARCHULETA

jarchuleta@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,999.17
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,894.68
****Base Wages**	$ 78,420.58
TOTAL Investment In You	$ 125,315.26
TOTAL Paid Time Off Days:	**59 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 # 1752

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CELESTE CAZARES

ccazares@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	$ 106.03
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,420.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,925.39
****Base Wages**	$ 57,785.94
TOTAL Investment In You	$ 94,711.32
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1753

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSEMARIE MANANSALA

rmanansala@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	$ 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	$ 9,735.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,608.30
****Base Wages**	$ 164,708.34
TOTAL Investment In You	$ 205,316.64
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1754

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CAROLYN DUNCAN

cduncan@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	$ 586.04
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)	$ 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	$ 28,525.65
****Base Wages**	$ 50,930.46
TOTAL Investment In You	$ 79,456.11
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1759

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHERYL WILSON

cwilson@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,708.94
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,990.67
****Base Wages**	$ 162,892.08
TOTAL Investment In You	$ 197,882.75
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1760

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELIZABETH BENJAMIN

ebenjamin@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	$ 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	$ 40,260.66
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 182,356.48
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1763

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELISA CHAN

echan@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)		$ 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)		$ 3,684.21
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 9,569.32
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 27,565.00
****Base Wages**		$ 122,610.51
TOTAL Investment In You		$ 150,175.50
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 # 1769

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOHNNY ESLAO

jeslao@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	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 95.32
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,996.08
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,974.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,233.84
****Base Wages**	$ 51,949.04
TOTAL Investment In You	$ 85,182.88
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 # 1772

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TRACI GRUBBS

tgrubbs@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	$ 106.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,439.02
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,744.22
****Base Wages**	$ 58,026.38
TOTAL Investment In You	$ 94,770.61
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1773 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CLIFF OLOGBOSELE cologbosele@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	$ 95.32
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	$ 3,974.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,305.38
****Base Wages**	$ 51,949.04
TOTAL Investment In You	$ 87,254.42
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1774

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YOLANDA DELEON

YDeLeon@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 5,431.76
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,401.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,115.39
****Base Wages**	$ 70,613.09
TOTAL Investment In You	$ 106,728.48
TOTAL Paid Time Off Days:	**56 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

Employee ID # 1775

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANA GARCIA

angarcia@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	$ 21,200.66
Dental	$ 1,861.08
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)	$ 2,133.00
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	$ 38,676.03
****Base Wages**	$ 55,458.00
TOTAL Investment In You	$ 94,134.03
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 # 1783

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LUCINDA BAGLEY

lbagley@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,407.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,522.14
****Base Wages**	$ 99,467.08
TOTAL Investment In You	$ 128,989.22
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1796

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL BRANNON

mbrannon@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	$ 98.19
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,548.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,943.64
****Base Wages**	$ 59,453.89
TOTAL Investment In You	$ 84,397.53
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 # 1810 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DARRYL CHEUNG dcheung@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)	$ 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	$ 9,569.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,841.21
****Base Wages**	$ 153,263.14
TOTAL Investment In You	$ 195,104.34
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1823

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BARBARA JAMES

bjames@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	$ 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	$ 25,804.17
****Base Wages**	$ 87,388.83
TOTAL Investment In You	$ 113,193.00
TOTAL Paid Time Off Days:	**45 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1827

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DARLEEN MURRELL

dmurrell@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	$ 14,812.98
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)	$ 6,386.45
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,325.74
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,993.92
****Base Wages**	$ 56,545.63
TOTAL Investment In You	$ 92,539.55
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 # 1832

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHERRY PERRY

sperry@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	$ 7,406.62
Dental	$ 642.46
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)	$ 3,764.12
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	$ 25,209.29
****Base Wages**	$ 54,370.37
TOTAL Investment In You	$ 79,579.66
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1840

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PIER MANUEL

pmanuel@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,588.82
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,888.29
****Base Wages**	$ 73,056.46
TOTAL Investment In You	$ 95,944.75
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1841 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WANDA SHANKS wshanks@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 1.45
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,031.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,424.71
****Base Wages**	$ 39,420.37
TOTAL Investment In You	$ 76,845.08
TOTAL Paid Time Off Days:	**6 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 # 1843

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CYNTHIA MCDANIEL

cyjohnson@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	$ 9.62
Long Term Disability	$ 113.23
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)	$ 68.00
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	$ 30,838.99
****Base Wages**	$ 71,757.30
TOTAL Investment In You	$ 102,596.29
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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ALAMEDA HEALTH SYSTEM

Employee ID # 1857

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BEVERLY QUAN

bquan@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 8,828.17
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,565.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,675.71
****Base Wages**	$ 153,021.65
TOTAL Investment In You	$ 196,697.36
TOTAL Paid Time Off Days:	**55 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1862

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TERESA RANDALL

trandall@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
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	$ 8,881.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,363.54
****Base Wages**	$ 116,102.06
TOTAL Investment In You	$ 150,465.60
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1864

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WANDA BONNER-CAMPBELL

wcampbell@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	$ 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)	$ 6,055.36
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,719.54
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,104.45
****Base Wages**	$ 74,765.18
TOTAL Investment In You	$ 118,869.63
TOTAL Paid Time Off Days:	**59 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1873

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHRISTINE GIBSON

cgibson@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 10,080.78
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,114.65
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 60,090.94
****Base Wages**	$ 121,907.14
TOTAL Investment In You	$ 181,998.08
TOTAL Paid Time Off Days:	**59 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1880

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOSEPHINE ALDAY

jalday@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,960.42
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,197.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,269.39
****Base Wages**	$ 81,013.09
TOTAL Investment In You	$ 119,282.48
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1881

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

REYNA ALEGRIA

ralegria@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 106.43
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,684.93
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,437.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,396.98
****Base Wages**	$ 58,003.71
TOTAL Investment In You	$ 92,400.69
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 # 1885

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELVIRA BALAN

ebalan@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	$ 9,136.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,208.32
****Base Wages**	$ 123,408.90
TOTAL Investment In You	$ 164,617.22
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 # 1890

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GANAT MESHESHA

gmeshesha@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	$ 21,200.66
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 95.32
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,996.08
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,974.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,264.24
****Base Wages**	$ 51,949.04
TOTAL Investment In You	$ 92,213.28
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 # 1901

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NORMA JOHNSON

njohnson@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	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,003.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,320.55
****Base Wages**	$ 65,407.26
TOTAL Investment In You	$ 87,727.81
TOTAL Paid Time Off Days:	**56 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 # 1904

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GERARD OLIVER

goliver@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	$ 96.25
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,530.38
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,012.53
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,807.48
****Base Wages**	$ 52,451.36
TOTAL Investment In You	$ 85,258.84
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1908

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NATHALIE BAILEY

nbailey@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:	**46 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1913

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIA ORNELAS

mornelas@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,920.75
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 183,767.73
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1921

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DARNELL HALL

dhall@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	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 95.32
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,997.06
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,974.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,252.56
****Base Wages**	$ 51,949.04
TOTAL Investment In You	$ 76,201.60
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1925

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELLENA MARTINEZ LOPEZ

emartinez@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	$ 21,200.66
Dental	$ 1,861.08
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	$ 36,252.81
****Base Wages**	$ 51,753.10
TOTAL Investment In You	$ 88,005.91
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1929

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIA CAMERON

mcameron@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	$ 104.89
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	$ 4,372.87
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,846.09
****Base Wages**	$ 57,161.73
TOTAL Investment In You	$ 87,007.82
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 # 1936

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JERIKA ALDAVE

jaldave@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 59.86
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		$ 4,159.33
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 18,217.26
****Base Wages**		$ 43,496.29
TOTAL Investment In You		$ 61,713.56
TOTAL Paid Time Off Days:		**51 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 1940

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AIDA AHMED

aahmed@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	$ 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	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,730.39
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 197,577.37
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1944

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DONNA GONZALES

DGonzales@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	$ 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)	$ 8,772.86
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,115.92
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 42,187.93
****Base Wages**	$ 106,090.40
TOTAL Investment In You	$ 148,278.33
TOTAL Paid Time Off Days:	**59 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 # 1963 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CRYSTAL MAPP cmapp@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,401.85
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,683.58
****Base Wages**	$ 70,612.46
TOTAL Investment In You	$ 101,296.05
TOTAL Paid Time Off Days:	**56 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 # 1984

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL SUGARMAN

msugarman@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)		$ 3,896.66
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 7,750.46
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 24,137.51
****Base Wages**		$ 101,313.26
TOTAL Investment In You		$ 125,450.78
TOTAL Paid Time Off Days:		**56 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

Employee ID # 1989

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ARACELIA LEE-ESPINOZA

aespinoza2@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:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1990

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NIDIA LEE-HOSSAIN

nlee@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)	$ 6,651.68
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,735.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 57,265.04
****Base Wages**	$ 164,708.34
TOTAL Investment In You	$ 221,973.38
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1996

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VERONICA LEDSINGER

vledsinger@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,055.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,933.52
****Base Wages**	$ 66,084.10
TOTAL Investment In You	$ 112,017.62
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 # 1998

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAMELA ALSTON

palston@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	$ 7,406.62
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,949.73
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,842.52
****Base Wages**	$ 179,498.59
TOTAL Investment In You	$ 207,341.11
TOTAL Paid Time Off Days:	**59 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2002

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WENDY DUTTON

wdutton@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	$ 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)	$ 6,356.32
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,321.36
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,749.57
****Base Wages**	$ 82,632.16
TOTAL Investment In You	$ 127,381.73
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2005

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRIGID DOYLE

bdoyle@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	$ 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)	$ 6,187.86
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,679.82
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,295.73
****Base Wages**	$ 160,884.26
TOTAL Investment In You	$ 197,179.99
TOTAL Paid Time Off Days:	**54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2014 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TEODORA LEE telee@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	$ 98.19
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,143.34
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,548.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,158.08
****Base Wages**	$ 59,453.89
TOTAL Investment In You	$ 90,611.97
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2025

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NANCY YIU

nyiu@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)	$ 4,360.86
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,956.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,599.02
****Base Wages**	$ 64,789.92
TOTAL Investment In You	$ 99,388.94
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

Employee ID # 2030

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NAI SAETEURN

nsaeteurn@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,770.17
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,999.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,274.77
****Base Wages**	$ 65,349.65
TOTAL Investment In You	$ 105,624.42
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2031

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CELSO DORIA

cdoria@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	$ 4,437.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,742.45
****Base Wages**	$ 58,003.71
TOTAL Investment In You	$ 94,746.16
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2033

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ADRIENNE GRAY

agray@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 106.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,439.02
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,546.84
****Base Wages**	$ 58,026.38
TOTAL Investment In You	$ 82,573.23
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2036

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHERWOOD RODILLAS

srodillas@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	$ 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	$ 5,643.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,293.01
****Base Wages**	$ 73,772.61
TOTAL Investment In You	$ 104,065.62
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2037

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SUSAN MAYER

SMayer@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	$ 9,511.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,793.42
****Base Wages**	$ 149,289.30
TOTAL Investment In You	$ 184,082.72
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2038

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

UGOCHI OBIOHA

uobioha@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	$ 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)	$ 5,885.45
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,565.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,560.37
****Base Wages**	$ 153,021.65
TOTAL Investment In You	$ 199,582.02
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2050

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JUDITH KIMBROUGH

jkimbrough@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	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 106.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,463.56
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	$ 26,176.73
****Base Wages**	$ 57,785.94
TOTAL Investment In You	$ 83,962.67
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 # 2058

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LINNE ALMER

lalmer@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	$ 20,494.76
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)	$ 7,725.53
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,677.02
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,008.78
****Base Wages**	$ 144,621.92
TOTAL Investment In You	$ 193,630.70
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2060

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DANIEL DESOTO

ddesoto@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	$ 9,511.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,389.78
****Base Wages**	$ 149,289.30
TOTAL Investment In You	$ 199,679.08
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2061

2016

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RONALD MCCARDELL JR

RMcCardell@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	$ 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)	$ 6,173.30
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,187.08
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,381.39
****Base Wages**	$ 80,876.85
TOTAL Investment In You	$ 110,258.24
TOTAL Paid Time Off Days:	**55 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 # 2062 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARILOU CRUZ mcruz@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	$ 111.62
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,339.52
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	$ 32,272.77
****Base Wages**	$ 60,827.52
TOTAL Investment In You	$ 93,100.29
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2068

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SUSAN DAVID

scaraballo@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)	$ 6,006.40
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,611.41
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,689.70
****Base Wages**	$ 156,166.40
TOTAL Investment In You	$ 203,856.10
TOTAL Paid Time Off Days:	**54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2069

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL MURRAY

mmurray@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,960.42
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,421.43
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,539.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,069.82
****Base Wages**	$ 98,552.69
TOTAL Investment In You	$ 138,622.51
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2070

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELLEN MILANI-ROCKWELL

erockwell@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	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,693.17
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 198,540.15
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2073

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELIZABETH HERRERA

eherrera@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	$ 5,819.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,891.58
****Base Wages**	$ 76,074.34
TOTAL Investment In You	$ 113,965.91
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2076

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MONICA INTELISANO

mintelisano@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,614.48
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,492.57
****Base Wages**	$ 60,320.00
TOTAL Investment In You	$ 105,812.57
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 # 2078

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CLAUDIA ARRIAGA

carriaga@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)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,758.20
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,636.29
****Base Wages**	$ 62,198.66
TOTAL Investment In You	$ 107,834.94
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2079

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JUANITA POLIARCO

jpoliarco@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	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,654.20
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,268.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,943.43
****Base Wages**	$ 95,009.41
TOTAL Investment In You	$ 122,952.84
TOTAL Paid Time Off Days:	**54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2082

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KRIS MARCHI

kmarchi@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	$ 107.78
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,970.15
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,493.47
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,770.13
****Base Wages**	$ 58,738.16
TOTAL Investment In You	$ 100,508.29
TOTAL Paid Time Off Days:	**56 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 # 2083

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

INHO KIM

kinho@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		$ 9,458.90
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 23,570.37
****Base Wages**		$ 145,648.05
TOTAL Investment In You		$ 169,218.41
TOTAL Paid Time Off Days:		**50 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2085

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LINDA BAXTER

lbaxter@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	$ 19,563.18
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 3.07
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	$ 9,775.68
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,340.01
****Base Wages**	$ 117,246.73
TOTAL Investment In You	$ 157,586.74
TOTAL Paid Time Off Days:	**9 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2087

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CAROLYN THOMPSON

CaThompson@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	$ 1,218.36
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)	$ 4,470.78
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,308.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,015.03
****Base Wages**	$ 69,397.12
TOTAL Investment In You	$ 119,412.15
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2088

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DEBBYE BROWN

debbrown@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,564.74
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,864.21
****Base Wages**	$ 152,947.81
TOTAL Investment In You	$ 179,812.02
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2090

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MONICA CHADWICK

mchadwick@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	$ 21,200.66
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)	$ 3,931.38
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	$ 40,905.58
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 99,314.69
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2092

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BENJAMIN ZAMBALES

bzambales@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	$ 7,750.46
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,049.93
****Base Wages**	$ 101,313.26
TOTAL Investment In You	$ 126,363.20
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 # 2118

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TERESITA FRANDO

tfrando@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	$ 95.32
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,998.04
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,974.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,235.80
****Base Wages**	$ 51,949.04
TOTAL Investment In You	$ 83,184.84
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 # 2125

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

IMELDA MARTIN

imartin@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:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2127 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOAN PIKE

jpike@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	$ 102.97
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,798.50
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	$ 31,839.42
****Base Wages**	$ 62,348.00
TOTAL Investment In You	$ 94,187.42
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2128

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VANJEL SITO

vsito@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 6,633.35
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,539.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,472.10
****Base Wages**	$ 98,552.69
TOTAL Investment In You	$ 130,024.79
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2131

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AMY COLE

acole@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		$ 5,055.54
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 19,167.01
****Base Wages**		$ 66,085.55
TOTAL Investment In You		$ 85,252.57

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 # 2136

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALLISON AUSTIN

alaustin@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,704.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,115.12
****Base Wages**	$ 162,585.28
TOTAL Investment In You	$ 192,700.40
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2137

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSELYN SYLVESTER

rsylvester@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	$ 98.76
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 646.90
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,117.41
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,099.02
****Base Wages**	$ 53,822.29
TOTAL Investment In You	$ 89,921.30
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2142

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

REBECCA LUCAS

rlucas@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,458.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,869.53
****Base Wages**	$ 116,518.44
TOTAL Investment In You	$ 146,387.97
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 # 2145

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DENISE FRYE

dfrye@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,903.01
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 191,749.99
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2151

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SUSAN JONES

sujones@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)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,597.70
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,897.17
****Base Wages**	$ 86,244.50
TOTAL Investment In You	$ 110,141.67
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2154

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KIMBERLY LEUNG-WONG

kleung@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	$ 9,458.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,740.63
****Base Wages**	$ 145,648.05
TOTAL Investment In You	$ 180,388.67
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2156

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LISA DECOULODE-VILLA

ldecoulodevilla@alamedahealthsystem.o

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	$ 4,866.99
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,179.12
****Base Wages**	$ 63,620.75
TOTAL Investment In You	$ 100,799.87
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2157

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALEX ESCAJEDA

AEscajeda@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)	$ 8,390.69
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,078.48
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,558.48
****Base Wages**	$ 119,412.59
TOTAL Investment In You	$ 168,971.07
TOTAL Paid Time Off Days:	**54 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 # 2160 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AMELITA MELENDRES amelendres@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 96.26
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,923.25
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	$ 33,646.89
****Base Wages**	$ 58,288.26
TOTAL Investment In You	$ 91,935.15
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2166

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HILLARY LARKIN

hlarkin@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	$ 9,799.87
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,871.76
****Base Wages**	$ 169,163.28
TOTAL Investment In You	$ 211,035.04
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2168 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANNA LEE

alee@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,741.73
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,813.62
****Base Wages**	$ 101,199.07
TOTAL Investment In You	$ 141,012.69
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2174

2016

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LINA HONOREZ

lhonorez@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	$ 106.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,616.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,921.79
****Base Wages**	$ 60,347.46
TOTAL Investment In You	$ 97,269.24
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2176

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARINOR PROTACIO

mprotacio@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		$ 5,295.98
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 19,407.45
****Base Wages**		$ 69,228.43
TOTAL Investment In You		$ 88,635.88

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

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ALAMEDA HEALTH SYSTEM

Employee ID # 2177

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VALERIE LOUIE

vlouie@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	$ 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)	$ 5,507.78
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,486.19
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,516.74
****Base Wages**	$ 147,530.66
TOTAL Investment In You	$ 194,047.40
TOTAL Paid Time Off Days:	**59 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2179

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALBERT ENCARNACION

aencarnacion@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		$ 1,861.08
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)		$ 2,334.80
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 9,160.26
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 25,606.53
****Base Wages**		$ 125,052.10
TOTAL Investment In You		$ 150,658.62
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 # 2183

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TYRONE CHRISTIAN

tchristian@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,027.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,905.22
****Base Wages**	$ 78,786.03
TOTAL Investment In You	$ 125,691.25
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2197

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRENDA PORTER

bporter@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,218.36
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)		$ 7,918.67
Tuition Reimbursement (fiscal yr 2016)		$ 499.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 9,735.27
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 31,621.69
****Base Wages**		$ 164,708.34
TOTAL Investment In You		$ 196,330.03
TOTAL Paid Time Off Days:		**50 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year		

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2199

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PATRICIA HANSON

phanson@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 7,971.61
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,975.20
****Base Wages**	$ 104,204.05
TOTAL Investment In You	$ 129,179.25
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 2200

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LILI JAMES

ljames@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/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	$ 29,522.14
****Base Wages**	$ 142,095.82
TOTAL Investment In You	$ 171,617.96
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2202

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANDRIA SIEVERS

asievers@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 375.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,406.91
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 187,253.89
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2206

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JAVONNA SMITH

jsmith@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	$ 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	$ 4,437.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,912.05
****Base Wages**	$ 58,003.71
TOTAL Investment In You	$ 87,915.76
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2213

2016

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIA CALAYAG

mcalayag@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	$ 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	$ 10,650.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,949.71
****Base Wages**	$ 227,831.97
TOTAL Investment In You	$ 263,781.68
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2214

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

QUAN LO

qlo@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	$ 8,532.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,410.42
****Base Wages**	$ 111,533.76
TOTAL Investment In You	$ 160,944.18
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2216

2016

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

YEN WANG

ywang@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)	$ 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	$ 9,458.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,940.63
****Base Wages**	$ 145,648.05
TOTAL Investment In You	$ 180,588.67
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2227

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LISA BURTON-JACKSON

ljackson@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	$ 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)	$ 12,795.65
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,069.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 53,954.80
****Base Wages**	$ 118,816.67
TOTAL Investment In You	$ 172,771.47
TOTAL Paid Time Off Days:	**59 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2233

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAULINE BUSH

pbush@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	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.78
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,518.32
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,493.47
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,209.76
****Base Wages**	$ 58,738.16
TOTAL Investment In You	$ 84,947.92
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 # 2235

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CYNTHIA KING

cking@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	$ 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	$ 29,427.43
****Base Wages**	$ 54,370.37
TOTAL Investment In You	$ 83,797.80
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 2240

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NICOLE HANSON

nhanson@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 106.03
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,583.69
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	$ 31,646.36
****Base Wages**	$ 57,785.94
TOTAL Investment In You	$ 89,432.29
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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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2243

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIA GONSALVES-ZIMMERMAN mzimmerman@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	$ 9,572.70
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,468.21
****Base Wages**	$ 153,496.72
TOTAL Investment In You	$ 203,964.93
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2246

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WENDA STUWARD

wmcculloch@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,954.42
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,840.19
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,299.96
****Base Wages**	$ 63,270.48
TOTAL Investment In You	$ 103,570.44
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2250

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROLONDA BURTON

rburton@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	$ 108.61
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,527.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,835.14
****Base Wages**	$ 59,187.02
TOTAL Investment In You	$ 96,022.17
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2251

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAUL NEAL

pneal@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	$ 112.70
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,134.03
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	$ 26,131.43
****Base Wages**	$ 61,419.90
TOTAL Investment In You	$ 87,551.33
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2254

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANGIE SMITH

asmith@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)	$ 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	$ 9,490.94
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,762.83
****Base Wages**	$ 147,857.84
TOTAL Investment In You	$ 189,620.67
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2256

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MILA NEWELL

mnewell@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 7,705.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,108.42
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,095.15
****Base Wages**	$ 66,776.74
TOTAL Investment In You	$ 104,871.89
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 # 2262 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LYNETTE LONGMIRE llongmire@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)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,787.14
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,068.87
****Base Wages**	$ 88,720.74
TOTAL Investment In You	$ 120,789.60
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 # 2266

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SYLVIA GUTIERREZ

sgutierrez@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	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 6,494.67
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	$ 51,841.06
****Base Wages**	$ 58,409.10
TOTAL Investment In You	$ 110,250.16
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 2267

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSA WESLEY

rwesley@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	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,499.37
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 207,346.35
TOTAL Paid Time Off Days:	**55 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 # 2269 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALBERTINA ADAMS aadams@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	$ 111.62
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	$ 4,653.31
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,950.99
****Base Wages**	$ 60,827.52
TOTAL Investment In You	$ 82,778.51
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2274

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CIE PEREZ

cperez@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	$ 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)	$ 4,664.99
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	$ 42,119.26
****Base Wages**	$ 91,606.53
TOTAL Investment In You	$ 133,725.79
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2276

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DINA HERNANDEZ

dhernandez@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	$ 9,270.17
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,148.26
****Base Wages**	$ 132,632.24
TOTAL Investment In You	$ 182,780.50
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2278

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KOUIVARN CHAO

kochao@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 102.83
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,310.83
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,372.87
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,551.22
****Base Wages**	$ 57,161.73
TOTAL Investment In You	$ 106,712.95
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2302

2016

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AMELIA ALEGADO-SARMIENTO

aalegado@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)	$ 933.38
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,950.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,196.15
****Base Wages**	$ 64,714.21
TOTAL Investment In You	$ 102,910.35
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 # 2305

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LILLIE BROWN

lbrown@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	$ 108.61
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,138.21
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,527.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,960.69
****Base Wages**	$ 59,187.02
TOTAL Investment In You	$ 82,147.72
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 # 2308

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KRISTIE GRAY

kgray@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,861.08
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/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		$ 23,570.37
****Base Wages**		$ 101,953.63
TOTAL Investment In You		$ 125,524.00

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

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ALAMEDA HEALTH SYSTEM

Employee ID # 2309

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ADRIANA DAVILA

adavila@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)	$ 200.00
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)	$ 4,266.00
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	$ 41,009.03
****Base Wages**	$ 55,458.00
TOTAL Investment In You	$ 96,467.03
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2310

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALBERTINA SINGH

asingh@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	$ 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)	$ 2,925.94
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,819.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,027.36
****Base Wages**	$ 76,074.34
TOTAL Investment In You	$ 110,101.69
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 # 2316

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MALCOLM MC NAIRY

mmcnairy@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	$ 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)	$ 62.59
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	$ 36,944.91
****Base Wages**	$ 72,326.38
TOTAL Investment In You	$ 109,271.29
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2323 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BERNADETTE SAN AGUSTIN bsanagustin@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,177.19
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,055.54
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,738.08
****Base Wages**	$ 66,085.55
TOTAL Investment In You	$ 105,823.64
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 # 2329

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HOWARD EDELSTEIN

hedelstein@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	$ 6,748.30
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)	$ 1,958.67
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 10,418.83
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,036.07
****Base Wages**	$ 127,110.17
TOTAL Investment In You	$ 156,146.24
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 # 2332

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RICHARD CARLISLE

rcarlisle@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	$ 8,702.97
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,581.06
****Base Wages**	$ 113,764.35
TOTAL Investment In You	$ 163,345.41
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2337

2016

NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EVA RODRIGUEZ

erodriguez@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)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,758.20
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,636.29
****Base Wages**	$ 62,198.66
TOTAL Investment In You	$ 107,834.94
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2339

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CYNTHIA ROWDEN

crowden@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)	$ 3,974.18
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	$ 45,490.40
****Base Wages**	$ 144,643.41
TOTAL Investment In You	$ 190,133.81
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2343

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VICTORIA CARMINATI

VCarminati@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 8,864.98
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 8,201.14
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,383.01
****Base Wages**	$ 107,204.45
TOTAL Investment In You	$ 141,587.46
TOTAL Paid Time Off Days:	**59 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2344

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PETRA ARCINIEGA

parciniega@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	$ 104.39
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,439.02
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,742.14
****Base Wages**	$ 58,026.38
TOTAL Investment In You	$ 94,768.52
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2345

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

REGINA PAGE

rpage@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	$ 98.19
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,548.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,814.74
****Base Wages**	$ 59,453.89
TOTAL Investment In You	$ 89,268.63
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 # 2353

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TRINA SANDERS

trsanders@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	$ 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	$ 4,950.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,432.37
****Base Wages**	$ 64,714.21
TOTAL Investment In You	$ 95,146.57
TOTAL Paid Time Off Days:	**56 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 # 2356 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELIZABETH SANTOS esantos@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:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2361

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHRISTINE O'DELL

codell@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,833.38
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,728.89
****Base Wages**	$ 171,474.16
TOTAL Investment In You	$ 222,203.05
TOTAL Paid Time Off Days:	**54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2378

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CYNTHIA MAGWILI

cmagwili@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,643.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,955.73
****Base Wages**	$ 73,772.61
TOTAL Investment In You	$ 111,728.34
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 # 2379

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAURA GEISICK

lgeisick@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	$ 106.43
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,230.91
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,437.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,960.70
****Base Wages**	$ 58,003.71
TOTAL Investment In You	$ 81,964.41
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2384

2016

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SUSIE COLEMAN

scoleman@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	$ 9,510.65
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,582.54
****Base Wages**	$ 149,217.54
TOTAL Investment In You	$ 190,800.08
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2391

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LANCE SMITH

lasmith@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	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 5,102.24
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,822.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,128.26
****Base Wages**	$ 89,182.08
TOTAL Investment In You	$ 118,310.34
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 # 2392

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARGARET SCHROTH

mschroth@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)	$ 9,109.55
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,201.52
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,610.54
****Base Wages**	$ 127,897.95
TOTAL Investment In You	$ 163,508.49
TOTAL Paid Time Off Days:	**59 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2393 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

IRMA SCOTT iscott@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 95.32
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,197.84
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 3,974.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,803.28
****Base Wages**	$ 51,949.04
TOTAL Investment In You	$ 82,752.32
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 # 2395

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARY DORSEY

mdorsey@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 106.36
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,229.26
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	$ 31,937.94
****Base Wages**	$ 57,960.66
TOTAL Investment In You	$ 89,898.59
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2401

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DARILYN HARRELL

dharrell@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,458.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,964.25
****Base Wages**	$ 87,388.83
TOTAL Investment In You	$ 128,353.08
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 # 2405

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JANIE WARD

jward@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	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 104.35
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,350.29
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,434.75
****Base Wages**	$ 56,866.58
TOTAL Investment In You	$ 92,301.33
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 # 2407 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MUMTAZ CHAUS mchaus@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	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 111.62
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	$ 4,653.31
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,000.87
****Base Wages**	$ 60,827.52
TOTAL Investment In You	$ 96,828.39
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2417

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHARLOTTE SILVER

csilver@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,136.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,418.16
****Base Wages**	$ 123,408.90
TOTAL Investment In You	$ 157,827.06
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2418

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BARBARA BLACK

bblack@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	$ 109.13
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,143.69
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,549.59
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,988.48
****Base Wages**	$ 59,471.78
TOTAL Investment In You	$ 82,460.25
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 # 2419

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SUSANNE HERTING

sherting@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	$ 9,511.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,017.04
****Base Wages**	$ 104,502.51
TOTAL Investment In You	$ 145,519.55
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2423

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DIONE COLEMAN

dcoleman@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	$ 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	$ 9,906.06
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,784.15
****Base Wages**	$ 176,487.17
TOTAL Investment In You	$ 227,271.32
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2425

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JUDY BUENAVISTA

jubuenavista@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)	$ 12,065.15
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,985.90
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 195,832.88
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2429

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GENNITTA MAYFIELD

gmayfield@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	$ 21,036.60
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)	$ 2,478.76
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,003.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,005.19
****Base Wages**	$ 65,407.26
TOTAL Investment In You	$ 104,412.45
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 # 2431

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FREDERICKA WHITE-SOSO

rwhite@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)	$ 4,322.19
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	$ 37,419.23
****Base Wages**	$ 102,160.86
TOTAL Investment In You	$ 139,580.09
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2435

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

APRIL SURIGAO

asurigao@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)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,055.54
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,367.67
****Base Wages**	$ 66,085.55
TOTAL Investment In You	$ 103,453.23
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 2436

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROBIN GREAR

rgrear@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	$ 106.33
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	$ 4,432.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,725.27
****Base Wages**	$ 57,946.10
TOTAL Investment In You	$ 79,671.37
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2437

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

REBECCA CAMPBELL

rcampbell@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)	$ 200.00
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)	$ 979.43
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	$ 37,367.80
****Base Wages**	$ 50,930.46
TOTAL Investment In You	$ 88,298.26
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2438

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARTIN MORAN

mmoran@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/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	$ 50,630.03
****Base Wages**	$ 165,858.16
TOTAL Investment In You	$ 216,488.19
TOTAL Paid Time Off Days:	**50 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2441

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DZIDRA FULLER

dfuller@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)	$ 4,524.43
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,621.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,445.18
****Base Wages**	$ 156,846.98
TOTAL Investment In You	$ 188,292.16
TOTAL Paid Time Off Days:	**55 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2443

2016

EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELVIA JIMENEZ

eljimenez@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)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,853.37
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,731.46
****Base Wages**	$ 63,442.70
TOTAL Investment In You	$ 109,174.16
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 # 2444

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

THELMA NUNES

tnunes@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	$ 5,964.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,035.99
****Base Wages**	$ 77,962.14
TOTAL Investment In You	$ 115,998.14
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 # 2456

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARY WILLIAMS

marywilliams@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,705.57
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,116.20
****Base Wages**	$ 74,582.56
TOTAL Investment In You	$ 100,698.76
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2464

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KAO CHAO

kchao@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)	$ 5,026.90
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,999.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,307.88
****Base Wages**	$ 65,349.65
TOTAL Investment In You	$ 100,657.53
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 # 2466

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOHANNA VELASCO

jvelasco@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)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,876.20
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,754.29
****Base Wages**	$ 63,741.18
TOTAL Investment In You	$ 109,495.47
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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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 2475

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROMINA LAZARO

rlazaro@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	$ 9.62
Long Term Disability	$ 113.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,643.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,955.73
****Base Wages**	$ 73,772.61
TOTAL Investment In You	$ 111,728.34
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2480

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CLARICE TURNER

cturner@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 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)	$ 3,699.69
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 5,003.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,226.12
****Base Wages**	$ 65,407.26
TOTAL Investment In You	$ 105,633.38
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2484

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAMELA BURKHARDT

PBurkhardt@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	$ 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)	$ 13,620.52
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 9,785.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 54,928.42
****Base Wages**	$ 168,146.78
TOTAL Investment In You	$ 223,075.20
TOTAL Paid Time Off Days:	**59 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2485

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSA LOPEZ

rolopez@alamedahealthsystem.org

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

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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)	$ 3,634.80
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,866.99
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,813.92
****Base Wages**	$ 63,620.75
TOTAL Investment In You	$ 104,434.67
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2486

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ADOLPH MARSTON

amarston@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	$ 108.48
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,522.68
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 21,521.36
****Base Wages**	$ 59,120.05
TOTAL Investment In You	$ 80,641.40
TOTAL Paid Time Off Days:	**56 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2497

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DENISE DIXON

ddixon@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	$ 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)	$ 7,977.15
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,394.21
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,670.51
****Base Wages**	$ 83,584.38
TOTAL Investment In You	$ 123,254.89
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 # 2501

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HELEN WHITE

hwhite@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		$ 1,218.36
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 100.74
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Tax		$ 4,199.73
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 17,655.82
****Base Wages**		$ 54,898.48
TOTAL Investment In You		$ 72,554.30
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 # 2504

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAULETTE CROSSLEY

pcrossley@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	$ 108.61
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,276.42
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 4,527.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,081.16
****Base Wages**	$ 59,187.02
TOTAL Investment In You	$ 91,268.19
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 # 2505

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PATRICIA TAYLOR

ptaylor@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	$ 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	$ 21,445.17
****Base Wages**	$ 54,370.37
TOTAL Investment In You	$ 75,815.54
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2506

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KENNETH TAYLOR

ketaylor@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	$ 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	$ 21,445.17
****Base Wages**	$ 54,370.37
TOTAL Investment In You	$ 75,815.54
TOTAL Paid Time Off Days:	**51 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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

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

Dear Colleague,

It is our pleasure to present you with your Alameda Health System 2016 personalized benefit statement. The total compensation package available to you demonstrates our commitment to our employees and their families. This statement will help you better understand the value of your total compensation package. The income from your paycheck is only one part of your compensation. Your total compensation also includes the pay and benefits we provide in order to enhance your employment experience and enable you to plan for and secure your future.

AHS leaders value the contributions of each of our team members. Over the past several years, we have continued to enhance our salary and benefits package. Your diverse benefits and compensation package includes offerings designed to provide coverage for your present and future health and financial needs. This year's enhancements to the AHS benefits package include a new Whole Life Insurance plan and Long Term Care, as well as a growing number of wellness offerings from our Healthy Me Wellness Program to guide you down the trail towards personal health and future financial stability for you and your family.

The information presented to you in this statement is provided using data as of May 21, 2016 (unless otherwise noted) and may not account for changes made just before printing.

Should you have any questions after reviewing your personalized statement, please contact the Benefits Department at 510-346-7557. We will assist in answering your questions or direct your call to the appropriate department.

I am proud to have served you over the past 9+ years and thank you for your continued commitment and care for your colleagues, our patients, and the communities that we serve.

Jeanette Louden-Corbett
Chief Human Resources Officer

The data contained in this summary is based on active records as of 5/21/16 and is constructed with a combination of actual, average, and projected calculations. This statement of benefits is neither an earnings statement, nor a legal document and is provided for illustrative purposes only.

ALAMEDA HEALTH SYSTEM

Employee ID # 2509

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FREDERICK WARFIELD

fwarfield@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 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)	$ 2,234.25
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Tax	$ 6,369.40
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,550.52
****Base Wages**	$ 83,260.11
TOTAL Investment In You	$ 122,810.63
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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