ALAMEDA HEALTH SYSTEM

Employee ID # 490

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STEPHEN KILGORE

skilgore@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	$ 20,960.42
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 298.74
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 Taxes	$ 9,983.73
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,409.00
****Base Wages**	$ 181,843.58
TOTAL Investment In You	$ 223,252.59

TOTAL Paid Time Off Days: **54 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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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 # 553

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GLENN DAUPHIN

GDauphin@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 522.08
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 9,767.95
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,206.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,795.40
****Base Wages**	$ 128,222.22
TOTAL Investment In You	$ 173,017.63

TOTAL Paid Time Off Days: **54 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 # 804

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SAMBO LY

sly@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 298.74
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,864.66
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,644.04
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,235.49
****Base Wages**	$ 86,850.19
TOTAL Investment In You	$ 119,085.68
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**54 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 891

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JON DICKSON

jdickson@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	$ 82.81
Long Term Care Contribution	$ 440.96
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 Taxes	$ 4,273.42
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,798.54
****Base Wages**	$ 44,689.38
TOTAL Investment In You	$ 69,487.92

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 # 1148

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHERYL BERRY

sberry@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
Long Term Care Contribution	$ 212.42
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,972.66
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,375.91
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,877.88
****Base Wages**	$ 83,345.18
TOTAL Investment In You	$ 109,223.06
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**54 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 1172

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LILLIAN CAMPOS

lcampos@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
Long Term Care Contribution	$ 144.04
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,194.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,250.96
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,901.13
****Base Wages**	$ 68,640.00
TOTAL Investment In You	$ 107,541.13
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**50 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 1295

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MYESHA GRIFFIN

mgriffin@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 156.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,832.87
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,364.19
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,249.09
****Base Wages**	$ 70,120.13
TOTAL Investment In You	$ 118,369.22
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 # 1335 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HAEYOUNG SOHN hsohn@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 284.44
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 11,528.16
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,520.06
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 53,421.97
****Base Wages**	$ 149,866.08
TOTAL Investment In You	$ 203,288.05
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**54 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 1528

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHAREEN CRONIN

scronin@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 149.50
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 15,395.29
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,291.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,264.74
****Base Wages**	$ 203,096.40
TOTAL Investment In You	$ 249,361.14

TOTAL Paid Time Off Days: **54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1848

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHARYN ENQUIST

SEnquist@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	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 381.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 12,558.27
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,737.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,619.15
****Base Wages**	$ 164,850.19
TOTAL Investment In You	$ 213,469.34

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 # 1915

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JODY COPELAND

JCopeland@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 381.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 13,123.36
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,857.31
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 55,451.66
****Base Wages**	$ 173,124.85
TOTAL Investment In You	$ 228,576.51

TOTAL Paid Time Off Days: **54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 1964

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROBERT CROWDER

rcrowder@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 338.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,940.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,071.76
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,667.17
****Base Wages**	$ 105,513.20
TOTAL Investment In You	$ 135,180.37

TOTAL Paid Time Off Days: **54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2066

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELISETE MELENDRES

emelendres@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,960.42
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 212.42
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,141.31
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,443.04
****Base Wages**	$ 93,350.40
TOTAL Investment In You	$ 132,793.44

TOTAL Paid Time Off Days: **54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2106

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SUSY MANDELL

smandell@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 163.80
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 13,936.46
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,909.95
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 56,099.52
****Base Wages**	$ 176,755.07
TOTAL Investment In You	$ 232,854.59

TOTAL Paid Time Off Days: **54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2129

2016 NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JACOB EAPEN jeapen@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 19 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 478.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 21,805.45
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 11,518.07
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 65,325.21
****Base Wages**	$ 287,660.05
TOTAL Investment In You	$ 352,985.26

TOTAL Paid Time Off Days: **54 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 2180

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JASON POKORNY

JPokorny@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 131.30
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,940.21
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,550.72
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 52,517.74
****Base Wages**	$ 85,630.27
TOTAL Investment In You	$ 138,148.01
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 # 2265

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIE WILSON

mwilson@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
Long Term Care Contribution	$ 149.50
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,051.52
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,290.33
****Base Wages**	$ 79,104.90
TOTAL Investment In You	$ 117,395.23

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 # 2457

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RENITA MOORE

rmoore@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	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 212.42
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,237.29
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,161.67
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,260.79
****Base Wages**	$ 93,616.64
TOTAL Investment In You	$ 127,877.43
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**54 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 2551

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DENISE JOHNSON

djohnson@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
Long Term Care Contribution	$ 298.74
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 7,306.94
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,225.07
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,920.06
****Base Wages**	$ 94,445.31
TOTAL Investment In You	$ 141,365.37
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**54 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 2837

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RAMNEET KAUR

rkaur@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
Long Term Care Contribution	$ 156.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 8,124.56
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,119.29
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,489.68
****Base Wages**	$ 106,134.50
TOTAL Investment In You	$ 154,624.17

TOTAL Paid Time Off Days: **54 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 # 2908

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RUBEN BAISA

rbaisa@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 122.46
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,669.60
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,107.44
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,198.65
****Base Wages**	$ 121,409.60
TOTAL Investment In You	$ 160,608.25

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 # 2937

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SIK MOK

SMok@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 741.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 7,206.56
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,059.65
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,530.50
****Base Wages**	$ 92,282.94
TOTAL Investment In You	$ 138,813.44

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 # 3128

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

THO VO

cvo@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
Long Term Care Contribution	$ 131.30
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 9,820.84
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,153.08
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 60,000.73
****Base Wages**	$ 124,557.06
TOTAL Investment In You	$ 184,557.78
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**54 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 3146

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

THANONSAK VILAYPHANH

tvilayphan@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,320.60
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 107.90
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,258.39
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,101.18
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,916.96
****Base Wages**	$ 105,897.79
TOTAL Investment In You	$ 134,814.75

TOTAL Paid Time Off Days: **54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 3242

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EDWARD CAMPODONICO ecampodonico@alamedahealthsystem.or

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 440.96
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 8,061.73
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,992.17
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,776.59
****Base Wages**	$ 104,472.78
TOTAL Investment In You	$ 146,249.37

TOTAL Paid Time Off Days: **54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 3319

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MENBERE TEQUAME

mtequame@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
Long Term Care Contribution	$ 144.04
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 16,481.59
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,078.24
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 52,003.02
****Base Wages**	$ 188,361.06
TOTAL Investment In You	$ 240,364.07

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 # 3446

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANNETTE JOHNSON

agrandlich@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 115.18
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 9,943.06
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,034.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 58,025.27
****Base Wages**	$ 105,023.57
TOTAL Investment In You	$ 163,048.84

TOTAL Paid Time Off Days: **54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 3908

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PORCIA MOSES

pmoses@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 338.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 6,507.95
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,800.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,946.12
****Base Wages**	$ 169,206.75
TOTAL Investment In You	$ 211,152.87

TOTAL Paid Time Off Days: **54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 4243

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STEFANY KAPLANES

skaplanes@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
Long Term Care Contribution	$ 127.92
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 Taxes	$ 8,353.51
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,376.94
****Base Wages**	$ 109,196.26
TOTAL Investment In You	$ 158,573.20

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 # 4307

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KENNETH KWAN

kkwan@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 127.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 8,002.56
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,958.55
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,611.80
****Base Wages**	$ 104,033.28
TOTAL Investment In You	$ 151,645.08

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 # 4369

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FLORENCIA WOODLEY

fwoodley@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,200.66
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 115.18
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,749.67
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,549.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,744.30
****Base Wages**	$ 72,547.70
TOTAL Investment In You	$ 113,291.99

TOTAL Paid Time Off Days: **54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 4633

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSEMERY WILLIAMS

rosewilliams@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 440.96
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 5,736.61
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,509.70
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 56,582.78
****Base Wages**	$ 149,151.81
TOTAL Investment In You	$ 205,734.59
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**54 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 4727

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

UPASNA MINI SWIFT

mswift@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 1,131.00
Long Term Disability	$ 1,427.33
Long Term Care Contribution	$ 149.50
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 19,043.98
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,954.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 64,088.44
****Base Wages**	$ 248,779.23
TOTAL Investment In You	$ 312,867.68

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 # 4772

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JAN ROBERTSON

jrobertson@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
Long Term Care Contribution	$ 244.92
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 Taxes	$ 8,107.02
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,247.45
****Base Wages**	$ 105,974.13
TOTAL Investment In You	$ 155,221.58

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 4807

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

APRIL BASS

abass@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 189.02
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 6,464.30
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,784.04
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,754.25
****Base Wages**	$ 168,071.90
TOTAL Investment In You	$ 201,826.16
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**54 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 4840

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WILBUR CHUNG

wchung@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 179.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 6,944.43
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,661.31
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 55,681.17
****Base Wages**	$ 100,147.84
TOTAL Investment In You	$ 155,829.01
TOTAL Paid Time Off Days:	**54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 4870

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DIANA THAMRIN

dthamrin@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	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 104.52
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 Taxes	$ 9,979.20
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,400.61
****Base Wages**	$ 181,530.75
TOTAL Investment In You	$ 208,931.36
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**54 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 5062

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JESSICA CHING

jching@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 163.80
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 7,096.08
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,186.17
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,874.10
****Base Wages**	$ 107,008.72
TOTAL Investment In You	$ 142,882.82
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**54 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 5084

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHRISTOPHER LYN

clyn@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		$ 27.04
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 298.74
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 6,257.74
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 7,156.80
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 27,842.17
****Base Wages**	$ 93,552.99
TOTAL Investment In You	$ 121,395.17

TOTAL Paid Time Off Days: **54 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 # 6144

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EVAN SEEVAK

eseevak@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
Long Term Care Contribution	$ 179.92
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 Taxes	$ 11,582.67
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 52,658.10
****Base Wages**	$ 233,692.16
TOTAL Investment In You	$ 286,350.26
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**59 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 6178

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JAMES SONDECKER

jsondecker@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		$ 346.58
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 570.70
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 Taxes		$ 9,364.58
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 22,549.67
****Base Wages**	$ 139,143.47
TOTAL Investment In You	$ 161,693.14

TOTAL Paid Time Off Days: **49 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 # 6210

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JEANETTE LOUDEN CORBETT

jlouden@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	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 4,059.12
Long Term Disability	$ 1,427.33
Long Term Care Contribution	$ 741.52
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 Taxes	$ 11,947.67
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,557.97
****Base Wages**	$ 317,287.57
TOTAL Investment In You	$ 366,845.54

TOTAL Paid Time Off Days: **54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 6362

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HEATHER FINE

hmacdonald@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 144.04
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,266.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,306.17
****Base Wages**	$ 132,387.42
TOTAL Investment In You	$ 182,693.59

TOTAL Paid Time Off Days: **54 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 # 6502

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FEUY SAECHAO

fsaechao@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 104.52
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 Taxes	$ 9,398.64
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,524.17
****Base Wages**	$ 141,492.62
TOTAL Investment In You	$ 168,016.80

TOTAL Paid Time Off Days: **49 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 # 6516

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHAMAYNE PIERCE

chpierce@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
Long Term Care Contribution	$ 172.90
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,330.77
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,104.40
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 52,503.58
****Base Wages**	$ 121,199.94
TOTAL Investment In You	$ 173,703.52
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 6681

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RAYMOND MCKINNEY

gmckinney@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
Long Term Care Contribution	$ 360.10
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 8,516.85
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,130.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 58,903.27
****Base Wages**	$ 123,021.18
TOTAL Investment In You	$ 181,924.45
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 6695

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHERIA JOHNSON

spjohnson@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
Long Term Care Contribution	$ 179.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 7,730.22
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,883.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,110.59
****Base Wages**	$ 116,124.94
TOTAL Investment In You	$ 150,235.53
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 6703

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

IESHA BRANDON

ibrandon@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	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 115.18
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 5,497.88
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,174.09
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 42,913.68
****Base Wages**	$ 80,707.12
TOTAL Investment In You	$ 123,620.80
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 6738

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MEGAN BOWER

mbower@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 149.50
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 375.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,453.34
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 19,245.65
****Base Wages**	$ 145,265.12
TOTAL Investment In You	$ 164,510.77

TOTAL Paid Time Off Days: **44 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 # 6797

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROBIN ECKER

recker@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 570.70
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,032.32
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,031.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,157.07
****Base Wages**	$ 78,840.32
TOTAL Investment In You	$ 119,997.39
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6822

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHAMON BLUE

sblue@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 115.18
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,632.48
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,349.23
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,396.04
****Base Wages**	$ 69,924.61
TOTAL Investment In You	$ 105,320.65
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6823

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOANNE DE LUCCA

jdelucca@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 360.10
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,797.08
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,585.23
****Base Wages**	$ 168,971.09
TOTAL Investment In You	$ 199,556.32
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6833

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GREGORY STEPHENS

gstephens@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
Long Term Care Contribution	$ 262.86
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 6,305.76
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,102.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 56,566.71
****Base Wages**	$ 121,074.30
TOTAL Investment In You	$ 177,641.01
TOTAL Paid Time Off Days:	**49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 6853

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAULA PECK

ppeck@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 360.10
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 9,724.40
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,546.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,059.21
****Base Wages**	$ 151,700.64
TOTAL Investment In You	$ 191,759.85
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 6879

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARY NAHM

mnahm@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
Long Term Care Contribution	$ 144.04
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,168.03
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,611.22
****Base Wages**	$ 80,627.87
TOTAL Investment In You	$ 112,239.09
TOTAL Paid Time Off Days:	**49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 6925

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHANDONNA STEWART

sstewart@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 172.90
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 15,428.40
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,490.47
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 56,614.54
****Base Wages**	$ 147,825.60
TOTAL Investment In You	$ 204,440.14

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 6938

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KARINA POWELL-HAL

kpowell@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 163.80
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,409.40
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,506.38
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 53,975.09
****Base Wages**	$ 148,922.59
TOTAL Investment In You	$ 202,897.68

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 7008

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RAYMOND FISCHER

rfischer@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 741.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 7,282.89
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,136.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,107.50
****Base Wages**	$ 106,355.81
TOTAL Investment In You	$ 153,463.31
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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

Dear Colleague,

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 7026

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KRISTA YOSHINO

kyoshino@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	$ 17,887.48
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 244.92
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 Taxes	$ 6,850.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,112.04
****Base Wages**	$ 89,552.32
TOTAL Investment In You	$ 125,664.36

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 7028

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KAREN SKILLMAN

kskillman@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
Long Term Care Contribution	$ 262.86
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 8,953.56
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,222.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 59,334.20
****Base Wages**	$ 129,329.20
TOTAL Investment In You	$ 188,663.40
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 7029

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VALERIE HEUER

vheuer@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 478.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 10,034.09
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,509.52
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 52,111.84
****Base Wages**	$ 149,139.54
TOTAL Investment In You	$ 201,251.38
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 7049

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HOWARD LANDA

hlanda@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 14 % of your income.

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 2,811.12
Long Term Disability		$ 1,427.33
Long Term Care Contribution		$ 338.52
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 24,999.84
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 12,583.08
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 54,527.26
****Base Wages**	$ 324,997.92
TOTAL Investment In You	$ 379,525.18

TOTAL Paid Time Off Days: **54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 7053

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MANUEL NEVAREZ

mnevarez@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 20,960.42
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 298.74
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 7,620.17
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,558.78
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,567.00
****Base Wages**	$ 111,879.46
TOTAL Investment In You	$ 160,446.45
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 8006

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LINDA BULMAN

lbulman@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	$ 19,097.26
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 156.52
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 Taxes	$ 9,575.61
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,958.28
****Base Wages**	$ 92,218.34
TOTAL Investment In You	$ 132,176.62

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8018

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALICIA REED

areed@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 115.18
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 7,319.88
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,953.67
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,816.78
****Base Wages**	$ 90,897.66
TOTAL Investment In You	$ 125,714.45
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8035 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GUY QVISTGAARD gqvistgaard@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	$ 3,783.00
Long Term Disability	$ 1,427.33
Long Term Care Contribution	$ 478.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 39,616.06
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 11,094.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 88,348.31
****Base Wages**	$ 258,422.74
TOTAL Investment In You	$ 346,771.05

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 # 8041

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FRANCINE ALCORN

falcorn@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
Long Term Care Contribution	$ 244.92
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 Taxes	$ 7,564.31
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,704.74
****Base Wages**	$ 98,879.87
TOTAL Investment In You	$ 147,584.61
TOTAL Paid Time Off Days:	**49 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 # 8073

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KIM PHU

kphu@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 107.90
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,320.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,441.27
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,297.22
****Base Wages**	$ 71,127.68
TOTAL Investment In You	$ 100,424.90
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 8084

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOE WALKER

jwalker@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	$ 3,783.00
Long Term Disability	$ 1,427.33
Long Term Care Contribution	$ 381.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 23,371.20
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 12,241.97
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 72,587.51
****Base Wages**	$ 270,067.20
TOTAL Investment In You	$ 342,654.71

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8102

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PATRICIA LANG

plang@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 156.52
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 Taxes	$ 8,841.73
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,426.30
****Base Wages**	$ 115,578.11
TOTAL Investment In You	$ 145,004.41

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8113 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JUDITH LINN jlinn@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	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 795.60
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,398.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 42,717.27
****Base Wages**	$ 210,475.62
TOTAL Investment In You	$ 253,192.88
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 8136

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

COLLEEN CALLAHAN

ccallahan@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 163.80
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 4,880.08
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,471.93
****Base Wages**	$ 63,791.94
TOTAL Investment In You	$ 89,263.87

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8142

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PRIYA PATEL

prpatel@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 131.30
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,703.42
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,915.76
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,067.37
****Base Wages**	$ 177,155.89
TOTAL Investment In You	$ 206,223.26
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8290

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAURA CRUDO

lcrudo@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 102.70
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 6,298.88
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,082.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 55,379.97
****Base Wages**	$ 105,658.59
TOTAL Investment In You	$ 161,038.56
TOTAL Paid Time Off Days:	**49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8331

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HOLLY GARCIA

hgarcia@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,812.98
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 131.30
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 Taxes	$ 9,701.99
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,132.44
****Base Wages**	$ 162,413.06
TOTAL Investment In You	$ 197,545.50

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8351

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAFAYETTE BICKHAM

lbickham@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	$ 0.00
Long Term Disability	$ 0.00
Long Term Care Contribution	$ 172.90
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 4,571.01
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,498.98
****Base Wages**	$ 59,751.74
TOTAL Investment In You	$ 105,250.72

TOTAL Paid Time Off Days: **43 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8387

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RICHARD KIBLER

rkibler@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		$ 586.04
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 3,783.00
Long Term Disability		$ 1,427.33
Long Term Care Contribution		$ 410.28
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 12,591.13
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 10,089.63
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 41,014.78
****Base Wages**	$ 189,146.67
TOTAL Investment In You	$ 230,161.45

TOTAL Paid Time Off Days: **54 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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

Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 8410

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KELLY PAIGE CARLSON

kpcarlson@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		$ 642.46
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 189.02
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 9,223.05
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 22,322.34
****Base Wages**	$ 129,382.66
TOTAL Investment In You	$ 151,704.99

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8413

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HEATHER DUKE

hduke@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	$ 20,960.42
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 144.04
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,480.71
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 42,714.06
****Base Wages**	$ 216,117.62
TOTAL Investment In You	$ 258,831.67

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8416

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ITTA ASWAD

iaswad@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	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 102.70
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 8,190.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,366.21
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,785.44
****Base Wages**	$ 139,256.00
TOTAL Investment In You	$ 188,041.44

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8478

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIA GUERRA

mguerra@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 109.19
Long Term Care Contribution	$ 102.70
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 Taxes	$ 4,507.95
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,275.85
****Base Wages**	$ 58,927.44
TOTAL Investment In You	$ 95,203.29

TOTAL Paid Time Off Days: **40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8489

2016 EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARK MAUS

mmaus@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
Long Term Care Contribution	$ 316.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,857.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,490.89
****Base Wages**	$ 242,091.20
TOTAL Investment In You	$ 270,582.09

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8547

2016
HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STARLYN JAMISON

sjamison@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 27 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 118.82
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 5,288.15
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,785.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,620.92
****Base Wages**	$ 88,704.51
TOTAL Investment In You	$ 121,325.43
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 8548

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LANCE STONE

lrstone@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	$ 3,783.00
Long Term Disability	$ 1,427.33
Long Term Care Contribution	$ 381.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 36,745.50
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 11,307.76
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 85,027.61
****Base Wages**	$ 273,156.00
TOTAL Investment In You	$ 358,183.61

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8550

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARGARET LOOMIS

mloomis@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 381.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,426.79
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,331.24
****Base Wages**	$ 143,433.68
TOTAL Investment In You	$ 184,764.92

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8561

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ADAM COLE

adcole@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 102.70
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,986.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,635.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,151.86
****Base Wages**	$ 73,661.54
TOTAL Investment In You	$ 102,813.39
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 8589

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RAYMOND YAMIN

tyamin@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 14 % of your income.

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 440.96
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 Taxes		$ 9,278.86
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 22,227.63
****Base Wages**	$ 133,231.90
TOTAL Investment In You	$ 155,459.54

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8624

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KERIN BASHAW

kbashaw@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	$ 1,778.92
Long Term Disability	$ 1,427.33
Long Term Care Contribution	$ 212.42
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 12,874.15
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,478.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 67,526.22
****Base Wages**	$ 215,953.50
TOTAL Investment In You	$ 283,479.72
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 8636

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PHUONG LE

pxle@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 144.04
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,920.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,523.92
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,016.01
****Base Wages**	$ 85,280.00
TOTAL Investment In You	$ 117,296.01
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 8666

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELAINE KAVVADIAS

ekavvadias@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 316.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 10,063.42
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,794.68
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 51,697.55
****Base Wages**	$ 168,805.73
TOTAL Investment In You	$ 220,503.28
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 8667

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

QUINN CORDAE

qcordae@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
Long Term Care Contribution	$ 118.82
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 7,748.49
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,382.40
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 58,145.22
****Base Wages**	$ 140,372.54
TOTAL Investment In You	$ 198,517.77

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8668

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANN METZGER

ametzger@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 316.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 10,031.63
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,868.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 51,739.36
****Base Wages**	$ 173,881.55
TOTAL Investment In You	$ 225,620.91
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8674

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANGEL AZIZIAN

aazizian@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 360.10
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,316.60
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,596.72
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,796.19
****Base Wages**	$ 86,231.60
TOTAL Investment In You	$ 128,027.79
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 8706

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WALLETTE SCHIERBURG

lschierburg@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 298.74
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 Taxes	$ 9,652.49
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,846.74
****Base Wages**	$ 158,999.36
TOTAL Investment In You	$ 209,846.10

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8707

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JERRI RANDRUP

jrandrup@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 381.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 10,367.59
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,944.31
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,121.63
****Base Wages**	$ 179,125.02
TOTAL Investment In You	$ 220,246.66

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8717

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JEREMY SHARRARD

jsharrard@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 104.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 5,530.46
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,884.38
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,466.23
****Base Wages**	$ 103,063.79
TOTAL Investment In You	$ 147,530.02

TOTAL Paid Time Off Days: **44 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 # 8719

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LENNIE WATSON

lwatson@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
Long Term Care Contribution	$ 316.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,256.07
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,889.64
****Base Wages**	$ 68,706.77
TOTAL Investment In You	$ 91,596.41

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8728

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TONI SICOLA

tsicola@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
Long Term Care Contribution	$ 102.70
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 Taxes	$ 7,303.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,833.85
****Base Wages**	$ 95,465.34
TOTAL Investment In You	$ 123,299.19

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8734 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RACHEL ODES rodes@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 200.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 107.90
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,315.15
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,626.64
****Base Wages**	$ 135,734.56
TOTAL Investment In You	$ 162,361.20

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

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ALAMEDA HEALTH SYSTEM

Employee ID # 8750

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOHN CHAPMAN

jtchapman@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 1,131.00
Long Term Disability	$ 1,427.33
Long Term Care Contribution	$ 179.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 17,836.53
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 11,189.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 72,519.35
****Base Wages**	$ 264,999.90
TOTAL Investment In You	$ 337,519.26
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 8760

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VERRILIEN CLERVE

vclerve@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
Long Term Care Contribution	$ 212.42
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 20,000.10
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,803.35
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 62,105.18
****Base Wages**	$ 169,403.52
TOTAL Investment In You	$ 231,508.70
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 8781

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

OLIVIA KRIEBL

okriebl@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 316.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,630.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,079.60
****Base Wages**	$ 157,499.89
TOTAL Investment In You	$ 187,579.49

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8790

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TALEYA HARRIS

taharris@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	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 102.70
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 Taxes	$ 9,192.95
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,723.02
****Base Wages**	$ 127,306.82
TOTAL Investment In You	$ 161,029.83
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 8796

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SARA MCELFRESH

smcelfresh@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	$ 27.04
Long Term Disability	$ 105.11
Long Term Care Contribution	$ 102.70
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,315.52
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 4,382.20
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,109.02
****Base Wages**	$ 57,283.62
TOTAL Investment In You	$ 82,392.64
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 8814

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JASON SHACKELFORD

jshackelford@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 111.54
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,967.99
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,219.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,320.47
****Base Wages**	$ 129,167.79
TOTAL Investment In You	$ 160,488.26
TOTAL Paid Time Off Days:	**44 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year	

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 8827

2016
NEWARK WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHELLE BINAISA

mbinaisa@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
Long Term Care Contribution	$ 111.54
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 603.92
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,168.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,779.40
****Base Wages**	$ 125,615.98
TOTAL Investment In You	$ 176,395.39
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 8830

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DOUGLAS WONG-SING dwongsing@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
Long Term Care Contribution	$ 284.44
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,197.59
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,571.34
****Base Wages**	$ 107,158.06
TOTAL Investment In You	$ 147,729.41

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8859

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CRAIG LAFARGUE

clafargue@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental		$ 1,218.36
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 522.08
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 9,735.26
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 23,743.51
****Base Wages**	$ 164,707.71
TOTAL Investment In You	$ 188,451.22

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8869

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOHN VUONG

jhvuong@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 122.46
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 6,120.57
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,192.96
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,864.04
****Base Wages**	$ 127,307.86
TOTAL Investment In You	$ 163,171.90
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 8871

2016
HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SATIRA DALTON GIOVANNETTI sdalton@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 136.76
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 10,459.16
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,036.07
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 52,154.76
****Base Wages**	$ 185,452.80
TOTAL Investment In You	$ 237,607.56
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 8878

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALFIO LEVY

alevy@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 149.50
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,276.87
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 18,694.18
****Base Wages**	$ 133,094.42
TOTAL Investment In You	$ 151,788.60

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8896

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TEC TRAN

tectran@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 144.04
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 6,786.56
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 9,156.60
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 28,595.01
****Base Wages**	$ 124,800.00
TOTAL Investment In You	$ 153,395.01

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8899

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JAMES JACKSON

jajackson@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	$ 1,778.92
Long Term Disability	$ 1,427.33
Long Term Care Contribution	$ 212.42
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 17,636.96
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 11,142.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 64,146.84
****Base Wages**	$ 261,747.20
TOTAL Investment In You	$ 325,894.04
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8907

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AUDREY KIMTENG

akimteng@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 112.93
Long Term Care Contribution	$ 102.70
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 Taxes	$ 4,776.70
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,794.24
****Base Wages**	$ 62,440.56
TOTAL Investment In You	$ 107,234.80

TOTAL Paid Time Off Days: **40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 8937

2016 EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RENE MACIAS

rmacias@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
Long Term Care Contribution	$ 122.46
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 7,498.44
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,170.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 57,687.22
****Base Wages**	$ 125,780.30
TOTAL Investment In You	$ 183,467.53
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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

Dear Colleague,

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

Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8947 JOHN GEORGE PSYCHIATRIC HOSP

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

REBECCA ASTRACHAN rastrachan@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 102.70
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 Taxes	$ 7,666.83
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 33,068.68
****Base Wages**	$ 100,220.02
TOTAL Investment In You	$ 133,288.70

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

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8949

HAYWARD WELLNESS - WINTON

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STEVEN CHEN

stevenchen@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	$ 17,887.48
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 144.04
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,741.70
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,902.11
****Base Wages**	$ 234,116.90
TOTAL Investment In You	$ 274,019.00

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 8991

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARITZA ZAMORA

mzamora@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	$ 106.30
Long Term Care Contribution	$ 136.76
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,982.60
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,617.80
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 51,608.15
****Base Wages**	$ 86,507.20
TOTAL Investment In You	$ 138,115.35
TOTAL Paid Time Off Days:	**44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9050

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHANNON ENG

seng@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
Long Term Care Contribution	$ 111.54
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,290.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,829.72
****Base Wages**	$ 134,008.99
TOTAL Investment In You	$ 163,838.71

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9068

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAVID MOSKOWITZ

dmoskowitz@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	*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
Long Term Care Contribution		$ 118.82
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 10,080.70
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 24,328.41
****Base Wages**		$ 188,531.20
TOTAL Investment In You		$ 212,859.61

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9069

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANTHONY MOCK

tmock@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	$ 22,616.36
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 3,783.00
Long Term Disability	$ 1,193.80
Long Term Care Contribution	$ 522.08
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 9,161.05
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,109.97
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 58,374.71
****Base Wages**	$ 152,439.87
TOTAL Investment In You	$ 210,814.58
TOTAL Paid Time Off Days:	**49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9157

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DOMINIC SAVANT

dsavant@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
Long Term Care Contribution	$ 244.92
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 Taxes	$ 7,535.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,869.66
****Base Wages**	$ 98,502.35
TOTAL Investment In You	$ 138,372.01

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9175

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ASHLEY BITAR

abitar@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
Long Term Care Contribution	$ 107.90
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,794.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,330.27
****Base Wages**	$ 75,742.78
TOTAL Investment In You	$ 102,073.06
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 9176

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAIA WHITE

mawhite@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
Long Term Care Contribution	$ 410.28
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,304.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,142.83
****Base Wages**	$ 134,999.90
TOTAL Investment In You	$ 165,142.73

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9218

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SUKARI DIXON

sdixon@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	$ 98.12
Long Term Care Contribution	$ 107.90
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 4,293.06
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,796.31
****Base Wages**	$ 56,118.40
TOTAL Investment In You	$ 80,914.71

TOTAL Paid Time Off Days: **40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9248

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GINGER REDING

greding@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
Long Term Care Contribution	$ 338.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 7,525.20
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,238.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 57,997.56
****Base Wages**	$ 130,436.80
TOTAL Investment In You	$ 188,434.36
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 9372

2016

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TOMAS ROSAL

trosal@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 570.70
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 Taxes	$ 8,372.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,448.63
****Base Wages**	$ 98,500.90
TOTAL Investment In You	$ 138,949.52

TOTAL Paid Time Off Days: **25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9457

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALTINO MCKELVEY

amckelvey@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
Long Term Care Contribution	$ 144.04
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,634.75
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,095.68
****Base Wages**	$ 157,775.90
TOTAL Investment In You	$ 184,871.58

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9458

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PATRICIA MATHEWS

pmathews@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 741.52
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 Taxes	$ 6,718.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,776.41
****Base Wages**	$ 87,816.98
TOTAL Investment In You	$ 112,593.38

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9470

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LESLIE WALLACE

lwallace@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	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 110.55
Long Term Care Contribution		$ 144.04
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 4,608.69
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 17,240.26
****Base Wages**		$ 60,244.29
TOTAL Investment In You		$ 77,484.55

TOTAL Paid Time Off Days: **40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9483

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AMY SPLITTER-HUBBARD

asplitter@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
Long Term Care Contribution	$ 156.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 12,280.77
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,423.61
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 63,756.41
****Base Wages**	$ 212,179.97
TOTAL Investment In You	$ 275,936.38

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9504

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELAINE ELLEFSEN

eellefsen@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Long Term Care Contribution	$ 179.92
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 Taxes	$ 5,386.99
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,103.36
****Base Wages**	$ 70,418.19
TOTAL Investment In You	$ 115,521.55
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**40 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 9505

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RYAN NATHAN

rnathan@alamedahealthsystem.org

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

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ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 262.86
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 Taxes	$ 6,980.15
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,671.06
****Base Wages**	$ 91,243.78
TOTAL Investment In You	$ 118,914.83

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9509

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JEKATERINA OSIPOVA

kosipova@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 131.30
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 Taxes	$ 9,580.05
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,157.94
****Base Wages**	$ 154,003.20
TOTAL Investment In You	$ 195,161.14

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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

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

Dear Colleague,

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

Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 9567

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CAROL THOMPSON

carthompson@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
Long Term Care Contribution	$ 741.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,653.16
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,480.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,285.56
****Base Wages**	$ 71,637.28
TOTAL Investment In You	$ 99,922.84

TOTAL Paid Time Off Days: **40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9599

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NICOLETTE BOUDREAUX

nboudreaux@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 102.70
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 Taxes	$ 4,793.71
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,324.46
****Base Wages**	$ 62,662.91
TOTAL Investment In You	$ 87,987.37

TOTAL Paid Time Off Days: **44 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 # 9703

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GILBERT HARDING

gharding@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.00
Long Term Disability	$ 0.00
Long Term Care Contribution	$ 338.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 9,729.99
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,781.21
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,137.33
****Base Wages**	$ 167,876.59
TOTAL Investment In You	$ 208,013.92

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9707

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CECILIE ROSE

crose@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	$ 22,616.36
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 189.02
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,006.63
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,940.90
****Base Wages**	$ 91,589.89
TOTAL Investment In You	$ 132,530.78

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9738

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANTHONY REDMOND

tredmond@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	$ 686.92
Long Term Disability	$ 1,427.33
Long Term Care Contribution	$ 163.80
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 11,432.93
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,220.48
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 64,686.53
****Base Wages**	$ 198,170.75
TOTAL Investment In You	$ 262,857.28

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9742

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JORGE KIM

jokim@alamedahealthsystem.org

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

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ALAMEDA'S INVESTMENT IN YOU

Medical		$ 20,960.42
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 111.54
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 17,113.84
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 10,931.40
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 58,625.01
****Base Wages**	$ 247,199.89
TOTAL Investment In You	$ 305,824.90

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9752

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KEITH LAW

klaw@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 316.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 9,879.86
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,056.91
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 58,148.96
****Base Wages**	$ 92,247.17
TOTAL Investment In You	$ 150,396.13
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 9763

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RESHEA HOLMAN

rholman@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	$ 686.92
Long Term Disability	$ 1,427.33
Long Term Care Contribution	$ 144.04
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 13,281.70
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,577.45
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 57,499.78
****Base Wages**	$ 222,789.84
TOTAL Investment In You	$ 280,289.62
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9770

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHRISTINE TABET

ctabet@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 360.10
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 6,249.22
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 19,117.13
****Base Wages**		$ 81,689.09
TOTAL Investment In You		$ 100,806.21

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 9780

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PRISCILLA HOOD

phood@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		$ 642.46
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 440.96
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 Taxes		$ 9,143.33
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 22,494.56
****Base Wages**	$ 123,884.80
TOTAL Investment In You	$ 146,379.36

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9784

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOHN WITT

jowitt@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	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 172.90
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,778.41
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,204.10
****Base Wages**	$ 167,683.78
TOTAL Investment In You	$ 217,887.88
TOTAL Paid Time Off Days:	**44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9792

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRENDA TAYLOR

brtaylor@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 118.82
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,866.72
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,289.95
****Base Wages**	$ 173,773.81
TOTAL Investment In You	$ 214,063.76
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 9797

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DIPANKAR GHOSH

dipghosh@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		$ 20,960.42
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 156.52
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 Taxes		$ 10,334.00
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 40,958.75
****Base Wages**		$ 205,999.87
TOTAL Investment In You		$ 246,958.62

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9798

2016
HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JADE GRAFFORT

jgraffort@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 39 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 14,154.66
Dental	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 54.05
Long Term Care Contribution	$ 102.70
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,502.72
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 4,800.51
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,337.66
****Base Wages**	$ 50,201.38
TOTAL Investment In You	$ 82,539.05

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

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ALAMEDA HEALTH SYSTEM

Employee ID # 9805

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAVID GRAVENDER

dgravender@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	$ 12,641.20
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 2,811.12
Long Term Disability	$ 1,427.33
Long Term Care Contribution	$ 338.52
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 Taxes	$ 11,773.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 39,337.74
****Base Wages**	$ 305,299.28
TOTAL Investment In You	$ 344,637.02

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9809

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHAUNT AZIZIAN

sazizian@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 97.18
Long Term Care Contribution	$ 102.70
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 Taxes	$ 4,909.65
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,518.90
****Base Wages**	$ 64,178.40
TOTAL Investment In You	$ 100,697.30

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9813

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TANIA MONTOYA MENDOZA

tmontoya@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	$ 13,520.52
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 102.70
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 Taxes	$ 6,325.74
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,435.13
****Base Wages**	$ 74,420.42
TOTAL Investment In You	$ 104,855.55

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9818

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHERIE HOLT

cholt@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 316.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,979.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,818.45
****Base Wages**	$ 91,228.80
TOTAL Investment In You	$ 130,047.25

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9832

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DESIREE DOMINGO

DDomingo@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 127.92
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 Taxes	$ 9,276.08
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,299.51
****Base Wages**	$ 133,040.13
TOTAL Investment In You	$ 183,339.64

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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

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

Dear Colleague,

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9856

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EDNA BAUTISTA

EBautista@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
Long Term Care Contribution	$ 959.40
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,099.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,563.88
****Base Wages**	$ 108,752.90
TOTAL Investment In You	$ 150,316.78

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9858

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GABRIELA TATRANSKA

GTatranska@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 741.52
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 Taxes	$ 9,260.31
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,412.46
****Base Wages**	$ 131,952.29
TOTAL Investment In You	$ 162,364.75

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9865

2016

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

REKHA DAVE

ReDave@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 666.12
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,362.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,906.46
****Base Wages**	$ 87,448.36
TOTAL Investment In You	$ 137,354.82

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9870

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JUDY HEINEMANN

JHeinemann@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 410.28
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,581.65
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,514.70
****Base Wages**	$ 154,113.86
TOTAL Investment In You	$ 195,628.56

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 9877

2016

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SAMIR SYRIANI

SSyriani@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 298.74
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 Taxes	$ 9,260.31
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,437.14
****Base Wages**	$ 131,952.29
TOTAL Investment In You	$ 182,389.43

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9888

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ARIEL MASANA

AMasana@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.37
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 144.04
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,452.47
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,465.35
****Base Wages**	$ 130,684.32
TOTAL Investment In You	$ 181,149.67

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9890

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSE DEL ROSARIO

RDelRosario@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 741.52
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 Taxes	$ 9,682.15
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,946.44
****Base Wages**	$ 161,045.04
TOTAL Investment In You	$ 202,991.48

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9891

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GAIL MONIZ

GMoniz@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
Long Term Care Contribution	$ 360.10
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,914.17
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,260.80
****Base Wages**	$ 116,525.14
TOTAL Investment In You	$ 146,785.94

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9899

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TERESA HERNANDEZ

tehernandez@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
Long Term Care Contribution	$ 298.74
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 Taxes	$ 8,991.20
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,700.57
****Base Wages**	$ 117,532.06
TOTAL Investment In You	$ 147,232.64

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 9924

2016

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARJORIE FERRARI

MFerrari@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 410.28
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,257.52
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,190.57
****Base Wages**	$ 68,725.70
TOTAL Investment In You	$ 105,916.26

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9942

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOYCE MANIWA

JManiwa@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 666.12
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 5,891.60
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,568.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,631.20
****Base Wages**	$ 137,863.44
TOTAL Investment In You	$ 185,494.64

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9958

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MISAKO FUKUI

MFukui@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
Long Term Care Contribution	$ 666.12
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,697.17
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,260.31
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,034.23
****Base Wages**	$ 131,952.29
TOTAL Investment In You	$ 165,986.52
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**35 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9959

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EMIL ARETON

EAreton@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
Long Term Care Contribution	$ 617.50
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,568.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 51,063.72
****Base Wages**	$ 153,181.60
TOTAL Investment In You	$ 204,245.32

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 9992

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FAY CHIN

FaChin@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
Long Term Care Contribution	$ 666.12
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 6,770.98
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,099.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,041.58
****Base Wages**	$ 120,836.56
TOTAL Investment In You	$ 168,878.14

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10002

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHELLEY WARD

ShWard@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 338.52
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 Taxes	$ 5,592.91
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,359.48
****Base Wages**	$ 73,109.92
TOTAL Investment In You	$ 99,469.40

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10038

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ISHA MAINA

IMaina@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
Long Term Care Contribution	$ 179.92
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 Taxes	$ 9,392.45
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,467.88
****Base Wages**	$ 112,852.48
TOTAL Investment In You	$ 163,320.36

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10048

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARTIN BENGTSSON MBengtsson@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		$ 642.46
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 262.86
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 Taxes		$ 8,362.25
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 21,517.96
****Base Wages**		$ 76,517.31
TOTAL Investment In You		$ 98,035.27

TOTAL Paid Time Off Days: **35 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10053

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAYVELEEN MERCADO

MMercado@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
Long Term Care Contribution	$ 131.30
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 Taxes	$ 7,843.45
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,852.84
****Base Wages**	$ 71,770.17
TOTAL Investment In You	$ 120,623.02

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10072

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARIA VERACRUZ

MVeracruz@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	$ 101.61
Long Term Care Contribution	$ 244.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,689.08
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,348.58
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,148.88
****Base Wages**	$ 69,916.08
TOTAL Investment In You	$ 119,064.96
TOTAL Paid Time Off Days:	**35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10078

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HONG NGOC LY

HongLy@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 131.30
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 Taxes	$ 9,568.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,204.78
****Base Wages**	$ 137,863.44
TOTAL Investment In You	$ 179,068.22

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10084

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DEBORAH CAMPBELL

DebCampbell@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 0.37
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 478.92
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 Taxes	$ 9,464.23
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,439.25
****Base Wages**	$ 116,812.80
TOTAL Investment In You	$ 158,252.05

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10111

2016

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOHN FISCH

JFisch@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 478.92
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 Taxes	$ 9,568.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,552.40
****Base Wages**	$ 122,545.28
TOTAL Investment In You	$ 164,097.68

TOTAL Paid Time Off Days: **30 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10122

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NAJIA KARIM

NKarim@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 478.92
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 Taxes		$ 6,783.29
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 19,752.60
****Base Wages**	$ 62,069.28
TOTAL Investment In You	$ 81,821.88

TOTAL Paid Time Off Days: **30 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10136

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MUN LEUNG

MunLeung@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 179.92
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 Taxes	$ 9,568.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,253.40
****Base Wages**	$ 137,863.44
TOTAL Investment In You	$ 179,116.84

TOTAL Paid Time Off Days: **30 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10167

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KELLEY COPE

KeCope@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 102.70
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 Taxes	$ 7,946.45
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,477.20
****Base Wages**	$ 103,875.20
TOTAL Investment In You	$ 132,352.40

TOTAL Paid Time Off Days: **42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10169

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CAROLYN MOLNAR

CShipman@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
Long Term Care Contribution	$ 410.28
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,119.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,034.88
****Base Wages**	$ 85,556.74
TOTAL Investment In You	$ 126,591.62

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10212

2016

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GLORIA PRZELENSKI

GPrzelenski@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 795.60
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,254.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,477.97
****Base Wages**	$ 131,539.62
TOTAL Investment In You	$ 162,017.59

TOTAL Paid Time Off Days: **25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10256

2016

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HOMAIRA ANWARZAI

HAnwarzai@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 107.73
Long Term Care Contribution	$ 115.18
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 Taxes	$ 4,556.70
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,581.52
****Base Wages**	$ 59,564.75
TOTAL Investment In You	$ 104,146.28

TOTAL Paid Time Off Days: **25 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 # 10259

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CATHERINE MORANO

CMorano@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		$ 27.04
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 136.76
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 Taxes		$ 9,257.35
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 23,523.00
****Base Wages**	$ 131,748.45
TOTAL Investment In You	$ 155,271.45

TOTAL Paid Time Off Days: **25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10263

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JUDY BRACKIN

jbrackin@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 262.86
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 Taxes	$ 5,707.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,865.97
****Base Wages**	$ 74,609.18
TOTAL Investment In You	$ 121,475.16
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 10264

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELIZEBA NINAN

eninan@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	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 172.90
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 9,866.72
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 22,547.43
****Base Wages**	$ 173,773.60
TOTAL Investment In You	$ 196,321.03

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10277

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LOUISE RAUCHER

lraucher@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
Long Term Care Contribution	$ 316.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,128.61
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,968.06
****Base Wages**	$ 122,869.76
TOTAL Investment In You	$ 163,837.82

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10300

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RANIA ALISSA

ralissa@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
Long Term Care Contribution	$ 244.92
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 Taxes	$ 7,987.95
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,128.38
****Base Wages**	$ 104,417.66
TOTAL Investment In You	$ 153,546.05

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10306

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DOUGLAS DEL PAGGIO

ddelpaggio@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 14 % of your income.

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 244.92
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 Taxes	$ 10,109.97
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,782.94
****Base Wages**	$ 190,549.84
TOTAL Investment In You	$ 221,332.78

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10311

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSS TURNEY

rturney@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 118.82
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,289.78
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,540.77
****Base Wages**	$ 133,985.07
TOTAL Investment In You	$ 163,525.85

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10313

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHRISTINA BLACKBURN cblackburn@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
Long Term Care Contribution	$ 107.90
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,714.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,233.09
****Base Wages**	$ 146,952.00
TOTAL Investment In You	$ 177,185.09

TOTAL Paid Time Off Days: **25 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10337

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GARY AKINS

gakins@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	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 570.70
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 Taxes	$ 9,739.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 19,578.01
****Base Wages**	$ 165,000.16
TOTAL Investment In You	$ 184,578.17

TOTAL Paid Time Off Days: **37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 10342

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KINZI RICHHOLT

krichholt@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	$ 3,783.00
Long Term Disability	$ 1,427.33
Long Term Care Contribution	$ 570.70
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 10,400.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 11,267.80
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,625.28
****Base Wages**	$ 270,400.00
TOTAL Investment In You	$ 315,025.28

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10353

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VIKI ARDITO

vardito@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	$ 3,783.00
Long Term Disability	$ 1,427.33
Long Term Care Contribution	$ 478.92
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 Taxes	$ 10,020.01
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 56,464.34
****Base Wages**	$ 184,345.82
TOTAL Investment In You	$ 240,810.16

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

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10357

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAVID WARMOUTH

dwarmouth@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	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 1,131.00
Long Term Disability	$ 1,427.33
Long Term Care Contribution	$ 172.90
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 12,545.70
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,974.63
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,834.37
****Base Wages**	$ 181,215.63
TOTAL Investment In You	$ 231,050.00
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**49 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 10416

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MYRISSA CENTENO

mcenteno@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 189.02
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,578.99
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,988.40
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 51,651.92
****Base Wages**	$ 78,279.76
TOTAL Investment In You	$ 129,931.68
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 10422

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NICK VOLOSIN

nvolosin@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
Long Term Care Contribution	$ 172.90
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 12,421.90
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,469.04
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 63,959.35
****Base Wages**	$ 215,312.86
TOTAL Investment In You	$ 279,272.21
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10435

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AARON TEDDINGTON

ateddington@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	$ 27.04
Long Term Disability	$ 112.90
Long Term Care Contribution	$ 102.70
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,598.04
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 4,661.32
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,789.62
****Base Wages**	$ 60,932.35
TOTAL Investment In You	$ 89,721.97

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10440

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JANE RUTLEDGE

jrutledge@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 478.92
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 4,470.99
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 8,892.80
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 26,350.52
****Base Wages**	$ 116,245.79
TOTAL Investment In You	$ 142,596.32

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10447

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KAREN BLACK

kblack@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
Long Term Care Contribution	$ 228.54
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,148.76
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,272.81
****Base Wages**	$ 124,259.20
TOTAL Investment In You	$ 174,532.01

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10467

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JANE MIKA-HAYNIE

jhaynie@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 478.92
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 Taxes	$ 8,401.97
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,403.66
****Base Wages**	$ 109,829.62
TOTAL Investment In You	$ 150,233.27

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10519

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CYNTHIA NARCISSE

cnarcisse@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 381.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,923.08
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,988.42
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,815.95
****Base Wages**	$ 78,279.97
TOTAL Investment In You	$ 119,095.92

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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

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

Dear Colleague,

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

Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 10526

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

HEATHER LOGAN

hlogan@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
Long Term Care Contribution	$ 570.70
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 Taxes	$ 9,165.30
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,258.77
****Base Wages**	$ 125,399.87
TOTAL Investment In You	$ 166,658.64

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10535

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RICHARD ESPINOZA

RAEspinoza@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	$ 7,406.62
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 172.90
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,315.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,805.67
****Base Wages**	$ 204,750.00
TOTAL Investment In You	$ 232,555.67
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 10536

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LOUISE NAKADA

LNakada@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
Long Term Care Contribution	$ 338.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 6,915.36
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,335.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 55,485.20
****Base Wages**	$ 95,892.99
TOTAL Investment In You	$ 151,378.20
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**54 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 10579

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TERRY LIGHTFOOT

tlightfoot@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	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 262.86
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 Taxes	$ 9,791.99
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,220.96
****Base Wages**	$ 168,619.98
TOTAL Investment In You	$ 188,840.94

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10592

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

M. JOY HILTY

jhilty@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 338.52
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 Taxes	$ 9,203.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,969.57
****Base Wages**	$ 128,000.08
TOTAL Investment In You	$ 157,969.65

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10641

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SUKHPAL CHEEMA

scheema@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 14 % of your income.

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 88.83
Long Term Care Contribution		$ 102.70
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 Taxes		$ 9,363.68
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 21,932.20
****Base Wages**		$ 139,081.28
TOTAL Investment In You		$ 161,013.48

TOTAL Paid Time Off Days: **41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10663

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARY SKROPETA

MPSkropeta@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 522.08
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 9,843.28
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,247.71
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 51,135.84
****Base Wages**	$ 131,083.68
TOTAL Investment In You	$ 182,219.52

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 # 10664

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DONNA MARCHETTI

DMarchetti@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
Long Term Care Contribution	$ 1,130.48
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 Taxes	$ 9,067.20
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,608.31
****Base Wages**	$ 118,634.46
TOTAL Investment In You	$ 149,242.77

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 # 10670

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALICE CHENG

ACheng@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		$ 113.40
Long Term Care Contribution		$ 522.08
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 9,070.75
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 23,061.58
****Base Wages**	$ 71,327.69
TOTAL Investment In You	$ 94,389.28

TOTAL Paid Time Off Days: **47 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 10671

2016
ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RENELL MIDDLECAMP

RMiddlecamp@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
Long Term Care Contribution	$ 440.96
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 Taxes	$ 9,276.79
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,223.10
****Base Wages**	$ 106,471.37
TOTAL Investment In You	$ 147,694.48
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**47 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 10674

2016
ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BARBARA BASS

Bbass@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	$ 91.60
Long Term Care Contribution	$ 570.70
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 Taxes	$ 4,004.10
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,963.62
****Base Wages**	$ 52,341.12
TOTAL Investment In You	$ 77,304.74

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 # 10681

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CARLYN GIONGCO

CGiongco@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
Long Term Care Contribution	$ 440.96
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 Taxes	$ 8,760.35
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,079.40
****Base Wages**	$ 114,514.40
TOTAL Investment In You	$ 164,593.80

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 # 10684

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CONCEPCION BRIONES

Cbriones@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
Long Term Care Contribution	$ 522.08
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,870.06
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,802.77
****Base Wages**	$ 115,948.56
TOTAL Investment In You	$ 145,751.33

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 # 10693

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELIZABETH ABUEG

EAbueg@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 440.96
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 Taxes	$ 9,220.59
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,539.64
****Base Wages**	$ 90,449.05
TOTAL Investment In You	$ 140,988.69

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 # 10706

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NANCY BEYELIA

nbeyelia@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 85.82
Long Term Care Contribution		$ 262.86
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 Taxes		$ 3,786.21
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 16,511.88
****Base Wages**	$ 49,492.98
TOTAL Investment In You	$ 66,004.86

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 # 10713

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOYCE WALKER

JPWalker@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 741.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 5,325.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,086.34
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,580.91
****Base Wages**	$ 79,560.00
TOTAL Investment In You	$ 112,140.91

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 # 10729

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOSEFINA LAMPA-DELEON

PLampa@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	$ 586.04
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 522.08
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 5,233.25
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,319.93
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,965.71
****Base Wages**	$ 136,064.45
TOTAL Investment In You	$ 182,030.16
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**47 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10737

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOAN POWELL-ESPICHA

JFPowell@alamedahealthsystem.org

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

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ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 244.92
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 Taxes	$ 9,133.85
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,256.86
****Base Wages**	$ 123,230.85
TOTAL Investment In You	$ 173,487.71
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**37 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10740

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BOB STENSON

BStenson@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	$ 108.78
Long Term Care Contribution	$ 381.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 4,755.08
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,637.48
****Base Wages**	$ 55,942.10
TOTAL Investment In You	$ 92,579.58

TOTAL Paid Time Off Days: **47 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10743

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

THERESA CARROLL

TCarroll@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 298.74
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 Taxes	$ 6,889.45
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,598.82
****Base Wages**	$ 90,058.18
TOTAL Investment In You	$ 117,657.00

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 # 10754

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL YEP

MYep@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 212.42
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,091.52
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,182.03
****Base Wages**	$ 108,280.79
TOTAL Investment In You	$ 158,462.82

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 # 10757

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

STACIE CHEATEM

SCheatem@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 51.30
Long Term Care Contribution	$ 163.80
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 3,772.34
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,379.39
****Base Wages**	$ 44,380.44
TOTAL Investment In You	$ 79,759.83

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 # 10769

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KRISTEN THORSON

KThorson@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 149.50
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 5,769.60
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,415.54
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 34,762.69
****Base Wages**	$ 110,007.04
TOTAL Investment In You	$ 144,769.73
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**47 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10770

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANITA MAYO-GREEN

AMayo-Green@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	$ 27.04
Long Term Disability	$ 110.55
Long Term Care Contribution	$ 262.86
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,564.58
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 4,742.92
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,463.02
****Base Wages**	$ 61,998.98
TOTAL Investment In You	$ 112,461.99
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**47 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10771

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LANANH KHONG

KHONL@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		$ 898.30
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 144.04
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 9,358.37
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 22,651.10
****Base Wages**		$ 83,229.12
TOTAL Investment In You		$ 105,880.22

TOTAL Paid Time Off Days: **47 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10776

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LORI KNIGHT

LArchie@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 21 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 179.92
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 Taxes		$ 6,095.81
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 18,766.12
****Base Wages**		$ 71,715.38
TOTAL Investment In You		$ 90,481.50

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 # 10785

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MELISSA BASS

MBass@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 82.56
Long Term Care Contribution	$ 104.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,360.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 3,675.67
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 27,519.98
****Base Wages**	$ 48,048.00
TOTAL Investment In You	$ 75,567.98
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 # 10795

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WILLIAM LEI

WLei@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 131.30
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 7,431.22
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,210.09
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,200.66
****Base Wages**	$ 94,249.58
TOTAL Investment In You	$ 129,450.25
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**54 Days**

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 10811

2016
ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANN DANIEL

AMDaniel@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 35 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 98.75
Long Term Care Contribution	$ 1,673.88
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,019.20
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 4,376.82
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,465.88
****Base Wages**	$ 57,213.31
TOTAL Investment In You	$ 87,679.19
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**47 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10815

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAELE BAXTER

mbaxter@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 440.96
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 Taxes	$ 9,173.95
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,120.26
****Base Wages**	$ 125,996.83
TOTAL Investment In You	$ 167,117.10

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 # 10829

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

WENDY HREPCSHAK

WHrepcshak@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	$ 76.92
Long Term Care Contribution	$ 198.12
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,655.90
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,695.63
****Base Wages**	$ 51,753.37
TOTAL Investment In You	$ 98,449.01

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 # 10868

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOANNE BORROMEO

JBORROMEO@alamedahealthsystem.or

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
Long Term Care Contribution	$ 115.18
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 Taxes	$ 8,720.51
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,713.78
****Base Wages**	$ 113,993.57
TOTAL Investment In You	$ 163,707.35
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**47 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 10896

2016
ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAVID RAINEY

CRainey@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 89.87
Long Term Care Contribution	$ 228.54
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,721.61
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 3,928.48
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,265.73
****Base Wages**	$ 51,352.70
TOTAL Investment In You	$ 79,618.43

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 # 10917

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PATRICIA REYNOLDS

PAReynolds@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 478.92
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 Taxes	$ 9,566.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,568.02
****Base Wages**	$ 153,057.01
TOTAL Investment In You	$ 194,625.02
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**47 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10930

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SCOTT DILLON

sdillon@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 73.03
Long Term Care Contribution		$ 163.80
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 0.00
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 4,335.54
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 16,949.36
****Base Wages**	$ 51,006.38
TOTAL Investment In You	$ 67,955.75

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 # 10937

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NECITAS VILLAGONZALO nvillagonzalo@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 24 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 410.28
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,792.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,613.53
****Base Wages**	$ 91,948.98
TOTAL Investment In You	$ 121,562.51
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**47 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10946

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARILOU FANGER

MFanger@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
Long Term Care Contribution	$ 228.54
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,726.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,850.05
****Base Wages**	$ 87,921.60
TOTAL Investment In You	$ 135,771.65
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10967

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SONNY OUANO

SOuano@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 156.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 7,506.72
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,543.77
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 57,102.52
****Base Wages**	$ 111,683.31
TOTAL Investment In You	$ 168,785.84
TOTAL Paid Time Off Days:	**49 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 # 10970

2016
WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARGARET SOTO KNOTT

msknott@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 59 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 58.51
Long Term Care Contribution	$ 338.52
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 Taxes	$ 3,315.63
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,477.35
****Base Wages**	$ 30,339.11
TOTAL Investment In You	$ 74,816.46

TOTAL Paid Time Off Days: **35 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10971

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EVANGELINE AGPALO EAGPALO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 40 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 73.93
Long Term Care Contribution	$ 570.70
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,632.77
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 3,082.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,656.73
****Base Wages**	$ 40,288.98
TOTAL Investment In You	$ 66,945.71
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**48 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 10972

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAXINE MORRIS

maxmorris@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 73.93
Long Term Care Contribution		$ 478.92
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 1,880.55
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 3,082.11
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 17,892.49
****Base Wages**	$ 40,288.98
TOTAL Investment In You	$ 58,181.47

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

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ALAMEDA HEALTH SYSTEM

Employee ID # 10973

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EDUARDO SIMEON

ESIMEON@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 40 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 73.93
Long Term Care Contribution	$ 244.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,632.77
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 3,082.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,330.95
****Base Wages**	$ 40,288.98
TOTAL Investment In You	$ 66,619.93

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

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ALAMEDA HEALTH SYSTEM

Employee ID # 10974

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GINA SIMEON

GSIMEON@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 52 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 898.30
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 73.93
Long Term Care Contribution	$ 163.80
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,128.33
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 3,082.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,250.07
****Base Wages**	$ 40,288.98
TOTAL Investment In You	$ 84,539.05
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**48 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 10975

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MA RAMOS

MRAMOS@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 52 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 73.93
Long Term Care Contribution	$ 262.86
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 Taxes	$ 3,082.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,183.58
****Base Wages**	$ 40,288.98
TOTAL Investment In You	$ 84,472.56
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**48 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 10976

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GLICERIA ARCIBAL

GARCIBAL@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	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 73.93
Long Term Care Contribution	$ 666.12
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 3,082.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,214.10
****Base Wages**	$ 40,288.98
TOTAL Investment In You	$ 75,503.08

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

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ALAMEDA HEALTH SYSTEM

Employee ID # 10977

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARGIE TALMADGE

MTALMADGE@alamedahealthsystem.or

Alameda makes benefit contributions in the amount of 52 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 73.93
Long Term Care Contribution	$ 284.44
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 3,082.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,205.16
****Base Wages**	$ 40,288.98
TOTAL Investment In You	$ 84,494.14
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**48 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 10978

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MERLITA FULGADO MFULGADO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 26 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 73.93
Long Term Care Contribution	$ 244.92
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 Taxes	$ 3,082.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 12,537.94
****Base Wages**	$ 36,260.08
TOTAL Investment In You	$ 48,798.02
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**48 Days**

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 10979

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RAYMUND TEODORO

RTEODORO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 53 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 73.93
Long Term Care Contribution	$ 212.42
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,239.66
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 3,082.11
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,372.80
****Base Wages**	$ 40,288.98
TOTAL Investment In You	$ 85,661.78
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**48 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 10980

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FE GERONA

FGERONA@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 38 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 179.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,234.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,432.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,724.44
****Base Wages**	$ 84,084.00
TOTAL Investment In You	$ 134,808.44

TOTAL Paid Time Off Days: **32 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10982

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ELAINE TAHIL

ETAHIL@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 144.04
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,432.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,454.56
****Base Wages**	$ 84,084.00
TOTAL Investment In You	$ 131,538.56

TOTAL Paid Time Off Days: **21 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10984

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ZENAIDA ROSETE

ZROSETE@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		$ 27.04
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 570.70
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 Taxes		$ 9,082.37
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 23,139.24
****Base Wages**	$ 119,680.50
TOTAL Investment In You	$ 142,819.73

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

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10985

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARISSA LUCERO

MLUCERO1@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	$ 75.20
Long Term Care Contribution	$ 478.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,035.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 3,497.14
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,478.21
****Base Wages**	$ 41,142.82
TOTAL Investment In You	$ 78,621.03
TOTAL Paid Time Off Days:	**42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10986

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LEONIDAS FLORES

LFLORES@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 44 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 62.60
Long Term Care Contribution	$ 410.28
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,228.63
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 2,776.36
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,479.22
****Base Wages**	$ 32,663.03
TOTAL Investment In You	$ 58,142.25
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**48 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 10988

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CORNELIUS BULLOCK

CBULLOCK@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 41 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 63.08
Long Term Care Contribution	$ 262.86
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 2,245.73
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 2,797.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,666.56
****Base Wages**	$ 36,570.77
TOTAL Investment In You	$ 62,237.33
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**48 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 10989

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LOLITA MABALOT

lmabalot@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	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 26.95
Long Term Care Contribution	$ 338.52
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 Taxes	$ 2,809.14
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 12,311.60
****Base Wages**	$ 33,048.66
TOTAL Investment In You	$ 45,360.26

TOTAL Paid Time Off Days: **6 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 10992

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ARTURO CABATO

ACABATO@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	*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		$ 33.30
Long Term Care Contribution		$ 741.52
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 1,185.80
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 2,776.36
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 17,113.96
****Base Wages**	$ 21,775.35
TOTAL Investment In You	$ 38,889.32

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

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Jeanette Louden-Corbett
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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 10994

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DIANA WITCHER

DWITCHER@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 1,040.52
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 5,275.23
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,360.85
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 32,791.35
****Base Wages**	$ 83,148.42
TOTAL Investment In You	$ 115,939.77
TOTAL Paid Time Off Days:	**43 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 # 11001

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KRISTINE LOUIE

KLouie@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 50 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 85.84
Long Term Care Contribution	$ 131.30
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 Taxes	$ 5,995.99
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,977.82
****Base Wages**	$ 47,027.39
TOTAL Investment In You	$ 94,005.20
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**42 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11005

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MAHERA AZIZI

MAzizi@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 111.54
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,543.31
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,177.62
****Base Wages**	$ 151,469.76
TOTAL Investment In You	$ 192,647.38

TOTAL Paid Time Off Days: **44 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 # 11011

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KARMELLA BORASHAN

KBorashan@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 316.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,464.70
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,676.89
****Base Wages**	$ 146,048.45
TOTAL Investment In You	$ 196,725.34

TOTAL Paid Time Off Days: **42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11012

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JULIA JOZWICK

JJOZWICK@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
Long Term Care Contribution	$ 131.30
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,285.70
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,938.61
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,233.70
****Base Wages**	$ 69,866.04
TOTAL Investment In You	$ 120,099.74
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**43 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11015

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KARLA BROWN

KBROWN@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
Long Term Care Contribution	$ 212.42
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,070.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,397.50
****Base Wages**	$ 63,480.60
TOTAL Investment In You	$ 89,878.10

TOTAL Paid Time Off Days: **43 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11019

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANNALU TANJUAKIO ROJAS

ATanjuakio@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 16 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 0.00
Dental	$ 0.00
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 179.92
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 Taxes	$ 9,093.76
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 18,524.07
****Base Wages**	$ 96,372.89
TOTAL Investment In You	$ 114,896.96
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**42 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11027

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

IRENE PAKEL

IPakel@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 617.50
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,111.54
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,157.09
****Base Wages**	$ 121,692.48
TOTAL Investment In You	$ 151,849.57

TOTAL Paid Time Off Days: **42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11039

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KAREN HOPKINS

KHopkins@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 440.96
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,138.34
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,554.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,656.32
****Base Wages**	$ 85,676.45
TOTAL Investment In You	$ 127,332.77

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11045

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANUPSINGH SADA TSHERING

atshering@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 87.23
Long Term Care Contribution	$ 298.74
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 Taxes	$ 3,636.80
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,787.46
****Base Wages**	$ 47,539.86
TOTAL Investment In You	$ 92,327.32

TOTAL Paid Time Off Days: **42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11046

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MELINDA ANTONIO MANTONIO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 179.92
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 Taxes	$ 6,432.43
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 47,490.44
****Base Wages**	$ 84,084.00
TOTAL Investment In You	$ 131,574.44

TOTAL Paid Time Off Days: **21 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11047

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNY SY

JSy@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 73.12
Long Term Care Contribution	$ 131.30
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 Taxes	$ 5,130.03
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,099.14
****Base Wages**	$ 40,235.52
TOTAL Investment In You	$ 86,334.66

TOTAL Paid Time Off Days: **42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11064

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RUBEN SHARGORODSKY

rshargorodsky@alamedahealthsystem.or

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 107.90
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,784.95
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,025.02
****Base Wages**	$ 101,764.00
TOTAL Investment In You	$ 129,789.02
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11068

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

EILEEN CALLANAN

ecallanan@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	$ 7,991.10
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 163.80
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,115.37
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,867.24
****Base Wages**	$ 106,083.33
TOTAL Investment In You	$ 131,950.57
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**42 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11072

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DECLAN MURTAGH

dmurtagh@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 316.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,410.08
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 46,604.85
****Base Wages**	$ 70,720.00
TOTAL Investment In You	$ 117,324.85

TOTAL Paid Time Off Days: **42 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11079

2016
WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JUAN ATILLO

JATILLO@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 41 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 60.25
Long Term Care Contribution	$ 102.70
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 Taxes	$ 2,510.91
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,971.09
****Base Wages**	$ 32,822.40
TOTAL Investment In You	$ 55,793.49
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11082

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNIFER MORRIS

JMorris@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	$ 99.18
Long Term Care Contribution	$ 122.46
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 4,195.15
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 45,181.48
****Base Wages**	$ 54,838.58
TOTAL Investment In You	$ 100,020.06

TOTAL Paid Time Off Days: **37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11091

2016
WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ARNULFO BERUMEN ABERUMEN@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	$ 95.76
Long Term Care Contribution	$ 478.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 385.62
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 3,989.38
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,341.63
****Base Wages**	$ 52,148.72
TOTAL Investment In You	$ 88,490.35

TOTAL Paid Time Off Days: **35 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11103

2016
WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SANDRA DAVIS

SLDavis@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 22 % of your income.
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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
Long Term Care Contribution		$ 1,373.32
Flexible Spending Account Costs		$ 59.28
Annual Cobra Flex Admin Costs		$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)		$ 25.77
Tuition Reimbursement (fiscal yr 2016)		$ 0.00
EAP Account Costs		$ 21.96
Medicare & Social Security Taxes		$ 5,361.87
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 20,247.13
****Base Wages**		$ 70,089.76
TOTAL Investment In You		$ 90,336.89

TOTAL Paid Time Off Days: **35 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11122

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JODI KESLER

jkesler@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	$ 66.44
Long Term Care Contribution	$ 440.96
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 Taxes	$ 3,926.17
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,730.80
****Base Wages**	$ 51,322.54
TOTAL Investment In You	$ 76,053.35

TOTAL Paid Time Off Days: **30 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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

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

Dear Colleague,

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11166

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VAUGHN WATSON VWATSON@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
Long Term Care Contribution	$ 212.42
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,063.62
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,781.39
****Base Wages**	$ 71,336.68
TOTAL Investment In You	$ 109,118.07

TOTAL Paid Time Off Days: **43 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 # 11167

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NICHOLAS HAYWORTH

NHAYWORTH@alamedahealthsystem.or

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
Long Term Care Contribution	$ 102.70
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 Taxes	$ 5,498.81
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,012.14
****Base Wages**	$ 71,879.81
TOTAL Investment In You	$ 97,891.94

TOTAL Paid Time Off Days: **43 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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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11190

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LISA FERNANDEZ

LPFernandez@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 102.70
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 Taxes	$ 6,348.89
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,879.64
****Base Wages**	$ 82,992.00
TOTAL Investment In You	$ 109,871.64

TOTAL Paid Time Off Days: **37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11193

2016
SOUTH SHORE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DIANA HUYNH

ddhuynh@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 36 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 74.30
Long Term Care Contribution	$ 102.70
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 Taxes	$ 3,157.74
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 23,631.97
****Base Wages**	$ 41,277.60
TOTAL Investment In You	$ 64,909.57

TOTAL Paid Time Off Days: **37 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11196

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JACQUELINE BAKER-HODGSON jbaker-hodgson@alamedahealthsystem.c

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
Long Term Care Contribution	$ 212.42
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,133.85
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,851.62
****Base Wages**	$ 86,261.59
TOTAL Investment In You	$ 127,113.21

TOTAL Paid Time Off Days: **37 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11198

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KIMYEN NGUYEN

kinguyen@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 189.02
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,265.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,864.90
****Base Wages**	$ 132,293.20
TOTAL Investment In You	$ 162,158.10

TOTAL Paid Time Off Days: **37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11199

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JONATHAN NIEH

JNieh@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 102.70
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 Taxes	$ 9,265.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,873.30
****Base Wages**	$ 132,293.20
TOTAL Investment In You	$ 173,166.50

TOTAL Paid Time Off Days: **37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11200

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

PAHNYAH GIBBS

PGibbs@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	$ 98.28
Long Term Care Contribution	$ 136.76
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 Taxes	$ 4,097.34
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,629.61
****Base Wages**	$ 53,560.00
TOTAL Investment In You	$ 78,189.61

TOTAL Paid Time Off Days: **37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11205

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ADAM LOOMIS

ALOOMIS@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
Long Term Care Contribution	$ 118.82
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,624.89
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 26,154.34
****Base Wages**	$ 66,175.20
TOTAL Investment In You	$ 92,329.54

TOTAL Paid Time Off Days: **38 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11206

2016 WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOSE FAJARITO JFajarito@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	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 179.92
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 Taxes	$ 4,944.65
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,290.06
****Base Wages**	$ 64,636.00
TOTAL Investment In You	$ 101,926.06

TOTAL Paid Time Off Days: **25 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11207

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JOELLEN PALSHIS

JPalshis@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 478.92
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 Taxes		$ 6,683.04
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 19,652.35
****Base Wages**	$ 87,360.00
TOTAL Investment In You	$ 107,012.35

TOTAL Paid Time Off Days: **37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11230

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAVID AKINSANYA

DAkinsanya@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
Long Term Care Contribution	$ 228.54
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 13,590.40
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,065.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 63,780.33
****Base Wages**	$ 118,543.36
TOTAL Investment In You	$ 182,323.69

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11234

2016
ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ERIKJOSEPH ABACAN

EAbacan@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 19 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 102.70
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 Taxes	$ 9,150.57
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,681.32
****Base Wages**	$ 124,384.00
TOTAL Investment In You	$ 154,065.32

TOTAL Paid Time Off Days: **37 Days**
Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11262

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ANGELA GUZMAN

AAGuzman@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 102.70
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 Taxes	$ 8,545.22
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,526.01
****Base Wages**	$ 78,191.57
TOTAL Investment In You	$ 127,717.58
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**37 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11269

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RACHAEL WILLER

rwiller@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 107.90
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,573.56
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 48,559.55
****Base Wages**	$ 99,000.72
TOTAL Investment In You	$ 147,560.27

TOTAL Paid Time Off Days: **37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11305

WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

NELIDA GUMAYAN

NGumayan@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 360.10
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,022.86
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 36,888.31
****Base Wages**	$ 65,658.32
TOTAL Investment In You	$ 102,546.63

TOTAL Paid Time Off Days: **24 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11314

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JULIA KING

cjking@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	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 440.96
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 Taxes	$ 9,096.28
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,669.41
****Base Wages**	$ 120,640.00
TOTAL Investment In You	$ 150,309.41
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11332

2016
WATERS EDGE

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHAEL KIRKWOOD

MKirkwood@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 32 % of your income.
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ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 99.07
Long Term Care Contribution	$ 478.92
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 Taxes	$ 4,162.42
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,055.06
****Base Wages**	$ 54,410.72
TOTAL Investment In You	$ 79,465.78

TOTAL Paid Time Off Days: **24 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 # 11357

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LAURA PEPE

lpepe@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	$ 91.60
Long Term Care Contribution	$ 381.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 3,818.72
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,589.23
****Base Wages**	$ 49,917.92
TOTAL Investment In You	$ 74,507.15
TOTAL Paid Time Off Days:	**37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11358

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CAROL RAVANERA

CRavanera@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
Long Term Care Contribution	$ 570.70
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 Taxes	$ 9,228.98
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,931.85
****Base Wages**	$ 129,792.00
TOTAL Investment In You	$ 159,723.85

TOTAL Paid Time Off Days: **37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11363

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SIMING JIANG

SJiang@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
Long Term Care Contribution	$ 741.52
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 Taxes	$ 5,244.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,491.47
****Base Wages**	$ 68,556.80
TOTAL Investment In You	$ 106,048.27

TOTAL Paid Time Off Days: **37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11400

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

KETHIA CHHENG

kchheng@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 102.70
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 Taxes	$ 5,421.35
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,952.10
****Base Wages**	$ 70,867.26
TOTAL Investment In You	$ 96,819.36
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 11406

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DAVID COX

davcox@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	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 3,783.00
Long Term Disability	$ 1,427.33
Long Term Care Contribution	$ 522.08
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 12,784.50
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 49,899.24
****Base Wages**	$ 374,999.87
TOTAL Investment In You	$ 424,899.11

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11408

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ERIKA LOPEZ

erilopez@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	$ 101.23
Long Term Care Contribution	$ 102.70
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 Taxes	$ 4,627.21
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 22,017.21
****Base Wages**	$ 60,486.40
TOTAL Investment In You	$ 82,503.61

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 # 11471

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

RONNIE GRAVINO

rgravino@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 570.70
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 Taxes	$ 7,956.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,843.59
****Base Wages**	$ 104,000.00
TOTAL Investment In You	$ 129,843.59

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11472

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VALESKA HIDALGO

vhidalgo@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 6,544.46
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 49.14
Long Term Care Contribution	$ 102.70
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 Taxes	$ 4,066.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 20,542.35
****Base Wages**	$ 31,894.89
TOTAL Investment In You	$ 52,437.23

TOTAL Paid Time Off Days: **41 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11476

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CARMEN AVILA

cavila@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 298.74
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,410.90
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,238.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,471.10
****Base Wages**	$ 94,623.36
TOTAL Investment In You	$ 138,094.46
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 11481

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

DELETA MOORE

dmoore@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 338.52
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 Taxes	$ 9,316.83
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 41,744.66
****Base Wages**	$ 135,850.00
TOTAL Investment In You	$ 177,594.66

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11485

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LYNDA COOK

lycook@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 156.52
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 Taxes	$ 7,855.02
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,439.59
****Base Wages**	$ 102,680.03
TOTAL Investment In You	$ 131,119.62
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11505

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

FRANCES JEFFERSON

fjefferson@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 666.12
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 9,143.55
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,237.72
****Base Wages**	$ 61,950.10
TOTAL Investment In You	$ 92,187.82

TOTAL Paid Time Off Days: **39 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11507

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ALISON DRUMMER

adrummer@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	*Share The Savings*	$ 3,000.00
Dental	*Share The Savings*	$ 240.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 9.62
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 136.76
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 Taxes		$ 5,791.97
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00
Alameda's Benefit Contribution		$ 18,419.12
****Base Wages**		$ 75,712.00
TOTAL Investment In You		$ 94,131.12

TOTAL Paid Time Off Days: **40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11539

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BRIAN ACORD

bacord@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 115.18
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 Taxes	$ 8,835.74
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,473.69
****Base Wages**	$ 115,499.90
TOTAL Investment In You	$ 155,973.60

TOTAL Paid Time Off Days: **37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11545

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MONIQUE BRIGGS

mbriggs@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
Long Term Care Contribution	$ 136.76
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,010.77
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,587.25
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,630.29
****Base Wages**	$ 86,107.84
TOTAL Investment In You	$ 136,738.13
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11549

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MURIAL HAN

murhan@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 156.52
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 Taxes	$ 9,329.42
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,132.61
****Base Wages**	$ 136,718.40
TOTAL Investment In You	$ 167,851.01

TOTAL Paid Time Off Days: **37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11556

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

TIMOTHY ANDERSON

tanderson@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 102.70
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 1,809.69
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,541.33
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,976.49
****Base Wages**	$ 98,579.52
TOTAL Investment In You	$ 139,556.01

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11564

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JEANNIE MARIA DOUGHERTY jedougherty@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 7,406.62
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 144.04
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,412.84
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,577.89
****Base Wages**	$ 96,899.92
TOTAL Investment In You	$ 121,477.81
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 11565

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SUSANA FLORES

sflores@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	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 102.70
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 3,112.50
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 5,967.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,610.25
****Base Wages**	$ 78,000.00
TOTAL Investment In You	$ 107,610.25
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11576

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MICHELLE HAYNES

mihaynes@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 244.92
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 Taxes	$ 5,847.66
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 37,597.93
****Base Wages**	$ 76,440.00
TOTAL Investment In You	$ 114,037.93

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Dear Colleague,

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Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11579

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BONNIE PANLASIGUI

bpanlasigui@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	$ 495.04
Long Term Disability	$ 1,427.33
Long Term Care Contribution	$ 118.82
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,908.63
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 44,332.16
****Base Wages**	$ 245,629.90
TOTAL Investment In You	$ 289,962.06

TOTAL Paid Time Off Days: **49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11588

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CHRISTINA AHENGUAH

cahenguah@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 29,766.62
Dental	$ 1,861.08
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 70.76
Long Term Care Contribution	$ 156.52
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 Taxes	$ 2,950.08
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 43,942.06
****Base Wages**	$ 34,706.88
TOTAL Investment In You	$ 78,648.94

TOTAL Paid Time Off Days: **37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11596

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JAMES OBERST

joberst@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 198.12
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 6,476.47
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 38,197.36
****Base Wages**	$ 84,659.74
TOTAL Investment In You	$ 122,857.10
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**44 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 11597

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

COLLEEN RAFFETY

craffety@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 94.51
Long Term Care Contribution	$ 107.90
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 3,940.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,534.36
****Base Wages**	$ 51,503.30
TOTAL Investment In You	$ 87,037.65
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**40 Days**

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ALAMEDA HEALTH SYSTEM

Employee ID # 11604

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VAN LE

vannle@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 102.70
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 Taxes	$ 4,834.05
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,051.50
****Base Wages**	$ 63,190.19
TOTAL Investment In You	$ 88,241.69

TOTAL Paid Time Off Days: **40 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11607

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

AKEMI OTSUKA RENN

aotsuka@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
Long Term Care Contribution	$ 298.74
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 Taxes	$ 9,139.20
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,960.71
****Base Wages**	$ 123,599.84
TOTAL Investment In You	$ 164,560.55

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11630

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VANETTA VAN CLEAVE

vcleave@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	$ 1,778.92
Long Term Disability	$ 1,427.33
Long Term Care Contribution	$ 262.86
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 15,732.71
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,642.13
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 50,131.56
****Base Wages**	$ 227,250.19
TOTAL Investment In You	$ 277,381.75
TOTAL Paid Time Off Days:	**49 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11635

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

SHAUNA VANCE

shvance@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	$ 111.50
Long Term Care Contribution	$ 118.82
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,059.67
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,587.21
****Base Wages**	$ 63,213.07
TOTAL Investment In You	$ 91,800.29

TOTAL Paid Time Off Days: **25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11644

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JUDY LAU

judylau@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 102.70
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 Taxes	$ 8,309.88
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 28,823.21
****Base Wages**	$ 97,763.33
TOTAL Investment In You	$ 126,586.54

TOTAL Paid Time Off Days: **35 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11672

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MARCEL SMITH

marcsmith@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 244.92
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 4,020.96
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 7,997.69
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00

Alameda's Benefit Contribution	$ 43,786.34
****Base Wages**	$ 104,544.96
TOTAL Investment In You	$ 148,331.30

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11690

ALAMEDA HOSPTIAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LORRAINE GIAMPAOLI

lgiampaoli@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	$ 110.07
Long Term Care Contribution	$ 617.50
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 4,455.36
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 25,480.16
****Base Wages**	$ 58,240.00
TOTAL Investment In You	$ 83,720.16

TOTAL Paid Time Off Days: **37 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11693

SYSTEM SUPPORT CENTER

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

MUNEET CHOHAN

mchohan@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
Long Term Care Contribution	$ 104.52
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 Taxes	$ 9,107.01
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 40,734.30
****Base Wages**	$ 121,379.86
TOTAL Investment In You	$ 162,114.15

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11694

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JULIA BELL

jubell@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 298.74
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 Taxes	$ 8,537.01
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 29,263.80
****Base Wages**	$ 111,594.91
TOTAL Investment In You	$ 140,858.71

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11726

2016

FAIRMONT HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

JENNIFER LARIZADEH

jlarizadeh@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	$ 15,983.76
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 381.68
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 8,536.72
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,388.33
****Base Wages**	$ 111,591.17
TOTAL Investment In You	$ 146,979.50

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

2016

Employee ID # 11727

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

GLORIA COATS

glcoats@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 440.96
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 Taxes	$ 9,228.98
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 30,673.89
****Base Wages**	$ 129,792.00
TOTAL Investment In You	$ 160,465.89

TOTAL Paid Time Off Days: **25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11729

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

VALERIE EDWARDS

vedwards@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		$ 0.00
Vision Reimbursement (fiscal yr 2016)		$ 0.00
Employer Paid Life		$ 27.04
Long Term Disability		$ 113.40
Long Term Care Contribution		$ 440.96
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 Taxes		$ 9,667.00
Workers' Compensation Insurance		$ 1,622.40
Federal Unemployment		$ 420.00

Alameda's Benefit Contribution	$ 22,375.77
****Base Wages**	$ 128,000.04
TOTAL Investment In You	$ 150,375.81

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11741

2016

SAN LEANDRO HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

LYNDA RENN-COSENZA

lcosenza@alamedahealthsystem.org

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

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 21,036.60
Dental	$ 1,218.36
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 100.25
Long Term Care Contribution	$ 228.54
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 4,179.29
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 35,900.02
****Base Wages**	$ 54,631.20
TOTAL Investment In You	$ 90,531.22

TOTAL Paid Time Off Days: **25 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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ALAMEDA HEALTH SYSTEM

Employee ID # 11742

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

ROSEMARY KIM

roskim@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 14 % of your income.

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

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 642.46
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 27.04
Long Term Disability	$ 113.40
Long Term Care Contribution	$ 360.10
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 10,224.39
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 31,012.54
****Base Wages**	$ 198,440.53
TOTAL Investment In You	$ 229,453.07

TOTAL Paid Time Off Days: **44 Days**

Total Accrued PTO/Vacation/Sick/Holiday per year

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Jeanette Louden-Corbett
Chief Human Resources Officer

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ALAMEDA HEALTH SYSTEM

Employee ID # 11745

2016

HIGHLAND HOSPITAL

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

BARTEL BROUSSARD

bbroussard@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
Long Term Care Contribution	$ 741.52
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 Taxes	$ 9,551.00
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 51,188.03
****Base Wages**	$ 152,000.16
TOTAL Investment In You	$ 203,188.19

TOTAL Paid Time Off Days: **44 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

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ALAMEDA HEALTH SYSTEM

Employee ID # 11775

2016 EASTMONT WELLNESS

THANK YOU FOR ALL THAT YOU DO FOR ALAMEDA HEALTH SYSTEM

CATHY WALKER cwalker@alamedahealthsystem.org

Alameda makes benefit contributions in the amount of 31 % of your income.
The percentage above does not include retirement contributions made on your behalf.

ALAMEDA'S INVESTMENT IN YOU

Medical	$ 10,517.78
Dental	$ 346.58
Vision Reimbursement (fiscal yr 2016)	$ 0.00
Employer Paid Life	$ 9.62
Long Term Disability	$ 102.21
Long Term Care Contribution	$ 284.44
Flexible Spending Account Costs	$ 59.28
Annual Cobra Flex Admin Costs	$ 3.73
Vacation/PTO Sell-Back (fiscal yr 2016)	$ 0.00
Tuition Reimbursement (fiscal yr 2016)	$ 0.00
EAP Account Costs	$ 21.96
Medicare & Social Security Taxes	$ 4,302.60
Workers' Compensation Insurance	$ 1,622.40
Federal Unemployment	$ 420.00
Alameda's Benefit Contribution	$ 24,690.61
****Base Wages**	$ 56,243.20
TOTAL Investment In You	$ 80,933.81
TOTAL Paid Time Off Days: *Total Accrued PTO/Vacation/Sick/Holiday per year*	**40 Days**

**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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