



HOLMES
SHOES SINCE 1887
HEALTHCARE

Questions for New Healthcare Customers

1. Company Name: _____
Company Address: _____
Company Telephone # _____

2. Do your work duties require a Slip Resistant Shoe? Yes No

3. Do you offer a Voucher Program/Subsidy? Yes No
Is it an annual renewal? Yes No
Or is it from the date of last purchase? Yes No
Is it the same for everyone? Yes No

4. Do you allow Payroll Deduction? Yes No

5. Human Resources Director's Name? _____
Accounts Payable Name? _____
eBilling? _____
Email addresses? _____

6. Do you currently have another shoe vendor? Yes No
If yes, who? _____

7. How big is your workforce? _____

8. What other walk-in stores do employees use? _____