

Weather Appropriate Clothing Marketplace



SB 1152 Discharge Planning for Homeless Patients

Communities Lifting Communities (CLC) has partnered with Bob Barker Company, Inc. to offer hospitals and other health care and homeless service providers a discount on weather-appropriate clothing.

As an Association member and/or provider of services to homeless individuals, you will be able to take advantage of an average discount of 25% on clothing, undergarments, jackets, ponchos, shoes and socks in many sizes.

To learn more and create an account, visit:

<https://CLC.BobBarker.com>



COMMUNITIES
LIFTING COMMUNITIES



HOSPITAL
ASSOCIATION
OF SOUTHERN CALIFORNIA®

Karen Ochoa
Program Manager
CLC/HASC
kochoa@hasc.org



Welcome, HASC Members and Providers!

Thank you for your interest in becoming a Bob Barker Customer! We look forward to our partnership. We strive to offer our customers the very best service in the industry and we are delighted you have chosen us to fulfill your needs.

Please find below important steps and information to help you begin the application process.

1. Please fill out the New Account Application form.
2. Please fill out the Credit Application form (including Trade References).
Please note: Completion of the credit application and references is required before an account can be set up. Please also list all credit contact names and phone numbers to expedite application process.
3. If your facility is tax exempt, please include a copy of your Tax-Exempt Certificate.

Once you have completed your New Account Application, Credit Application and Tax-Exempt Certificate (if applicable) please submit to debbiesargent@bobbarker.com.

If you have any questions, please feel free to reach out!

Debbie Sargent
Bob Barker Customer Service Specialist
800-334-9880
debbiesargent@bobbarker.com

Suzanne Chung
Bob Barker Account Manager
949-343-2112
suzannechung@bobbarker.com







Welcome aboard! We look forward to hearing from you soon.

Best regards,
The Bob Barker Team

Bob Barker[®]

Clothing Items from Bob Barker Company						
Description	Vendor Part #	Manufacturer Part#	Qty of Eaches	UOM	Pricing (good thru 6/2020)	Picture
Sweatshirt,Gray,Small	SSGY-S	SSGY-S	1	EA	\$ 7.00	
Sweatshirt,Gray,Med.	SSGY-M	SSGY-M	1	EA	\$ 7.00	
Sweatshirt,Gray,Large	SSGY-L	SSGY-L	1	EA	\$ 7.00	
Sweatshirt,Gray,XL	SSGY-XL	SSGY-XL	1	EA	\$ 7.00	
Sweatshirt,Gray,2XL	SSGY-2XL	SSGY-2XL	1	EA	\$ 8.03	
Sweatshirt,Gray,3XL	SSGY-3XL	SSGY-3XL	1	EA	\$ 9.61	
Sweatshirt,Gray,4XL	SSGY-4XL	SSGY-4XL	1	EA	\$ 9.61	
Sweatshirt,Gray,5XL	SSGY-5XL	SSGY-5XL	1	EA	\$ 9.85	
Sweatshirt,Gray,6XL	SSGY-6XL	SSGY-6XL	1	EA	\$ 10.74	
Sweatshirt,Gray,8XL, 45/55	SSGY-8XL	SSGY-8XL	1	EA	\$ 12.31	
Sweatshirt,Gray,10XL, 45/55	SSGY-10XL	SSGY-10XL	1	EA	\$ 13.09	
Sweatpant, Gray 50/50	SPGY-S	SPGY-S	1	EA	\$ 7.00	
Sweatpant, Gray 50/50	SPGY-M	SPGY-M	1	EA	\$ 7.00	
Sweatpant, Gray 50/50	SPGY-L	SPGY-L	1	EA	\$ 7.00	
Sweatpant, Gray 50/50	SPGY-XL	SPGY-XL	1	EA	\$ 7.00	
Sweatpant, Gray 50/50	SPGY-2XL	SPGY-2XL	1	EA	\$ 8.03	
Sweatpant, Gray 50/50	SPGY-3XL	SPGY-3XL	1	EA	\$ 9.61	
Sweatpant, Gray 50/50	SPGY-4XL	SPGY-4XL	1	EA	\$ 9.61	
Sweatpant, Gray 50/50	SPGY-5XL	SPGY-5XL	1	EA	\$ 9.85	
Sweatpant, Gray 50/50	SPGY-6XL	SPGY-6XL	1	EA	\$ 10.74	
Sweatpant, Gray 50/50	SPGY-8XL	SPGY-8XL	1	EA	\$ 12.31	
Sweatpant, Gray 50/50	SPGY-10XL	SPGY-10XL	1	EA	\$ 13.29	
Sock, White Tube	1700-W	1700-W	12	DZ	\$ 6.72	
Sock, Crew White	WC	WC	12	DZ	\$ 6.33	
Boxers White Size Small	EBXLSQ-S	EBXLSQ-S	12	DZ	\$ 16.93	
Boxers White Size Medium	EBXLSQ-M	EBXLSQ-M	12	DZ	\$ 16.93	
Boxers White Size Large	EBXLSQ-L	EBXLSQ-L	12	DZ	\$ 16.93	
Boxers White Size XLarge	EBXLSQ-XL	EBXLSQ-XL	12	DZ	\$ 16.93	
Boxers White Size 2XLarge	EBXLSQ-2XL	EBXLSQ-2XL	12	DZ	\$ 19.80	
Boxers White Size 3XLarge	EBXLSQ-3XL	EBXLSQ-3XL	12	DZ	\$ 19.80	
Boxers White Size 4XLarge	EBXLSQ-4XL	EBXLSQ-4XL	12	DZ	\$ 19.80	
Boxers White Size 5XLarge	EBXLSQ-5XL	EBXLSQ-5XL	12	DZ	\$ 25.21	
Boxers White Size 6XLarge	EBXLSQ-6XL	EBXLSQ-6XL	12	DZ	\$ 25.21	
Boxers White Size 7XLarge	EBXLSQ-7XL	EBXLSQ-7XL	12	DZ	\$ 25.21	
Boxers White Size 8XLarge	EBXLSQ-8XL	EBXLSQ-8XL	12	DZ	\$ 25.21	
Boxers White Size 9XLarge	EBXLSQ-9XL	EBXLSQ-9XL	12	DZ	\$ 28.82	
Boxers White Size 10XLarge	EBXLSQ-10XL	EBXLSQ-10XL	12	DZ	\$ 28.82	

Clothing Items from Bob Barker Company

Description	Vendor Part #	Manufacturer Part#	Qty of Eaches	UOM	Pricing (good thru 6/2020)	Picture	
Shoe, Mens Navy Step-in 5	155NV-5	155NV-5	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 6	155NV-6	155NV-6	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 7	155NV-7	155NV-7	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 8	155NV-8	155NV-8	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 9	155NV-9	155NV-9	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 10	155NV-10	155NV-10	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 11	155NV-11	155NV-11	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 12	155NV-12	155NV-12	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 13	155NV-13	155NV-13	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 14	155NV-14	155NV-14	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 15	155NV-15	155NV-15	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 16	155NV-16	155NV-16	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 5.5	155NV-5.5	155NV-5.5	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 6.5	155NV-6.5	155NV-6.5	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 7.5	155NV-7.5	155NV-7.5	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 8.5	155NV-8.5	155NV-8.5	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 9.5	155NV-9.5	155NV-9.5	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 10.5	155NV-10.5	155NV-10.5	1	PR	\$ 4.13		
Shoe, Mens Navy Step-in 11.5	155NV-11.5	155NV-11.5	1	PR	\$ 4.13		
EVA Footwear, Black Sz 3	EVA-BK-3	EVA-BK-3	12	DZ	\$ 42.96		
EVA Footwear, Black Sz 4	EVA-BK-4	EVA-BK-4	12	DZ	\$ 42.96		
EVA Footwear, Black Sz 5	EVA-BK-5	EVA-BK-5	12	DZ	\$ 42.96		
EVA Footwear, Black Sz 6	EVA-BK-6	EVA-BK-6	12	DZ	\$ 42.96		
EVA Footwear, Black Sz 7	EVA-BK-7	EVA-BK-7	12	DZ	\$ 42.96		
EVA Footwear, Black Sz 8	EVA-BK-8	EVA-BK-8	12	DZ	\$ 42.96		
EVA Footwear, Black Sz 9	EVA-BK-9	EVA-BK-9	12	DZ	\$ 42.96		
EVA Footwear, Black Sz 10	EVA-BK-10	EVA-BK-10	12	DZ	\$ 42.96		
EVA Footwear, Black Sz 11	EVA-BK-11	EVA-BK-11	12	DZ	\$ 42.96		
EVA Footwear, Black Sz 12	EVA-BK-12	EVA-BK-12	12	DZ	\$ 42.96		
EVA Footwear, Black Sz 13	EVA-BK-13	EVA-BK-13	12	DZ	\$ 42.96		
EVA Footwear, Black Sz 14	EVA-BK-14	EVA-BK-14	12	DZ	\$ 42.96		
EVA Footwear, Black Sz 15	EVA-BK-15	EVA-BK-15	12	DZ	\$ 42.96		
Poncho, Vinyl Rain Clear	VRP	VRP	12	DZ	\$ 33.69		
Poncho, Vinyl Rain Orange	VRP-OR	VRP-OR	12	DZ	\$ 31.86		
Jacket, Coaches Black Sz Small	ZCJ-BK-S	3100	1	EA	\$ 16.51		Drop ship; allow 3-4 weeks for delivery
Jacket, Coaches Black Sz Med	ZCJ-BK-M	3100	1	EA	\$ 16.51		
Jacket, Coaches Black L	ZCJ-BK-L	3100	1	EA	\$ 16.51		
Jacket, Coaches Black XL	ZCJ-BK-XL	3100	1	EA	\$ 16.51		
Jacket, Coaches Black 2XL	ZCJ-BK-2XL	3100	1	EA	\$ 19.05		
Jacket, Coaches Black 3XL	ZCJ-BK-3XL	3100	1	EA	\$ 20.74		
Jacket, Coaches Black 4XL	ZCJ-BK-4XL	3100	1	EA	\$ 22.39		
Jacket, Coaches Black 5XL	ZCJ-BK-5XL	3100	1	EA	\$ 24.08		
Scarf, Acrylic Knit, Heather Gr	ZFS01-HGY	ZFS01-HGY	1	EA	\$ 5.98		Drop ship; allow 3-4 weeks for delivery
Glove, String Knit, Gray	KGLMN	KGLMN	12	CS	\$ 6.71		
Beanie, Navy, OSFA	102SK-NV	102SK-NV	12	DZ	\$ 15.27		



New Account Application

Phone: 1-888-772-0244 Website: www.bobbarker.com

Business/Facility Information: What type of Organization? (Please check box below)

Nursing/Healthcare Mental Health Salvation Army/Homeless Other

Bill to:	Ship to: (Do you have a loading dock? Yes No)
Facility Name	Facility Name
Mailing Address	Street Address
City County	City County
State Zip	State Zip
Finance/Accounting Contact	Purchasing Contact
Phone Fax	Phone Fax
E-mail Address	E-mail Address

Fiscal Budget Begins: **Tax Exempt #:** *(Please fax tax exempt certificate to 1-800-322-7537)*

Private: Profit Non-Profit Receive special discounts, new products and company news!

Authorized Website Users

Please enter the appropriate information below for the person(s) from your facility who are authorized to place online orders:

First Name	Last Name	First Name	Last Name
Email Address		Email Address	
Phone	Ext.	Phone	Ext.
Job Title		Job Title	
Should this person be considered the Primary Contact at your facility?		Should this person be considered the Primary Contact at your facility?	
Yes	No	Yes	No
First Name	Last Name	First Name	Last Name
Email Address		Email Address	
Phone	Ext.	Phone	Ext.
Job Title		Job Title	
Should this person be considered the Primary Contact at your facility?		Should this person be considered the Primary Contact at your facility?	
Yes	No	Yes	No



Credit Application

Phone: 919-552-3431 | Fax: 919-552-5097

Date: _____ **Business Name:** _____ **Phone:** _____

Address for past years: _____ (Street/PO Box) _____ (City) _____ (State) _____ (Zip Code)

Shipping Address: _____ (Street/PO Box) _____ (City) _____ (State) _____ (Zip Code)

Doing business as: _____ **Federal Tax ID Number:** _____

Former Business Address (if Applicable): _____ (Street/PO Box) _____ (City) _____ (State) _____ (Zip Code)

Type of Business: _____ **Date Established:** _____ **How Long in Business:** _____

Ownership: For Profit Not for Profit Government

Principal/Officer: _____ (Name) _____ (City) _____ (State) _____ (Zip Code)

Principal/Officer: _____ (Name) _____ (City) _____ (State) _____ (Zip Code)

Bank Reference:

_____ (Name) _____ (Address) _____ (Acct. # & Type) _____ (Contact)

_____ (Name) _____ (Address) _____ (Acct. # & Type) _____ (Contact)

Purchasing Agent for Account: _____ (Name) _____ (Title) _____ (Phone)

Person Who Approves Payments: _____ (Name) _____ (Title) _____ (Phone)

Accounts Payable Contact: _____ (Name) _____ (Title) _____ (Phone)

No. of Employees: _____ **Est. Annual Sales \$:** _____ **Sales Area:** _____

Has the Firm or any of its Principals/Officers Ever Been Bankrupt? Yes No

If yes, Explain:

The Undersigned Will / Will Not Submit A Financial Statement.

Any Financial statements received by Bob Barker Company, Inc. are strictly for issuing credit. NO information will be released to any outside source whatsoever.

The Undersigned as an Inducement to grant credit warrants that the information submitted is true and correct. You are authorized to investigate the credit references listed above.

_____ (Name) _____ (Title) _____ (Name) _____ (Title)

PERSONAL GUARANTEE

In Consideration of credit being extended by Bob Barker Company, Inc. to the above named applicant for merchandise to be purchased whether applicant be an individual or individuals, a proprietorship, a partnership, a corporation, or other entity, the undersigned guarantor or guarantors each hereby contract and guarantee to Bob Barker Company, Inc. the faithful payment, when due, of all accounts of said applicant for purchases made within five years next after date of this application. The undersigned guarantor or guarantors each hereby expressly waive all notice of acceptance of this guarantee, notice of extension of credit to applicant, presentment, and demand for payment on applicant, protest and notice to undersigned guarantor or guarantors of dishonor or default by applicant or with respect to any security held by Bob Barker Company, Inc., extension of time of payment to applicant, acceptance of partial payment or partial compromise, all other notices to which the undersigned guarantor or guarantors might otherwise be entitled and demand for payment this guarantee. Any revocation of this agreement shall be in writing and delivered to Bob Barker Company, Inc. Attention Credit Department. PO Box 429 Fuquay-Varina, NC 27526.

Personal Signature:

Date:

Personal Signature:

Date:

Please note orders can not be shipped until application has been received

**Please fax or mail to
Bob Barker Company, Inc.
Attention: Accounting Dept.
P.O. Box 429
Fuquay Varina, N.C. 27526
Phone: (919) 552-3431
Fax: (919) 552-5097**

Accounting Information

Contact Name (AP):

Phone Number (AP):

Email Address (AP):

Fax Number (AP):

County:

Budget Year Begins:

How is Facility Funded?

Private City County State Federal

Who is the Facility Owned and Operated by?

Government (Has State, City, County, or Federal Employees) Private

Please Select Payment Option:

Check Credit Card Electronic Pay Pre Pay

Is Applicant Exempt from Paying Sales Tax: Yes No

If yes, you MUST attach Sales Tax Exemption Certificate or we will charges sales tax in the following States:
AZ, AK, CA, FL, GA, HI, ID, IS, IL IN, KS, KY, MD, MI, MN, NE, NV, NJ, NY, NC, OH, OK, PA, SC, SD, TN, TX, UT, VI, WA, WV, WI, WY

No. of Employees:

Est. Annual Sales \$:

Sales Area:

Has the Firm or any of its Principals/Officers Ever Been Bankrupt? Yes No

If yes, Explain:

****Bob Barker payment terms are Net; Payment upon receipt of invoice****

Trade References
Name suppliers of major products and services

*****Please make sure you provide as much information below to expedite your credit application*****

Name:

Contact Person:

Phone Number:

Fax Number:

Email Address:

Your Account Number:

Name:

Contact Person:

Phone Number:

Fax Number:

Email Address:

Your Account Number:

Name:

Contact Person:

Phone Number:

Fax Number:

Email Address:

Your Account Number: