



Attn: Customer Service Evaluator (CSE)
 Approved Survey Number 06628

PLEASE CONFIRM PACKAGE RECEIPT VIA TEXT TO Song Lee on 872 246-3439

Congratulations you have received your first assignment package.
 You have received a Check made payable to you in the amount of \$2,450. Please deduct your commission which is \$400. The remainder will be used for your assignment. Complete your (CSE) shopping assignment as stated below:

VANILLA VISA GIFT CARD / ONE VANILLA GIFT CARD ASSIGNMENT

Visit your Bank or Credit Union to have the check deposited. Funds will be available usually in 24 hours.

For your convenience you are to evaluate any of these stores near you, that have these gift cards.

Note: Try using your debit card to avoid moving cash around.

Below are some stores for ONEE33FVANILLA VISA GIFT CARD OR VANILLA VISA GIFT CARD.

- Note : If written "MY VANILLA" you are not to purchase. Only purchase One Vanilla or Vanilla Gift.
1. CVS 2. WALMART 3. TELEVEN 4. DOLLAR GENERAL 5. FAMILY DOLLAR 6. SPEEDWAY 7. KROGER

At any store you choose, Pick 4 (Four) ONE VANILLA or VANILLA VISA GIFT CARD (Find Sample Pictures Below)

Go to the register and add cash of \$500 to each card - Total: 4 x \$500 = \$2,000

Each card has an activation fee to be covered with \$20 leftover. Any excess funds should be stated in your report.

AFTER PURCHASE OF CARD

Open the pack, remove the label in front of the cards and capture clear image.(Front and back of each card) please send via email to EMPLOESONGLEEB612@GMAIL.COM

Do not register the card as stated on the front of the card. Please follow our assignment instructions as given.

Please do not discard the cards as it will be used for your 2nd assignment.

Here are the details we will need from the store:

- Store Name/Address: _____
- Date/ time of visit: _____
- Name of cashier if visible on name tag: _____
- How long did it take to check out: _____
- Customer Service Professionalism: Scale of 1 - 10 _____
- Captured images of card front and back (Phone camera accepted)
- Picture of receipt for proof of purchase (Phone camera accepted)



EMPLOESONGLEEB612@GMAIL.COM OR TEXT IMAGES TO 872 246-3439

Confirm that you receive the package via TEXT to: 872 246-3439

Best Regards,
 Song Lee

Song Lee - Client Services Representative - (C)2022 MS Personnel Agency

WARNING: THIS DOCUMENT HAS SECURITY FEATURES IN THE PAPER

Health Care Service Corporation

300 East Randolph
Chicago, Illinois 60601-5099

The Northern Trust Company

Chicago, IL
Payable Through
Oakbrook Terrace, IL

70-2382
719

1000021040
32046117

THIS CHECK IS VOID 1 YEAR AFTER DATE OF ISSUE

DATE	CHECK NO
10/24/22	32046117

DOLLARS	CENTS
\$\$\$2,450	00

CHECK OVER \$5,000 REQUIRE TWO SIGNATURES
HEALTH CARE SERVICE CORPORATION
OPERATING ACCOUNT

P. E. N. N. N.

PAY *****2,450 DOLLARS 00 CENTS

TO
THE
ORDER
OF
PATRICIA LEE

⑆32046117⑆ ⑆071923828⑆030895400⑆