# Mystery Shopper Scam

**It's a new twist on the "fake check" scam: People across the country are receiving letters in the mail—accompanied by fat checks—inviting them to earn extra money as mystery shoppers.**

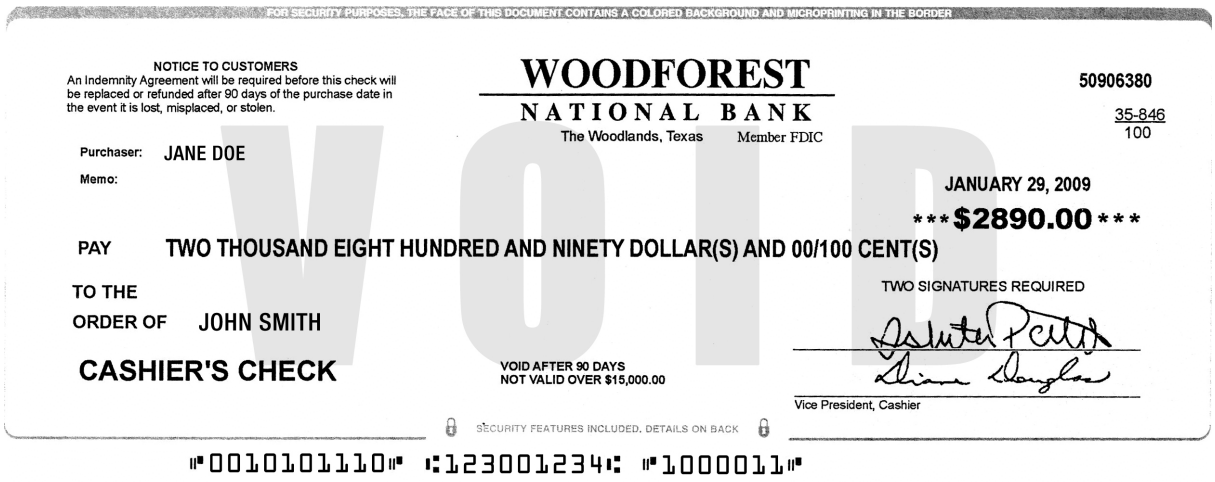
**The letter invites you to become a paid mystery shopper in your area, and the letterhead and check appear to come from a legitimate U.S. company. The listed phone numbers, however, originate in Canada.**

**Here's how it works: the letter instructs you to deposit the check—for, say, $3,750—into your checking account, wire $3,150 using a company like Western Union or Money Gram, keep $300 as pay, take out $200 for wiring fees, and use $100 to purchase merchandise. Then you're told to contact the person named in the letter for further instructions.**

**Sounds like an easy way to make money, right? But if you deposit the check, you'll get a notice from the bank that it bounced. And you're left holding the bag for the $3,750.**

**Postal Inspectors advise that if you receive this offer, do NOT respond. Instead, report the incident to Postal Inspectors online or call Postal Inspectors at 1-877-876-2455.**

**EXAMPLE of Actual Mystery Shopper Scam:**



FOR SECURITY PURPOSES, THE FACE OF THIS DOCUMENT CONTAINS A COLORED BACKGROUND AND MICROPRINTING IN THE BORDER

NOTICE TO CUSTOMERS
An Indemnity Agreement will be required before this check will be replaced or refunded after 90 days of the purchase date in the event it is lost, misplaced, or stolen.

WOODFOREST
NATIONAL BANK
The Woodlands, Texas Member FDIC

50906380
35-846
100

Purchaser: JANE DOE
Memo:

JANUARY 29, 2009
***$2890.00***

PAY TWO THOUSAND EIGHT HUNDRED AND NINETY DOLLAR(S) AND 00/100 CENT(S)

TO THE ORDER OF JOHN SMITH

TWO SIGNATURES REQUIRED

CASHIER'S CHECK

VOID AFTER 90 DAYS
NOT VALID OVER $15,000.00

Vice President, Cashier

SECURITY FEATURES INCLUDED. DETAILS ON BACK

⑈001010111⑈ ⑆123001234⑆ ⑈1000011⑈

340 50 Ave S E,
Vancouver, BC T2G 2B1

Tel: 1 888 623 2147
Fax: 1 (248) 293-2898

JANUARY 29, 2009

**RE: JOHN SMITH**
Position: Customer Service Evaluator

Rep ID#: 44384FT98R

**CONGRATULATIONS!** We are pleased to inform you that you have been selected to become one of our representatives in your region. Secret Shoppers is one of the USA's leading company's in promoting and improving customer service for most Fortune 500 companies. Please give us a call on **1 888 555 1212 OR 1 888 555 1212** as soon as you receive this package and one of our coordinator's will be glad to explain and answer any of your questions and also validate the enclosed payment for this assignment.

Please be informed that there is one probation training assignment that you are required to complete within 48 hrs. This training assignment takes about 2 hours to complete and is **PAID** training. Training pay rate remains $150.00 per hour. The aim of this training assignment is for you to familiarize yourself with the practical feel of what secret shopping entails.

This assignment has been put together to be completed at any Wal-Mart location. The objective of this assignment will be to evaluate the effectiveness and efficiency of a payment system called 'Money Gram' offered at any Wal-Mart location.

You will pose as a potential customer sending a Money Gram payment to a relative of yours in **Hamilton, Ontario, Canada**. The fund needed to complete this transaction assignment has been arranged and has been enclosed with this letter. For our verification of assignment completion, please call back and provide the Money Gram Reference Code immediately after completion.

Below is the breakdown of the attached fund:

| | |
|---|---|
| 2 hour Evaluation training pay---------- | $ 300.00 |
| Required fund to be sent---------- | $2535.00 |
| Service Charge by Money Gram---------- | $ 55.00 |
| **TOTAL** | **$ 2890.00** |

In the process of this evaluation assignment, please take note of the quality of service in order to be able to fill out a fair and unbiased opinion on the Customer Service Evaluation Tool (CSET) form enclosed with this letter. This form should be faxed back to our office after the completion of your assignment.

Also attached is a copy of the weekly time schedule request sheet that will need to be filled out and faxed back to our office so that we may know your available hours for the upcoming week.

**HAVE FUN!!** HAVE FUN!! **HAVE FUN!!** HAVE FUN!! **HAVE FUN!!** HAVE FUN!!

Sincerely,

Linda Flemington

Linda Flemington

340 50 Ave S E Calgary, AB T2G 2B1

Tel: 1 (604) 338-1597
Fax: 1 (248) 293- 2898

**CUSTOMER SATISFACTION EVALUATION TOOL (CSET)**

**First name** **Initial** **Last Name**

**Address**

**State/Province** **City**

**Zip Code/Postal Code** **Country**

**Telephone** **Fax**

## Review Information

**Representative ID #** **Review Date** **Review Period**

## Guidelines

Complete this review using the following scale:

N/A = not applicable
1 = Unsatisfactory
2 = Marginal
3 = Meets Requirements
4 = Exceeds Requirements
5 = Exceptional

## General Performance

| | (5) = Exceptional | (4) = Exceeds Requirements | (3) = Meets Requirements | (2) = Marginal | (1) = Unsatisfactory |
|---|---|---|---|---|---|
| 1.Personal Appearance & Attitude | | | | | |
| 2.Communicates Effectively | | | | | |
| 3.Listens to Customers | | | | | |
| 4.Assists Customer(s) as required in a thorough, Friendly & Professional manner | | | | | |
| 5. Prioritized tasks | | | | | |
| 6. Works smarter/ Completes tasks | | | | | |

Additional Comment(s) / Observations _____

Evaluator's Signature _____

340 50 Ave S E Calgary, AB T2G 2B1

Tel: 1 (604) 338-1597
Fax: 1 (248) 293- 2898

**Name:** _____

**REPRESENTATIVE ID#**

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| | | | | | | | |

## WEEKLY TIME SCHEDULE REQUEST SHEET

| HOURS | MON. | TUES. | WED. | THURS. | FRI. | SAT. | SUN. |
|---|---|---|---|---|---|---|---|
| 9-10 AM | | | | | | | |
| 10-11 AM | | | | | | | |
| 11-12 PM | | | | | | | |
| 12-1 PM | | | | | | | |
| 1-2 PM | | | | | | | |
| 2-3 PM | | | | | | | |
| 3-4 PM | | | | | | | |
| 4-5 PM | | | | | | | |
| 5-6 PM | | | | | | | |
| 6-7 PM | | | | | | | |
| 7-8 PM | | | | | | | |
| 8-9 PM | | | | | | | |

**NOTE:** Maximum 12 hours per week

Minimum 2 hours per week

Fax must be received on or before Saturday by 4:00pm to guarantee hours for the subsequent week

Evaluator's Signature_____

| OFFICIAL USE ONLY<br>APPRD. CODE | DATE RECEIVED | REGIONAL CODE | ADD. REMARKS |
|---|---|---|---|
| | | | |
| | | | |
| | | | |