

## LINE LEVEL QUANTITY DISCREPANCY

Claim Number: 000000000165290

Claim Line #: 0002

Per Unit Cost: \$26.9000-

Claim Date: 11/09/2022

Claim Quantity: 16.00

Extended Claim Amount: \$430.40-

Deduction: 0022 - MDSE BILLED NOT SHIPPED

**Invoice**

Invoice: 000000000165290	Date: 08/23/2022	
Matched Qty: 42.00	Total Qty: 42.00	Cost Each: \$26.90
Line #: 0021	Item: 030224788	Description: D/Q RED WC13-802

**Received**

Receiver: 000307888		
PO: 140890921	PO Date: 08/22/2022	
Matched Qty: 26.00	Total Qty: 26.00	Cost Each: \$26.9000
Line #: 0007	Item: 030224788	Description: CAN BUFF DUV COV DQ