

## LINE LEVEL QUANTITY DISCREPANCY

Claim Number: 000000000169897

Claim Line #: 0003

Per Unit Cost: \$25.0000-

Claim Date: 02/16/2023

Claim Quantity: 16.00

Extended Claim Amount: \$400.00-

Deduction: 0022 - MDSE BILLED NOT SHIPPED

### Invoice

Invoice: 000000000169897	Date: 11/22/2022	
Matched Qty: 16.00	Total Qty: 16.00	Cost Each: \$25.00
Line #: 0010	Item: 030375965	Description: KING WHITE WC12-513

### Received

Receiver: 000000000		
PO: 142379579	PO Date: 11/21/2022	
Matched Qty: 0.00	Total Qty: 0.00	Cost Each: \$0.0000
Line #: 0000	Item: 000000000	Description: