

LINE LEVEL QUANTITY DISCREPANCY

Claim Number: 000000000177312

Claim Line #: 0001

Per Unit Cost: \$30.1200-

Claim Date: 10/02/2023

Claim Quantity: 2.00

Extended Claim Amount: \$60.24-

Deduction: 0022 - MDSE BILLED NOT SHIPPED

Invoice

Invoice: 000000000177312	Date: 07/11/2023	
Matched Qty: 28.00	Total Qty: 28.00	Cost Each: \$30.12
Line #: 0051	Item: 031079303	Description: D/Q BLUSH WC10-614

Received

Receiver: 000779833		
PO: 146090636	PO Date: 07/10/2023	
Matched Qty: 26.00	Total Qty: 26.00	Cost Each: \$30.1150
Line #: 0044	Item: 031079303	Description: MSK RAINA 3PC COM DQ