

LINE LEVEL QUANTITY DISCREPANCY

Claim Number: 000000000185158

Claim Line #: 0002

Per Unit Cost: \$47.5300-

Claim Date: 02/15/2024

Claim Quantity: 1.00

Extended Claim Amount: \$47.53-

Deduction: 0022 - MDSE BILLED NOT SHIPPED

Invoice

Invoice: 000000000185158	Date: 11/27/2023	
Matched Qty: 151.00	Total Qty: 151.00	Cost Each: \$47.53
Line #: 0013	Item: 031079056	Description: DOUBLEBLACK WC10-738

Received

Receiver: 000922762		
PO: 148402835	PO Date: 11/27/2023	
Matched Qty: 150.00	Total Qty: 150.00	Cost Each: \$47.5300
Line #: 0014	Item: 031079056	Description: MS BIAB BUFF BLK D B