

LINE LEVEL QUANTITY DISCREPANCY

Claim Number: 000000000186988

Claim Line #: 0002

Per Unit Cost: \$3.9000-

Claim Date: 03/17/2024

Claim Quantity: 4.00

Extended Claim Amount: \$15.60-

Deduction: 0022 - MDSE BILLED NOT SHIPPED

Invoice

Invoice: 000000000186988	Date: 12/27/2023	
Matched Qty: 20.00	Total Qty: 20.00	Cost Each: \$3.90
Line #: 0022	Item: 031388566	Description: STD LEOPRDWC21-536

Received

Receiver: 000936640		
PO: 148885494	PO Date: 12/25/2023	
Matched Qty: 16.00	Total Qty: 16.00	Cost Each: \$3.9000
Line #: 0024	Item: 031388566	Description: CS 2PC SATIN PC LEO