

LINE LEVEL QUANTITY DISCREPANCY

Claim Number: 000000000189742

Claim Line #: 0001

Per Unit Cost: \$29.1000-

Claim Date: 06/15/2024

Claim Quantity: 2.00

Extended Claim Amount: \$58.20-

Deduction: 0022 - MDSE BILLED NOT SHIPPED

Invoice

| | | |
|--------------------------|------------------|---------------------------------|
| Invoice: 000000000189742 | Date: 03/25/2024 | |
| Matched Qty: 12.00 | Total Qty: 12.00 | Cost Each: \$29.10 |
| Line #: 0034 | Item: 050226934 | Description: QUEEN GRYPDW20-102 |

Received

| | | |
|---------------------|---------------------|-----------------------------------|
| Receiver: 000011864 | | |
| PO: 150429008 | PO Date: 03/25/2024 | |
| Matched Qty: 10.00 | Total Qty: 10.00 | Cost Each: \$29.1000 |
| Line #: 0036 | Item: 050226934 | Description: CAN PRINT SS GRYPD Q |