

LINE LEVEL QUANTITY DISCREPANCY

Claim Number: 000000000190723

Claim Line #: 0002

Per Unit Cost: \$3.9000-

Claim Date: 08/04/2024

Claim Quantity: 4.00

Extended Claim Amount: \$15.60-

Deduction: 0022 - MDSE BILLED NOT SHIPPED

Invoice

Invoice: 000000000190723	Date: 05/13/2024	
Matched Qty: 16.00	Total Qty: 16.00	Cost Each: \$3.90
Line #: 0007	Item: 030400804	Description: STD PRINT WC21-543

Received

Receiver: 000012105		
PO: 151280244	PO Date: 05/13/2024	
Matched Qty: 12.00	Total Qty: 12.00	Cost Each: \$3.9000
Line #: 0008	Item: 030400804	Description: 2PC SATIN PC PRT 1 2