

LINE LEVEL QUANTITY DISCREPANCY

Claim Number: 000000000190723

Claim Line #: 0001

Per Unit Cost: \$67.9000-

Claim Date: 08/04/2024

Claim Quantity: 2.00

Extended Claim Amount: \$135.80-

Deduction: 0022 - MDSE BILLED NOT SHIPPED

Invoice

Invoice: 000000000190723	Date: 05/13/2024	
Matched Qty: 4.00	Total Qty: 4.00	Cost Each: \$67.90
Line #: 0015	Item: 050352228	Description: KING BLACK WC10-935

Received

Receiver: 000012105		
PO: 151280244	PO Date: 05/13/2024	
Matched Qty: 2.00	Total Qty: 2.00	Cost Each: \$67.9000
Line #: 0025	Item: 050352228	Description: MP COMF AUBRY BLK K