

**LINE LEVEL QUANTITY DISCREPANCY**

Claim Number: 000000000191103

Claim Line #: 0005

Per Unit Cost: \$44.1000-

Claim Date: 08/26/2024

Claim Quantity: 1.00

Extended Claim Amount: \$44.10-

Deduction: 0022 - MDSE BILLED NOT SHIPPED

**Invoice**

|                          |                  |                                   |
|--------------------------|------------------|-----------------------------------|
| Invoice: 000000000191103 | Date: 06/04/2024 |                                   |
| Matched Qty: 36.00       | Total Qty: 36.00 | Cost Each: \$44.10                |
| Line #: 0014             | Item: 031079056  | Description: DOUBLEBLACK WC10-738 |

**Received**

|                     |                     |                                   |
|---------------------|---------------------|-----------------------------------|
| Receiver: 000056731 |                     |                                   |
| PO: 151638509       | PO Date: 06/03/2024 |                                   |
| Matched Qty: 35.00  | Total Qty: 35.00    | Cost Each: \$44.1000              |
| Line #: 0013        | Item: 031079056     | Description: MS BIAB BUFF BLK D B |