

LINE LEVEL QUANTITY DISCREPANCY

Claim Number: 000000000191103

Claim Line #: 0003

Per Unit Cost: \$43.0000-

Claim Date: 08/26/2024

Claim Quantity: 16.00

Extended Claim Amount: \$688.00-

Deduction: 0022 - MDSE BILLED NOT SHIPPED

Invoice

Invoice: 000000000191103	Date: 06/04/2024	
Matched Qty: 16.00	Total Qty: 16.00	Cost Each: \$43.00
Line #: 0008	Item: 030375972	Description: DB/QN BLUE WC14-510

Received

Receiver: 000056731		
PO: 151638509	PO Date: 06/03/2024	
Matched Qty: 0.00	Total Qty: 0.00	Cost Each: \$43.0000
Line #: 0006	Item: 030375972	Description: HT QUILT PATCH D/Q B