

LINE LEVEL QUANTITY DISCREPANCY

Claim Number: 000000000191489

Claim Line #: 0001

Per Unit Cost: \$29.3300-

Claim Date: 09/15/2024

Claim Quantity: 6.00

Extended Claim Amount: \$175.98-

Deduction: 0022 - MDSE BILLED NOT SHIPPED

Invoice

Invoice: 000000000191489	Date: 06/24/2024	
Matched Qty: 6.00	Total Qty: 6.00	Cost Each: \$29.33
Line #: 0022	Item: 031079308	Description: KING MULTI WC14-742

Received

Receiver: 000000000		
PO: 152004066	PO Date: 06/24/2024	
Matched Qty: 0.00	Total Qty: 0.00	Cost Each: \$0.0000
Line #: 0000	Item: 000000000	Description: