

LINE LEVEL QUANTITY DISCREPANCY

Claim Number: 000000000192945

Claim Line #: 0002

Per Unit Cost: \$24.1000-

Claim Date: 12/14/2024

Claim Quantity: 2.00

Extended Claim Amount: \$48.20-

Deduction: 0022 - MDSE BILLED NOT SHIPPED

Invoice

Invoice: 000000000192945	Date: 09/18/2024	
Matched Qty: 38.00	Total Qty: 38.00	Cost Each: \$24.10
Line #: 0051	Item: 050352239	Description: DQ BLACK WC12-962

Received

Receiver: 000341794		
PO: 153473612	PO Date: 09/18/2024	
Matched Qty: 36.00	Total Qty: 36.00	Cost Each: \$24.1000
Line #: 0053	Item: 050352239	Description: MP DC DOBBY BLK DQ M