

LINE LEVEL QUANTITY DISCREPANCY

Claim Number: 000000000194093

Claim Line #: 0002

Per Unit Cost: \$33.1900-

Claim Date: 02/02/2025

Claim Quantity: 2.00

Extended Claim Amount: \$66.38-

Deduction: 0022 - MDSE BILLED NOT SHIPPED

Invoice

Invoice: 000000000194093	Date: 11/06/2024	
Matched Qty: 20.00	Total Qty: 20.00	Cost Each: \$33.19
Line #: 0017	Item: 030223654	Description: D/Q MULTI WC14-791

Received

Receiver: 000383184		
PO: 154305652	PO Date: 11/06/2024	
Matched Qty: 18.00	Total Qty: 18.00	Cost Each: \$33.1900
Line #: 0002	Item: 030223654	Description: MS QUILT GLOBST DQ M