

LINE LEVEL QUANTITY DISCREPANCY

Claim Number: 000000000197362

Claim Line #: 0002

Per Unit Cost: \$37.6300-

Claim Date: 04/27/2025

Claim Quantity: 3.00

Extended Claim Amount: \$112.89-

Deduction: 0022 - MDSE BILLED NOT SHIPPED

Invoice

Invoice: 000000000197362	Date: 02/04/2025	
Matched Qty: 150.00	Total Qty: 150.00	Cost Each: \$37.63
Line #: 0023	Item: 031079013	Description: D/Q WHITE WC10-641

Received

Receiver: 000165361		
PO: 155782802	PO Date: 02/03/2025	
Matched Qty: 147.00	Total Qty: 147.00	Cost Each: \$37.6300
Line #: 0024	Item: 031079013	Description: MS COMF KISSPL DQ CO