

LINE LEVEL QUANTITY DISCREPANCY

Claim Number: 000000000198465

Claim Line #: 0001

Per Unit Cost: \$29.1000-

Claim Date: 07/17/2025

Claim Quantity: 2.00

Extended Claim Amount: \$58.20-

Deduction: 0022 - MDSE BILLED NOT SHIPPED

Invoice

Invoice: 000000000198465	Date: 04/28/2025	
Matched Qty: 20.00	Total Qty: 20.00	Cost Each: \$29.10
Line #: 0013	Item: 050226934	Description: QUEEN GRYPDW20-102

Received

Receiver: 000257045		
PO: 157224799	PO Date: 04/28/2025	
Matched Qty: 18.00	Total Qty: 18.00	Cost Each: \$29.1000
Line #: 0021	Item: 050226934	Description: CAN PRINT SS GRYPD Q