

LINE LEVEL QUANTITY DISCREPANCY

Claim Number: 00000000081635
 Claim Date: 08/04/2020
 Deduction: 0022 - MDSE BILLED NOT SHIPPED

Claim Line #: 0001
 Claim Quantity: 2.00

Per Unit Cost: \$41.5800-
 Extended Claim Amount: \$83.16-

Invoice

Invoice: 00000000081635		Date: 05/06/2020	
Matched Qty: 62.00	Total Qty: 62.00	Cost Each: \$41.58	
Line #: 0014	Item: 030376957	Description: KING GREY WC10-495	

Received

Receiver: 000826225			
PO: 127873526		PO Date: 05/06/2020	
Matched Qty: 60.00	Total Qty: 60.00	Cost Each: \$41.5800	
Line #: 0004	Item: 030376957	Description: MS BIAB GKEY K BLK B	