

**NATIONAL TREASURY (NT)**

**MONTHLY REPORT - FINANCE MANAGEMENT GRANT (FMG) - DIVISION OF REVENUE ACT (DoRA)**

Note - Must be faxed to - 012 - 315 5230 & emailed to fmg@treasury.gov.za. The municipality is required to confirm receipt by calling 012 315 5145/5322 or 012 395 6506/6542

Note - Fields highlighted in yellow should be completed. Other fields are automated and reserved for comments. The Municipality is required to provide comments and supporting documentation where necessary.

<b>Name of Municipality</b>	NCO73 Emthanjeni
<b>Financial Year</b>	2012/13
<b>Month</b>	M01 July

**Section A: Previous Financial Year**

<b>Financial Management Grant Received and Expenditure Incurred</b>	<b>2011/12</b>	<b>Rand</b>	<b>Comment</b>
Total FMG received		1,450,000.00	
Total FMG Expenditure		1,450,000.00	
FMG unspent		0.00	Note - If funds committed, provide supporting documentation by 15 July
FMG unspent and returned to the National Revenue Fund		0.00	
Total FMG unspent as at end of financial year		0.00	Note - This should be monies approved by NT as rollover

**Section B: Current Financial Year** 2012/13

<b>Financial Management Grant Received and Expenditure Incurred</b>	<b>Rand</b>	<b>Comment</b>
Total FMG received for current financial year	1,500,000.00	
Total unspent FMG approved for rollover (Refer to Section A: A15)	0.00	
Total FMG received	1,500,000.00	
Total spent year -to-date (See last months return - Section A: A34)	0.00	
Total spending this month	89,718.28	
- Interns Stipend/Salary and Training	72,808.27	
- Training in support of Minimum Competency Regulations		
- Towards Budget and Treasury Office (BTO) capacity	16,910.01	
- Towards Internal Audit (IA) capacity		
- Towards Asset Management		
- Acquisition, Upgrading and Maintenance of Financial Systems		
- Preparation and compilation of Financial Statements		
- Preparation and Compilation of Audit Action Plans		
- Preparation and Implementation of Financial Recovery Plans		
Total FMG spent	89,718.28	
Percentage spent	5.98	
<b>Total FMG unspent for current financial year</b>	<b>1,410,281.72</b>	Note - AO/MM must return any unspent FMG allocations not approved for rollover, to the National Revenue Fund

**Section C: (Current Financial Year)**

The Municipality is required to compile and submit the MFMA Implementation and Support Plan to the National Treasury by 15th June, prior to the commencement of the new financial year and any amendments thereafter, within 30 days

<b>Performance Information: Institutional</b>	<b>Yes</b>	<b>Number</b>	<b>Date</b>	<b>Name of CFO</b>
Appointment of appropriately skilled CFO consistent with the competency regulations	Yes		1/10/2007	Fariel Manuel
Appointment of appropriately skilled Senior Financial Managers in the BTO	Yes	1		
Appointment of appropriately skilled Internal Audit personnel	No	0		

**Section D: (Current Financial Year)**

<b>Performance Information: Outputs</b>	<b>Audit Outcome (Previous Year)</b>	<b>Audit Outcome (This year)</b>	<b>Number of Items on Audit Action Plan completed</b>	<b>Number of Items outstanding this month</b>	<b>Planned completion date</b>
Audit Outcome achieved for the previous financial year	Qualified				
Audit Action Plan implemented (If yes, please provide document detailing progress on implementation to fmg@treasury.gov.za)					

<b>Internal Audit Units (IA) and Audit Committees (AC)</b>	<b>No of Resolutions and recommendations</b>	<b>Number Implemented</b>	<b>Number Outstanding</b>
Resolutions and recommendations of IA			
Resolutions and recommendations of AC			

**Reporting on Key MFMA Activities**

	<b>YES</b>	<b>NO</b>	
Budget - Key activities for the month completed	YES		Refer to the budget timetable and the budget process
In-year reporting - Key activities for the month completed	YES		Refer to financial & non-financial inform. for publishing
Financial Statements - Key activities for the month completed			Preparation of Trial Balance and all Accounts Reconcile
Annual Report - Key activities for the month completed			Consolidation of financial & non-financial inform. completed

**Confirmation & Authorization from the Accounting Officer & Chief Financial officer or Delegatee**

Name of the Chief Financial Officer - \_\_\_\_\_ Signature - \_\_\_\_\_ Date - \_\_\_\_\_

Name of the Accounting Officer - \_\_\_\_\_ Signature - \_\_\_\_\_ Date - \_\_\_\_\_