

**Monthly Report as per the Division of Revenue Act**

**Municipality Name** EC 108 Kouga

<b>Budget Allocation for 2023-24 FY</b>	R	1,495,000
<b>Accumulated Expenditure</b>	R	387,489
<b>Available Balance</b>	R	1,107,511

<b>Financial Year</b>	2024/25
<b>Month End</b>	Oct-24

**Financial Accounting for Grant Funds Received and Expended**

	July	August	September	October	November	December	January	February	March	April	May	June	Total
Received Prior Months ( Current Financial Year)	R -	R -	R 374,000	R 374,000	R 374,000	R 374,000	R 374,000	R 374,000	R -	R -	R -	R -	R -
Received in the Current Month	R -	R 374,000	R -	R -	R -	R -	R -	R -	R -	R -	R -	R -	R 374,000
<b>Total EPWP funds Received</b>	R -	R 374,000	R 374,000	R 374,000	R 374,000	R 374,000	R 374,000	R 374,000	R -	R -	R -	R -	R 374,000
Spent Prior Months ( Current Financial year)		R -	R 111,071	R 184,969	R 387,489								
<b>Spent in the Current Month</b>	R -	R 111,071	R 73,898	R 202,520	R -	R -	R -	R -	R -	R -	R -	R -	R 387,489
<i>Compensation of Employees</i>	R -	R 111,071	R 73,898	R 202,520	R -	R -	R -	R -	R -	R -	R -	R -	R 387,489
<i>Goods and Services</i>	R -	R -	R -	R -	R -	R -	R -	R -	R -	R -	R -	R -	R -
<i>Machinery and Equipment</i>	R -	R -	R -	R -	R -	R -	R -	R -	R -	R -	R -	R -	R -
Accumulated EPWP Expenditure	R -	R 111,071	R 184,969	R 387,489	R 387,489	R -	R -	R -	R -	R -	R -	R -	R 387,489
Total EPWP funds Received and Not Spent	R -	R 262,929	R 189,031	R -13,489	R -13,489	R 374,000	R 374,000	R 374,000	R -	R -	R -	R -	R -13,489
Expenditure as % of received amount		0%	30%	49%	104%	104%	0%	0%	0%	0%	0%	0%	0%
Funds Currently Committed but Not Spent													R -
Scheduled Transfers Withheld													R -

**Expenditure on 2022/23 Approved Rollover**

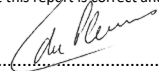
Approved Rollover	July	August	September	October	November	December	January	February	March	April	May	June	Total
R	- R	- R	- R	- R	- R	- R	- R	- R	- R	- R	- R	- R	- R
<i>Compensation of Employees</i>													R -
<i>Goods and Services</i>													R -
<i>Machinery and Equipment</i>													R -

**Comments:**

(Print Name Below)

Certify that this report is correct and that this report has been submitted electronically as required.

MR. CHARL DU PLESSIS , The Accounting Officer or Delegate certify that the above information is correct

Signed.....

Dated..... 07 NOVEMBER 2024 .....