2021/2022



DANNHAUSER LOCAL MUNICIPALITY – KZ 254

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1. INTRODUCTION

The Municipal Finance Management Act (MFMA) assigns specific oversight responsibilities to Council regarding the Annual Report and the preparation of an Oversight Report.

Given the processes required by Council to effectively undertake its oversight role, the Dannhauser Council resolved that the Municipal Public Accounts Committee was the appropriate mechanism in which Council could fulfil its oversight responsibilities.

The Council referred the Annual Report 2021/2022 to its Municipal Public Accounts Committee for consideration, to receive input from the various role players and to prepare a final Oversight Report for consideration by Council, in terms of sections 127, 128, 129 and 130 of the (Municipal Finance Management Act, 2003 (Act No 56 of 2003 – MFMA). This to be read with the following MFMA Circulars; MFMA Circular.63 – Annual Report Format & Contents – 26 September 2012; MFMA Circular.32 – Oversight Report Guidelines - 15 March 2006; MFMA Circular 11 - Annual Reporting Guidelines - 14 January 2005; MFMA Circular 18 - New Accounting Standards - 23 June 2005; and MFMA Circular 28 - Budget Content and Format - 12 December 2005.

2. BACKGROUND

The oversight role of Council is an important component of the financial reforms and it is achieved through the separation of roles and responsibilities between Council, the Executive Committee and Administration. Good governance, effective accountability, and oversight can only be achieved if there is a clear distinction between the functions performed by the different role players.

Non-executive Councillors are required to maintain oversight on the performance of specific responsibilities and delegated powers that they have given to the Executive Committee. In other words, in exchange for the powers in which Council have delegated to the Executive, Council retains a monitoring and oversight role ensuring that there is accountability for the performance or non-performance of the municipality.

The Municipal Finance Management Act, No.56 of 2003 (MFMA) vests in Council specific powers of approval and oversight:-

- ✓ Approval of budgets;
- ✓ Approval of Budget related Policies; and
- ✓ Review of the Annual Report and adoption of the Oversight Report.

2.1 LEGAL REQUIREMENTS:

Section 121 (1), (2) and (3) of the MFMA determines as follows:

According to 121 (1) of the MFMA, every Municipality must prepare an annual report each financial year. The council must within nine (9) months after the end of a financial year deal with the annual report of a municipality in accordance with section 129.

2.2 PURPOSE OF THE REPORT:

The purpose of an annual report is:

- i) To provide a record of the activities of the municipality during the financial term to which the report relates;
- ii) To provide report on performance against the budget of the municipality for the financial year; and
- iii) To promote accountability to the local community for the decisions made throughout the year by the municipality.
- 2.3 ANNUAL REPORT REQUIREMENTS:

The annual report of a municipality must include:

- i) The annual financial statements of the municipality;
- ii) The Auditor General audit report in terms of section 126) (3) on those financial statements;
- iii) The annual performance report of the municipality prepared by the municipality in terms of the section 46 of the Municipal Systems Act;
- iv) The auditor general's audit report in terms of section 45 (b) of the Municipal Systems Act; An assessment by the municipality's accounting officer of any arrears on municipal taxes and services charges;
- An assessment by the municipality's accounting officer of the municipality's performance against measurable performance objectives referred to in section 17 (3) (b) for revenue from each source and for each vote in the municipality's approved budget for the relevant financial year;
- vi) Particulars of any corrective action taken or to be taken in response to issues raised in the audit report referred to in paragraphs (b) and (d);
- vii) Any explanations that may be necessary to clarify issues in connection with the financial statements;
- viii) Any information as determined by the municipality;
- ix) Any recommendations as determined by the municipality; and
- x) Any other information as may be prescribed

In terms of section 127 (5) of the MFMA, the accounting officer must immediately after the annual report is tabled, make public the annual report invite the local community to submit representations in connection with the annual report and submit the report to the auditor general, the relevant Provincial Treasury and the Provincial Departments responsible for Local Government in the Province.

According to section 129 (10 of the MFMA), the Council must consider the Annual Report by no later than two months from the date on which the annual report was tabled, adopted and oversight report containing the Council's comments on the annual report which must include a statement whether:

- ✓ The council has approved the annual report with or without reservations;
- ✓ Has rejected the Annual Report;
- ✓ Has referred the Annual Report back for revision of those components that can be revised.

3. ANNUAL REPORT OVERSIGHT FUNCTIONS OF THE COMMITTEE

The oversight functions undertaken by the Municipal Public Accounts Committee in relation to the Annual Report are to:-

- ✓ Undertake a review and analysis of the Annual Report.
- ✓ Invite, receive, and consider inputs from Councillors and Support Committees, on the Annual Report.
- ✓ Consider written comments received on the Annual Report from the public consultation process.
- ✓ Conduct Public Hearings to allow the local community or any organs of state to make representations on the Annual Report.
- ✓ Receive and consider Council's Audit Committee views and comments on the annual financial statements and the performance report.
- ✓ Preparation of the draft Oversight Report, taking into consideration, the views and inputs of the public, representatives of the Auditor-General, organs of state, Council's Audit Committee and Councillors.

4. MUNICIPAL PUBLIC ACCOUNTS COMMITTEE (MPAC)

Having considered the new guidelines issued by National Treasury on the establishment of Municipal Public Accounts Committee (MPAC) and the nature of Dannhauser Municipality, the committee consists of the following members;

COMMITTEE NAME	MEMBER'S NAME	NUMBER OF PLANNED MEETINGS (2021/22)	NUMBER OF ACTUAL MEETINGS HELD (2021/22)	REASON'S FOR DEVIATION
Municipal Public Accounts Committee	 Ndaba VM (Chaiperson) Mkhumane MS Kumalo NP Radebe AN Nair PG 	7	3	 No quorum formed The effect of level 5 lockdown contributed to the prevention of fulfilling the planned meetings

COMMITTEE NAME	MEMBER'S NAME	NUMBER OF PLANNED MEETINGS (2021/22)	NUMBER OF ACTUAL MEETINGS HELD (2021/22)	REASON'S FOR DEVIATION
Municipal Public Accounts	ES Kunene: ChairpersonMS Mkhumane	5	5	
Committee	> EN Buthelezi			
	RS Langa			
	MS Dlamini			
	SE Myaka			
	MT Mabaso			

One of the key responsibilities of the MPAC is to analyze and review annual reports in detail following their tabling in Council and then drafting an oversight report that may be taken to Council for consideration. The committee adopted circular 32 of the National Treasury as the guiding document for its oversights process. The following documents relevant to the committee's responsibilities should be distributed to each committee member and should be in their possession.

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- ✓ The 2021/22 Annual Report;
- ✓ National Treasury's Circular 11 Annual Report;
- ✓ National Treasury's Circular 18 New Accounting Standards
- ✓ National Treasury's Circular 28 Budget Content and Format;
- ✓ National Treasury Circular 32 Oversight Report;
- ✓ National Treasury' Circular 63 New Annual Report Guidelines; and
- ✓ Report of the Auditor General as contained in the Annual Report.

In compliance with what MPAC requested dated, the committee places a high priority on community participation in the oversight process and is going to take the following actions to gain the community's participation:

The community will be advised through the print media of the availability of the 2021/2022 Annual Report, as per the municipal notice, and will be invited to submit representation on the report by a certain date;

- ✓ The Annual Report will be available at all municipal library;
- ✓ The Annual Report will be available in the Ward Committee War Rooms;
- ✓ The Annual Report will be placed on the municipal website at <u>www.dannhauser.gov.za</u>;
- ✓ The Annual Report will also be submitted to the Auditor General, Provincial Treasury, National Treasury and the relevant local government departments.

5. COMPOSITION OF THE COMMITTEE

5.1. Membership

The Municipal Public Accounts Committee is a committee of Council established under Section 79 of the Municipal Structures Act, 1998. Section 79 allows for the co-option of advisory members to a Committee of Council, who are not members of the Council. Due to the separation of roles and responsibilities, between Council and the Executive Committee members of the Executive Committee a/re not members of the Municipal Public Accounts Committee.

5.2. Authority & Power

The Committee is delegated the responsibility to conduct meetings and to hold public hearings to receive and hear public submissions on the Annual Report, on behalf of Council.

5.3. Meeting Schedule

The Annual Report submitted to Council, was referred to the Municipal Public Accounts Committee. The community was advised through the print media of the availability of the Annual Report and was invited to submit representations on the report.

The Annual Report was made available at the Municipal Library, Council War Rooms and Municipal website. Copies were circulated to all Councillors and distributed electronically to interested parties on

request. The Annual Report was submitted to the Auditor-General, Provincial Treasury and the Department of Local Government and Traditional Affairs.

We have received and considered input from the Auditor General and noted the minor amendment of the Mayor's address. At the closing date for public comment submissions for the draft Annual Report published, no comments had been received. All comments received from the Audit Committee were taken into consideration and inputs made by the committee were incorporated.

6. PROCESS FOLLOWED BY COUNCIL

6.1 SUBMISSION AND TABLING OF THE ANNUAL REPORT 2021/22

The Executive Mayor has deemed to inform council of unforeseeable reasons which eventually leads to the failure of council to adhered to abovementioned statutory compliance. Section 127 (3) requires that if the mayor for whatever reason, is unable to table in the council the annual report of the municipality, or the annual report of any municipal entity under the municipality's sole or shared control, within seven months after the end of the financial year to which the report relates, the mayor must:

- a) promptly submit to the council a written explanation referred to in section 133 (1) (a) setting out reasons for the delay, together with any components of the annual report listed in section 121 (3) or (4) that are ready; and
- b) submit to the council the outstanding annual report or outstanding components of the annual report as soon as may be possible.

As per legislation requires, the Annual report must be tabled to council seven months after the beginning of the financial year under review and nine months the Oversight be tabled to Council. From the 24th January 2023 to the 21 February 2023, the draft 2021/2022 Annual Report was open for discussion and recommendation as required by MPAC and Council. On the 30th of March 2022, the mayor informed Council that the report is in line with legislation as the Audit report was issued on the 13th of December 2022, the Annual report will be tabled by the mayor/MPAC chair as the final for approval.

7. THE OVERSIGHT REPORT

This Oversight Report is for the financial year ended 30 June 2022. The Annual Report was presented to Council on 30 March 2022 the Annual Report did not contain any reports of municipal owned entities as there are none in existence.

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7.1 THE OVERSIGHT REPORT: KEY COMMENTS

The comments from the MPAC are in three sections, reflected below:

- ✓ Section. A : Annual Report Checklist;
- ✓ Section. B : Annual Report Compliance, MFMA Requirements & Audit Report AG 2021/2022; and
- ✓ Section. C : Annual Report & Audit Action Plan 2021/2022 A.G Findings

INFORMATION REQUIRED TO BE INCLUDED IN ANNUAL REPORTS	COUNCIL CONSIDERATIONS AND QUESTIONS	RESPONSES/COMMENTS
1. Financial Matters – Annual Financial Statements - Section 121 (3) MFMA		Financial reporting matters to be considered
121 (3)(a) The annual financial statements (AFS) for the municipality and, if applicable, consolidated statements (with all entities) as submitted to the Auditor-General.	The AFS are to be in the form as required by the applicable accounting standards. MFMA Circular 18 with annexures, 23 June 2005, provides guidelines on the accounting standards for municipalities. <i>Have the required standards been met?</i>	Yes (No Municipal Entities) Refer to Appendix "Volume II" page.215 AR
121 (3)(a) 121 (4) 121 (4)(b)	The above applies to the AFS of the municipality.	Yes
121 (3) (e) An assessment by the accounting officer on any arrears on municipal taxes and service charges, including municipal entities.	Has an adequate assessment been included? Is there sufficient explanation of the causes of the arrears and of actions to be taken to remedy the situation? Is any other action required to be taken?	Yes Pages 48-49 of the AFS
121 (3)(g) Particulars of any corrective action taken or to be taken in response to issues raised in the audit reports.	 The conclusions of the annual audit are:- ✓ an unqualified audit opinion with or without management issues, which means that the financial statements are acceptable; ✓ The objective of the municipality should be to achieve an unqualified audit opinion. Taking into account the audit report, audit opinion and the views of the audit committee, council considered:- ✓ To what extent does the report indicate serious or minor financial issues? ✓ To what extent are the same issues repeated from previous audits? 	Yes. Refer to Addressed (Included in AG Management Comments) attached – Annexures 6 & 9 of Annual Report and AG Management Comments & Responses 2021/22 attached The report indicates issues of concern regarding compliance with laws and regulations as it relates to:- preparation of financial statements in accordance with section 122 of the MFMA; contravention of Sections 44 and 35 of the Supply Chain Management

SECTION.A

OVERSIGHT COMMITTEE REPORT – 2021/2022

	 ✓ Is the action proposed considered to be adequate to effectively address the issues raised in the audit report? ✓ Has a schedule of action to be taken been included in the annual report, with appropriate 	of section 62 of the MFMA. In addition internal control weaknesses were also evident in relation to financial management as it relates to management of conflicts of interest and commitments and contingent liabilities. Some of the issues are repeat findings from previous years and will be corrected as per Internal Audit Action plan 2021/2022.
	Note that actions taken on audit issues are to be reported to the provincial legislature, the MEC for Cooperative Government & Traditional Affairs to report on any omissions by municipalities in addressing issues. Council should confirm that the audit report has been forwarded to the MEC.	The audit report was submitted to the MEC for COGTA
121 (3)(f) An assessment by the municipality's accounting officer of the municipality's performance against measurable performance objectives for revenue collection from each revenue source and for each vote in the approved budget.	 The budget of the municipality must contain measurable performance objectives for revenue from each source and for each vote in the budget, taking into account the IDP (MFMA s17 (3) (b)). The accounting officer must include these objectives in the annual report and report on performance accordingly. ✓ Has the performance met the expectations of council and the community? ✓ Have the objectives been met? ✓ What explanations have been provided for any non-achievement? ✓ What was the impact on the service delivery and expenditure objectives in the budget? 	Refer to page.169 to 170 of the Annual Report. Yes. Yes. None. The Municipality has collected sufficient revenue to meet all its expenses including depreciation and the surplus is considered to be reasonable.
121 (3)(i)(k) Any information as determined by the municipality, the entity or its parent municipality.	Review any other information that has been included in regard to the AFS.	Not applicable

INFORMATION REQUIRED TO BE INCLUDED IN ANNUAL REPORTS	COUNCIL CONSIDERATIONS AND QUESTIONS	RESPONSES/COMMENTS
1. Financial Matters – Annual Financial Statemen	ts - Section 121 (3) MFMA	Financial reporting matters to be considered
121 (3)(j) and 121 (4)(g) Recommendations of the audit committee in relation to the AFS and audit reports of the municipality.	Have the recommendations of the audit committee in regard to the AFS and audit reports been adequately addressed by the municipality and/or the entity? What actions need to be taken in terms of these recommendations?	The Audit Committee was of the view that the AFS comply in all respects with the requirements of the MFMA, Treasury Regulations & GRAAP. None. Page 131 of AR
2. Disclosures - Allocations received and made - S	ection 123-125 MFMA	Considerations
123 (1)(a) Allocations received by and made to the municipality.	 The report should disclose: Details of allocations received from another organ of state in the national or provincial sphere. Details of allocations received from a municipal, entity or another municipality. Details of allocations made to any other organ of state, another municipality, or a municipal entity. Any other allocation made to the municipality under Section 214(1) (c) of the Constitution. Have these allocations been received and made? Does the audit report confirm the correctness of the allocations received in terms of DORA and provincial budgets? Does the audit report or the audit committee recommend any action? 	Yes. Refer to Note .27 Pages 57 to 58 of the AFS annexed to AR None None None

INFORMATION REQUIRED TO BE INCLUDED IN	COUNCIL CONSIDERATIONS AND QUESTIONS	RESPONSES/COMMENTS
ANNUAL REPORTS		

125 (1)	Municipalities and entities are reminded of the requirement to include, in their annual financial	Yes. Refer to Note.10, Page.50 of the AFS, annexed to AR
Information in relation to outstanding debtors and		LU AK
creditors of the municipality and entities.	statements, amounts owed to them and persistently	
	delayed beyond 30 days, by national or provincial	National and provincial debtors are up to date as
	departments and public entities.	Provincial Treasury was assisting with regards to
		this, while others which had been challenging have
		been resolved.
	It is also a requirement to report on whether the	
	municipality or entity has met its statutory	Yes. Refer to Notes 10, Pages.50 of the AFS.
	commitments, including the payment of taxes, audit	
	fees, and contributions for pension and medical aid	
	funds.	
	Council should be satisfied that –	
	✓ The information has been properly disclosed;	
	✓ Conditions of allocations have been met; and	
	✓ That any explanations provided are acceptable.	
2 Disclosumes Allocations resident and model. Con		Considerations
2. Disclosures - Allocations received and made - Sec	tion 123-125 MFMA	Considerations
2. Disclosures - Allocations received and made - Sec 123 (1)(c)	tion 123-125 MFMA Section 123 of the MFMA and MFMA guidance circular	Considerations Refer to Note .13, Pages 53 of the AFS annexed to
123 (1)(c)	Section 123 of the MFMA and MFMA guidance circular	Refer to Note .13, Pages 53 of the AFS annexed to
123 (1)(c) Information in relation to the use of allocations	Section 123 of the MFMA and MFMA guidance circular 11, require that the municipality provide information	Refer to Note .13, Pages 53 of the AFS annexed to
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123 (1)(c) Information in relation to the use of allocations	Section 123 of the MFMA and MFMA guidance circular 11, require that the municipality provide information per allocation received per vote and include:-	Refer to Note .13, Pages 53 of the AFS annexed to AR. Also refer to Conditional Grants Received and used
123 (1)(c) Information in relation to the use of allocations	 Section 123 of the MFMA and MFMA guidance circular 11, require that the municipality provide information per allocation received per vote and include:- The current year and details of spending on all previous conditional grants, for the previous two 	Refer to Note .13, Pages 53 of the AFS annexed to AR. Also refer to Conditional Grants Received and used
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123 (1)(c) Information in relation to the use of allocations	 Section 123 of the MFMA and MFMA guidance circular 11, require that the municipality provide information per allocation received per vote and include:- The current year and details of spending on all previous conditional grants, for the previous two financial years. Information is to be provided per vote. (For example, municipalities must report on all transfers received from provincial government 	Refer to Note .13, Pages 53 of the AFS annexed to AR. Also refer to Conditional Grants Received and used on page.171 in AR.
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123 (1)(c) Information in relation to the use of allocations	 Section 123 of the MFMA and MFMA guidance circular 11, require that the municipality provide information per allocation received per vote and include:- The current year and details of spending on all previous conditional grants, for the previous two financial years. Information is to be provided per vote. (For example, municipalities must report on all transfers received from provincial government 	Refer to Note .13, Pages 53 of the AFS annexed to AR. Also refer to Conditional Grants Received and used on page.171 in AR.
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123 (1)(c) Information in relation to the use of allocations	 Section 123 of the MFMA and MFMA guidance circular 11, require that the municipality provide information per allocation received per vote and include:- The current year and details of spending on all previous conditional grants, for the previous two financial years. Information is to be provided per vote. (For example, municipalities must report on all transfers received from provincial government i.e. small town rehabilitation, electrification, etc) were spent, and for what projects. 	Refer to Note .13, Pages 53 of the AFS annexed to AR. Also refer to Conditional Grants Received and used on page.171 in AR.
123 (1)(c) Information in relation to the use of allocations	 Section 123 of the MFMA and MFMA guidance circular 11, require that the municipality provide information per allocation received per vote and include:- The current year and details of spending on all previous conditional grants, for the previous two financial years. Information is to be provided per vote. (For example, municipalities must report on all transfers received from provincial government i.e. small town rehabilitation, electrification, etc) were spent, and for what projects. Information stating whether the municipality has 	Refer to Note .13, Pages 53 of the AFS annexed to AR. Also refer to Conditional Grants Received and used on page.171 in AR.

	 Constitution and allocations received from other than another organ of state. Where there is non-compliance, details of the reasons for non-compliance are to be provided. ✓ Information on whether allocations under the DORA were delayed or withheld and the reasons advanced for this. 	Yes The Municipal Infrastructure Grant of R6 000 000.00 was withheld due to the delay in appointing service provider for the MIG project as per business plan.
3. Disclosures in notes to AFS	Considerations relating to section 124	
Information relating to benefits paid by municipality and entity to Councillors, directors and officials.	 Information on the following items is to be included in the notes to the annual report and AFS:- ✓ salaries, allowances and benefits of political office bearers, Councillors and boards of directors, whether financial or in kind; ✓ any arrears owed by individual Councillors to the municipality or entity for rates and services, which at any time were outstanding for more than 90 days, including the names of Councillors; ✓ salaries allowances and benefits of the municipal manager, CEO of a municipal entity, CFO and every senior manager; 	Yes. Refer to Note.28 and 29 of the AFS annexed to AR Refer to Note .29 of the AFS. No Councillors' arrear consumer accounts. There were no loans or advances to Councillors/Directors/Staff.
	 senior manager; contributions for pension funds and medical aid; travel, motor car, accommodation, subsistence and other allowances; Housing benefits and allowances; Overtime payments; Loans and advances, and; 	

OVERSIGHT COMMITTEE REPORT – 2021/2022

The annual performance reports of the municipality and entities. Section 46, MSA requires municipalities to submit a performance of the municipality and entities. Yes. Minicipality and entities. Section 46, MSA requires municipalities to submit a performance of the municipality and each service provider, a comparison of the performance with targets set for the previous that may be considered are − Yes. Yes Yes That may be considered are − Yes Yes Yes The scorecard by municipal department is included in the annual report; The scorecard by municipal department is included in the report?; Yo Does the performance evaluation in the annual report compare actual performance with targets expressed in the budgets of the financial year? In terms of key functions or services, how has each performance Scorecard as part of the financial year? The scorecard that is incorporated in the Annual Report. To wat extent has performance achieved Targets set by council? Yes You be considered are - Yes Yes The scorecard by municipal department is included in the annual report. Yes The scorecard by municipal department is included in the annual report. Yes The scorecard by municipal department is included in the annual report. You the performance evaluation in the annual report compare actual performance with targets expressed in the budgets sof the	4. Municipal Performance	 ✓ Any other type of benefit or allowance related to staff. Council should be satisfied that: ✓ The information has been properly disclosed; ✓ Conditions of allocations have been met; and ✓ That any explanations provided are acceptable Considerations 	
		 performance report reflecting the performance of the municipality and each service provider, a comparison of the performance with targets set for the previous year and measures taken to improve performance. The report must form part of the annual report. Questions that may be considered are – ✓ Has the performance report been included in the annual report; ✓ Have all the performance targets set in the budgets, SDBIP, service agreements etc, been included in the report?; ✓ Does the performance evaluation in the annual report compare actual performance with targets expressed in the budgets and SDBIP approved for the financial year? In terms of key functions or services, how has each performed? E.g. have backlogs for water, sanitation, and electricity been reduced? What are the refuse collection volumes, library usage statistics etc? ✓ To what extent has performance achieved targets set by council? ✓ Is the council satisfied with the performance levels 	Refer to Annexure.1 pages.47 to 167 SDBIP 2021/22 the Annual Report. Yes The scorecard by municipal department is included in the Annual Report and is accepted by the Auditor General as adequate reporting. There is no specific legislation that prescribes the inclusion of the budgets, SDBIP and service agreements etc in the Annual Report. Page.47 to 167 in the Annual Report The scorecard that is incorporated in the Annual Report is audited by the Auditor General to ensure it is the finalised Performance Scorecard as part of the AG's year-end audit. Backlogs are reported on in the Annual Report.

	Is the community satisfied with performance? Has a customer satisfaction survey been undertaken and, if so, how do the results align with the annual report contents? What were the outcomes of public consultation and public hearings?	 96 KPIs were achieved which is 53% of the indicators; 84KPIs were not achieved, which is 47% of the indicators.
,	What actions have been taken and planned to improve performance?	Yes. Pages 47 of the AR
,	Is the council satisfied with actions to improve performance?	A Municipal Customer Satisfaction Survey was not conducted for the 2021/2022 financial year. Pages. 48
,	✓ Did the targets set in the budgets, SDBIP agree with the targets set in the performance contracts of the municipal manager and each senior manager?	
,	Does the report evaluate the efficiency of mechanisms applied to deliver the performance outcomes?	
	Taking into account the audit report and opinion and the views of the audit committee, is performance considered to be efficient and effective?	The performance contracts of the Municipal
,	To what extent have actions planned for the previous year been carried over to the financial year reported upon?	Manager and each senior manager are aligned to the Organisational Performance Scorecard. Page. 47 to 167 of AR
,	Have any actions planned in the reported year been carried over to the current or future years? If	Yes Yes

	so are any explanations been provided by the municipal manager and are these satisfactory?	The Performance Scorecard reflects a 5-year rolling plan, which provides for carryovers The underachievement would be reported with reasons and targets not met would automatically be carried over. This is done in-year when the reports
Audit reports on performance.	Section 45, MSA requires that the Auditor-General must audit the results of performance measurements, as part of the internal auditing processes and annually. Have the recommendations of internal audit been acted on during the financial year? Have recommendations by internal audit and/or the auditor-general been included in action plans to improve performance in the following year?	are submitted to the Audit Committee and Council. Yes Yes
Performance of municipal entities and municipal service providers.	 The annual report of the municipality should provide an assessment of the performance of the municipal entities and all contracted service providers. This is in addition to the separate annual reports of the entities. The report should evaluate the effectiveness of these services and whether alternative mechanisms should be considered. ✓ Is the council satisfied with the evaluation and conclusions of the municipality? ✓ What other actions are considered necessary to be taken by the accounting officer? 	No municipal entities Performance of Service providers on page. 202 to 213 of the Annual Report
5. General information Relevant information on municipal entities	The following general information is required to be disclose The municipality should disclose all information relating to the municipal entities under the sole or effective control of the municipality. Information to be disclosed includes names and types of entities, members of the board, addresses, and contact details	

	for entities, the purpose of the entity, the functions,	
	and services provided the type and term of service level	
	agreements with the entities.	
The use of any donor funding support.	What donor funding has the municipality received?	None Applicable
	✓ Have the purposes and the management	
	agreements for the funding been properly agreed	
	upon?	
	\checkmark Has the use of funds been effective in improving	
	services to the community?	
	\checkmark What actions need to be taken to improve	
	utilisation of the funds?	
Agreements, contracts and projects under Private	Information similar to the details of municipal entities	Yes
Public – Partnerships	should be provided.	
	Council should ensure that all details have been	
	supplied	
Service delivery performance on key services	This may be a high-level summary, in addition to	Yes
provided	detailed information on performance, which sets out	
provided	• •	Pages 47 to 164 (SDBIP 2021/22 Actuals) of Appual
		керог
Information on long-term contracts.	.	Yes
	liability to the municipality should be included.	Dage 00 of the Annual Deposit
	-	
•		5
, , , , , , , , , , , , , , , , , , , ,		
with statutory obligations.	· ·	•
		security management and user access controls. The
		IT governance framework is still in the process of
	Details of any future IT proposals should be	being developed and implemented.
	summarised. Council should comment and draw	
nformation on long-term contracts. nformation technology and systems purchases and the effectiveness of these systems in the delivery of services and for ensuring compliance with statutory obligations.	, , , ,	IT governance framework is still in the process of

Capital plan for addressing infrastructure backlogs	conclusions on the information provided. Details of significant IT activities should be outlined indicating the effectiveness of the IT projects and the quality of IT services. Council should consider how effectively the IT services support and facilitate performance of the municipality and whether value for money has been obtained. Details of any future IT proposals should be summarised. Council should comment and draw conclusions on the information provided. A summary of the long-term capital plans and how these address the backlogs of services in the municipality should be provided. This should include details of types and scale of backlogs, projected cost implications, strategies to address the backlogs and plans proposed and/or approved. The summary here should cross reference to the performance reports in the annual report and also will be highlighted in the coming budgets. Council should consider whether the plans appropriately address the backlogs and are consistent with the strategic policy directions of council and needs of the community.	Yes Page.96 of the AR.
6. Other considerations recommended		
Timing of reports.	Was the report tabled in the time prescribed?	Yes
Oversight committee or other mechanism.	What mechanisms have been put in place to prepare the oversight report?	The Municipal Public Accounts Committee was delegated the responsibility of preparing the oversight report.
Payment of performance bonuses to municipal officials.	Refer to Section 57 MSA as amended. Bonuses based on performance may be awarded to a municipal manager or a manager directly accountable to the municipal manager after the end of the financial year	Performance bonuses for the year under review have not yet been paid to any Section 57 Managers. Performance will be assessed based on achievements of agreed outputs and will only be

and only after an evaluation of performance and	paid after the adoption of the Oversight Report
approval of such evaluation by the municipal council.	where applicable
Preferably such evaluation should be considered along	
with the annual report. The basis upon which	
performance is evaluated for payment of bonuses	
should be reconciled with the municipal performance	
reported in the annual report.	
Have bonuses been paid based on achievements of	
agreed outputs and after consideration of the annual	
report by council?	

SECTION.B

7.3 ANNUAL REPORT COMPLIANCE ISSUES

This section contains the Committee's comments on whether the 2021/22 Annual Report included the items required by the MFMA and followed the guidelines provided by Circular 32 and Circular 64 of the National Treasury.

As reported below, the Annual Report complied with the great majority of the MFMA requirements and the National Treasury guidance in the content of the Annual report. The following MFMA requirements have been included in the tabled Annual Report:

- ✓ Headings and Content Recommended by Circular 11 and Circular 63;
- ✓ MFMA Circular's 11, 15, 28, 32 and 63 have been complied with;
- ✓ Annual Report 2021/22;
- ✓ Audited Annual Financial Statements 2021/22;
- ✓ Auditor Generals' Report 2021/22;
- ✓ Auditor General Management Comments 2021/22;
- ✓ Audited Annual Performance Report 2021/22;
- ✓ Conditional Grants and Assessment of Compliance;
- ✓ Annual Report Appendix Circular 63 Compliance 2021/22;
- ✓ Total payments for audit fees, taxes, levies, duties, pension and medical aid contributions, and if any amounts outstanding at year end;
- ✓ Summary of all Investments;
- ✓ Particulars of material irregular, fruitless or wasteful expenditures and whether recoverable;

Furthermore, matters raised by the Auditor General for the 2021/22 financial year have been concluded in the Annual Report for the year under review.

7.3.1 MFMA REQUIREMENTS NOT SUFFICIENTLY ADDRESSED OR NOT INCLUDED IN TABLED ANNUAL REPORT

The Oversight Committee noted the MFMA requirements were all met.

7.3.2 THE AUDIT REPORT - 2021 / 2022

The audit action plan submitted to the MPAC was adequate and addresses all the issues raised by the Auditor General. MPAC will agree with management with any additional steps that management may deem appropriate to address the numerous shortcomings.

SECTION.C

8. GENERAL COMMENTS AND RESERVATIONS ON THE CONTENTS OF THE ANNUAL REPORT:

⇒ The Oversight committee notes that the Annual Report complies with Circular.63.

9. ANALAYSIS OF THE 2021/22 ANNUAL REPORT ACCORDING TO CIRCULAR 63 & 11

- ✓ The Annual Financial Statements Complied with;
- ✓ The Auditor General's Report on the Financial Statements Complied with;
- ✓ The final Audit report was issued on 13 December 2021;
- ✓ No explanations that may be necessary to clarify issues in connection with the financial statement Summary by Accounting Officer or CFO;
- ✓ An assessment by the Accounting Officer on any arrears on municipal taxes and services charges Summary by Accounting Officer;
- ✓ Particulars of any corrective actions taken or to be taken in response to issues raised in the Audit Report – Summary by Accounting Officer;
- ✓ No information determined by the municipality or entity. According to circular 11 & 63;
- ✓ Any recommendations of the audit and performance audit committee Addressed in an annexure;
- ✓ Any other information as may be prescribed Addressed;
- The use of conditional grants, per grant to include in the current year and details of spending on all previous conditional grants, for the two previous financial years. For example, municipalities must report on all transfers received from provincial departments for three financial years, and indicate how such funds were spent, and for what projects Included in document through discussions and tables (i.e. Electrification);
- ✓ The extent to which a municipality met the conditions of such grants Addressed;
- ✓ Agreements, contracts as projects under private public partnerships Addressed;
- ✓ Service delivery performance on key services provided Addressed;
- ✓ Corrective measures or action plans to be taken on targets of the key performance indicators as in the Service delivery Budget Implementation Plan (SDBIP) – Addressed;
- ✓ Information on long term contracts addressed;
- ✓ Information technology and systems and purchased and the effectiveness of these systems in the delivery of services and for ensuring compliance with statutory obligations Addressed; and
- ✓ Performance of the municipality and municipal service providers addressed.

10. RESPONSES TO ISSUES RAISED BY AUDITOR GENERAL IN AUDIT REPORT FOR THE 2021/22 FINANCIAL YEAR AND ACTION PLAN

The action plan is referenced "Annexure.9" on page.180 to 191 of the Annual Report and clearly indicates what the measures are to be taken to prevent any shortfalls in future audit processes.

DANNHAUSER MUNICIPALITY 2021/2022 ACTION PLAN

	AUDIT REPORT											
No	FINDING	ASSERTION AFFECTED	IMPACT	ROOT CAUSE	ACTION	DUE DATE	RESPONSIBLE EXECUTIVE	PROGRESS				

FINDI NG NO	FINDIN G NO AS PER MR	Compo nent	AUDIT FINDING	FINDING DETAILS	Component	INTERNAL CONTROL DEFICIEN CY	Action Plan	Progress	ACTIO N DATE/S	RESPON SIBLE PERSON
ISS. 1	FINDIN G NIO:11	AFS - Accou nting Policies	Accounti ng Policies: Investme nt Property, Heritage Assets and Employee Related Cost	Contrary to the above- mentioned requirement, accounting policies disclosed do not have sufficient principles, bases, rules, and practices applied by the municipality in preparing and presenting financial statements. Please see below for details: 1. The initial and subsequent measurement accounting principle	 Accuracy and Valuation of the Heritage asset balance amounting to R 119 350 cannot be confirmed Accuracy and Valuation of Investment Assets balance of R 8 349 000 cannot be confirmed Non- complianc e with GRAP 1, 103 and 16. 	Leadershi p Exercise oversight responsibi lity regarding financial and performa nce reporting and complian ce and related internal controls. • The accounti ng officer did not put adequat e internal control	Policies will be updated and alined to the accounti ng policies in the Financial Statemne nt. The Financial Statemen t will be prepared in time to give enough time for reviews.	This will be reviewe d during the Interim Financial Stateme nts	31- Mar-23	acting CFO

applied on	processes	
heritage assets	to ensure	
has not been	that the	
included on the	AFS are	
heritage assets	adequat	
accounting	ely	
policy as	reviewed	
required by	to ensure	
GRAP;	complian	
2. The	ce with	
subsequent	the GRAP	
measurement	reporting	
accounting	requirem	
principle	ents.	
applied		
investment		
property has		
not been		
included on the		
investment		
asset		
accounting		
policy as		
required by		
GRAP.		
3. Employee		
benefits		
accounting		
benefits accounting policy has not been disclosed.		

	ISS.2	FINDIN G NO: 2	AFS - Propert y Plant and Equipm ent	Differenc es between progress report and fixed asset register	During the audit of long standing projects, variances were identified between the carrying amount of work in progress (WIP) per the fixed asset register (FAR) and the project payments made as at year end. In addition, the progress reports, contracts and appointment letters for the previous contractors working on the construction of the testing ground, were requested in Request for information 61 dated 08 November 2022 and has to date not been submitted for audit.	Consequen tly, the constructio n of the new offices has been understate d by R6 359 032,87	Manage ment did not perform adequat e reviews to ensure that the total payments made to suppliers agree to the amount captured in the fixed assets register.	To appoint a service provider to update the FAR and reconcile to the Ledgr. The reconcilli ation of Work-in- Progress assets will be perfomed on the monthly basis and clear all differenc es between progress reports from Technical Services to the reports from Finance	The service provider has been appoint ed to update the FAR reconsilli ation monthly	31/03/ 2023	acting CFO
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	31/03/ 2023	acting CFO
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					before the AFS are finalised.				
COM M 12 OF 2021 /22	FINDIN G NO : 4	Variance between reported PPE values and underlyin g schedules	The variances in table below has been identified between the reported PPE reported values and the general ledger:	The property plant and equipment overstated by at least R6 700 790.54	Manage ment did not perform adequat e reviews of the PPE amount disclosed in the financial statemen ts against the underlyin g schedules , which is the general ledger and the fixed asset register.	To appoint a service provider to update the FAR and reconcile to the Ledgr. The reconcilli ation of Work-in- Progress assets will be perfomed on the monthly basis and clear all differenc es between progress reports	The service provider has been appoint ed to update the FAR reconsilli ation monthly	31/03/ 2023	acting CFO

							from Technical Services to the reports from Finance			
СОМ М 11 ОF 2021 /22	FINDIN G NO: 1	oi di na ca w su su ni m m	lisclosed ot consistent vith ubseque t neasure nent policy	Upon inspection of the current year's financial statements, it was confirmed that the accounting policy for Property plant and equipment (PPE) states that the PPE is subsequently measured at cost less accumulated impairment and depreciation. In contrary to this accounting policy, it was noted that the landfill site has been revalued by R3 333 763. Consequently, the carrying amount of the property plant and equipment	Consequen tly, the carrying amount of the property plant and equipment and the revaluation reserve is overstated by R3 333 763.	Manage ment, internal audit and the audit committe e did not perform adequat e reviews of the financial statemen ts to ensure that PPE is measured in accordan ce with the accounti ng policy.	Policies will be updated and alined to the accounti ng policies in the Financial Statemne nt. The Financial Statemen t will be prepared in time to give enough time for reviews.	This will be reviewe d during the Interim Financial Stateme nts	31/03/ 2023	acting CFO

			and the revaluation reserve is overstated by R3 333 763.						
COM M 04 OF 2021 /22	FINDIN G NO: 9	Inventory- Differenc es between the financial statemen ts and the inventory reconcilia tion	During the audit of inventory, the following was noted: a) As tabulated below, variances were identified between the inventory reconciliation and note 7.1 to the financial statements. b) Furthermore, the following variance was also noted between the balance of inventory in	 The Electrificati on expenditure capitalised on inventory been understate d by R1 207 098,56 The Electrificati on infill expense disclosed in the financial statements is understate d by R1 093 	Manage ment did not perform adequat e reviews of the inventory balances disclosed in the financial statemen ts so as to ensure that they agree to the reconcilia tion.	Inventory reconsillia tions will be prepared with the moveme nt of inventory (Electricit y infills)	This will be reviewe d during the Interim Financial Stateme nts	31/03/ 2023	acting CFO

	note 7 and the balance on note 7.1 non- Financial information. The above findings result in: • The Electrification expenditure capitalised on inventory been understated by R1 207 098,56 • The Electrification infill expense disclosed in the financial statements is understated by R1 093 680,24 • The inventory closing balance disclosed in the financial statements is understated by R1 093 680,24	680,24 • The inventory closing balance disclosed in the financial statements is understate d by R113 419,64					
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COM M 08 OF 2021 /22	FINDIN G NO: 7	Inconsist ncy between disclosur of receival es from non- exchang e transact ns and statutory receival es disclosur s	below, the carrying amount and allowance for impairment of property rates are not consistent between note 12 and note 10 of the financial statements.	This has results in a misstateme nt of the carrying amount and allowance for impairment for impairment by R2 733 226 and R4 098 862 respectively	The financial statemen ts are not adequat ely reviewed for consisten cy to ensure the accuracy of the amounts disclosed in the financial statemen ts	The interim financial ststement s will be prepared and be reviewed to eliminate errors	This will be reviewe d during the Interim Financial Stateme nts	31/03/ 2023	acting CFO
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CC M 8 OF 202 /22	G NO: 8	Receivabl es from refuse disclosed as receivabl es from non- exchang e transactio ns	Contrary to the above, receivables from refuse removal which arises from exchange with customers is disclosed as receivables from non- exchange transactions as per the extract below: Furthermore, the gross balance of receivables from refuse as per note 10 is equal to the carrying amount of receivables from exchange	Consequen tly, note 10 for receivables from non- exchange transactions is misstated by the gross receivables amount of R4 696 354 and allowance for impairment amount by R4 098 862.	The financial statemen ts are not adequat ely reviewed for accuracy of the amounts disclosed in the annual financial statemen ts.	The interim financial ststement s will be prepared and be reviewed to eliminate errors	This will be reviewe d during the Interim Financial Stateme nts	31/03/ 2023	acting CFO	
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			exchange transactions. Consequently, note 10 for receivables from non- exchange transactions is misstated by the gross receivables amount of R4 696 354 and allowance for impairment amount by R4 098 862.						
COM M 11 OF 2021 /22	FINDIN G NO: 6	Incorrect classificati on of debtors with credit balances on the AFS	During the audit of trade and other receivables, it was noted that debtors with credit balances were incorrectly netted of against the trade and other receivables balance at year end. Refer to the below table:	Consequen tly, the receivables from non- exchange transactions and receivables from exchange transactions has been understate d by R2 381189,58 and 6005, 05	Manage ment did not perform adequat e reviews of the receivabl e balances and payables to ensure that these balances are fairly presente	The interim financial ststement s will be prepared and be reviewed to eliminate errors	This will be reviewe d during the Interim Financial Stateme nts	31/03/ 2023	acting CFO

			Consequently, the receivables from non- exchange transactions and receivables from exchange transactions has been understated by R2 381189,58 and 6005, 05 respectively. Payables understated by R2 387 194,63.	respectively . Payables understate d by R2 387 194,63.	d in the terms of the GRAP requirem ent				
COM M 08 OF	FINDIN G NO: 17	Statutory receivabl es	Contrary to the above, note 38 to financial	This result in an overstatem	The financial statemen	Policies will be updated	This will be reviewe	31/03/ 2023	acting CFO
2021	17	es incorrectl	instruments	ent of	ts are not	and	d during		
/22		У	disclosure note,	financial	adequat	alined to	the		
		disclosed	receivables	assets and	ely	the	Interim		
		as financial	from non- exchange	financial instruments	reviewed against	accounti ng	Financial Stateme		
		instrumen	transactions	by R13 229	the GRAP	policies in	nts		
		ts	which include	585	checklist	the			
			property rates		to ensure	Financial			
			and traffic fines (which are		that GRAP	Statemne nt. The			
			statutory		complian	Financial			
			receivables),		се	Statemen			
			are incorrectly		requirem	t will be			
			disclosed as financial assets.		ents are adhered	prepared in time to			
					to.	give			
			This result in an			enough			
			overstatement			time for			
			of financial			reviews.			

				assets and financial instruments by R13 229 585.					
ISS. 1 1	FINDIN G NO :13	dis s n	ade	Upon inspection of the current year's financial statements, it was confirmed that the above disclosures relating to financial assets were not included in the notes to the financial statements.	Manage ment did not adequat ely review the financial statemen ts to ensure the required GRAP disclosure s are made for financial assets.	Policies will be updated and alined to the accounti ng policies in the Financial Statemne nt. The Financial Statemen t will be prepared in time to give enough time for reviews.	This will be reviewe d during the Interim Financial Stateme nts	31/03/ 2023	acting CFO

	COM M 11 OF 2021 /22	FINDIN G NO : 10		Incorrect and inadequa te accounti ng policy notes and disclosure s	During the high- level review of the annual financial statement, the following errors on the accounting policy notes and disclosures were identified: Consequently, the accounting policies are incomplete and inadequate.	Consequen tly, the accounting policies are incomplete and inadequate	Manage ment did not perform adequat e reviews of the financial statemen ts to ensure that all relevant accounti ng policies are included and are in line with the relevant GRAP requirem ents.	Policies will be updated and alined to the accounti ng policies in the Financial Statemne nt. The Financial Statemen t will be prepared in time to give enough time for reviews.	This will be reviewe d during the Interim Financial Stateme nts	31/03/ 2023	acting CFO
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COM M 11 OF 2021 /22	FINDIN G NO 16		No disclosure on segment reporting	GRAP 18 came into effect for reporting periods beginning on or after 01 April 2020. The financial statements were inspected, and it was noted that: a) There was no accounting policy note related to segment reporting. There is therefore no indication in the notes to the AFS as to whether the definition of segments as per the GRAP 18, paragraph 05 was considered. b) There is no disclosure per the notes to the AFS which provides further details to cater for the provisions of GRAP 18. This results in non-	This results in non- complianc e with the presentatio n and disclosure requiremen ts of GRAP 18 on segment reporting.	Manage ment, internal audit and the audit committe e did not perform adequat e reviews of the financial statemen ts to ensure that standards that are effective in the current year were adopted and financial statemen ts prepared accordin gly.	The interim financial ststement s will be prepared and be reviewed to eliminate errors	This will be reviewe d during the Interim Financial Stateme nts	31/03/ 2023	acting CFO
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			compliance with the presentation and disclosure requirements of GRAP 18 on segment reporting.						
COM M 11 OF 2021 /22	FINDIN G NO: 12	GRAP 104 (Paragra ph 129) disclosure s not made	Upon inspection of the current year's financial statements, it was noted that paragraph 129 of GRAP 104 disclosures relating to financial assets were not included in the notes to the financial statements.	GRAP 104 disclosures relating to financial assets were not included in the notes to the financial statements.	Manage ment did not adequat ely review the financial statemen ts to ensure the required GRAP disclosure s are made for financial assets.	The interim financial ststement s will be prepared and be reviewed to eliminate errors	This will be reviewe d during the Interim Financial Stateme nts	31/03/ 2023	acting CFO

COM M 22 OF 2021 /22	FINDIN G NO: 18		Operatio nal commitm ents disclosed as capital commitm ents	During the audit, we identified that the following operation commitments were incorrectly disclosed as " authorised capital expenditure" commitments in note 39 to the financial statements. Consequently, there is an overstatement of capital commitments and understatement of operational commitments.	Consequen tly, there is an overstatem ent of capital commitme nts and understate ment of operational commitme nts.	Manage ment did not perform adequat e reviews of the financial statemen ts to ensure that there is a split between operation al and capital commitm ents.	The interim financial ststement s will be prepared and be reviewed to eliminate errors	This will be reviewe d during the Interim Financial Stateme nts	31/03/ 2023	acting CFO
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N C 2	COM 1 08 DF 021 22	FINDIN G NO:19	Accounti ng Estimate: Nature of significant of judgment s and sources of estimatio n uncertain ty not disclosed	Contrary to the above, note 1.3 on "significant judgements and uncertainty" is not complete as it does not disclose key assumptions concerning the future, and other key sources of estimation uncertainty at the reporting date regarding the following financial statement items: i) Provisions- landfill site ii) Useful lives and residual values of property, plant, and equipment. iii) Post- employment benefits	This results in non- complianc e with the GRAP standards.	The financial statemen ts are not adequat ely reviewed against the GRAP checklist to ensure that GRAP complian ce requirem ents are adhered to.	Policies will be updated and alined to the accounti ng policies in the Financial Statemne nt. The Financial Statemen t will be prepared in time to give enough time for reviews.	This will be reviewe d during the Interim Financial Stateme nts	31/03/ 2023	acting CFO	
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	exchange transactions v) Fair value of investment property vi) Contingencies This results in non- compliance with the GRAP standards.				
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COM M 23 OF 2021 /22	FINDIN G NO:14		Irregular expenditu re not appropria tely disclosed	 a) During the audit, we identified that irregular expenditure relating to Veez Construction was not split between irregular expenditure incurred in the prior years and that incurred in the current year. The audit split for irregular expenditure incurred in the current year is as follows: Consequently, current year irregular expenditure is overstated by R74 662 486. b) Furthermore, the explanation included in note 50 to the financial statements for the non- compliance 	Consequen tly, current year irregular expenditure is overstated by R74 662 486.	Manage ment did not perform adequat e reviews of the financial statemen ts to ensure the accuracy of the split between the prior and current year irregular expenditu re as well as the reasons for the non- complian ce.	The interim financial ststement s will be prepared and be reviewed to eliminate errors	This will be reviewe d during the Interim Financial Stateme nts	31/03/ 2023	acting CFO
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			that gave rise to irregular expenditure is incorrect. It reads as follows:						
COM M 23 OF 2021 /22	FINDIN G NO:15	Differenc es identified on the cash flow statemen t	 a) The following errors were identified in the recalculation of the cash flow statement: c) In addition, the net increase/decre ase in cash and cash equivalents is R5 219 038, while the change in cash and cash equivalent as per the 	The net increase/de crease in cash and cash equivalents is R5 219 038, while the change in cash and cash equivalent as per the balance sheet is R2 325 711. Therefore, the cash flow	Manage ment did not perform adequat e reviews of the financial statemen ts to ensure that the cash flow statemen t is accurate	The interim financial ststement s will be prepared and be reviewed to eliminate errors	This will be reviewe d during the Interim Financial Stateme nts	31/03/ 2023	acting CFO

			balance sheet is R2 325 711. Therefore, the cash flow statement does not balance by R2 893 327.	statement does not balance by R2 893 327.				
COM M 03 OF 2021 /22	FINDIN G NO: 26	AOPO- Target does not link to indicator	During the audit of predetermined objectives, the following the matters were noted: a) The following planned and reported target does not relate to the planned and reported indicator relating to free basic services of electricity, while the targets relates to access to refuse removal. b) The following indicator has been duplicated in	Consequen tly, the indicator and target are not consistent	Inadequa te reviews by manage ment to ensure that the targets do relate to the indicators	Manage ment should ensure that the planning documen ts are thoroughl y reviewed to identify inconsiste ncies between the indicators and targets as well as duplicate d indicators		PJ Ndlovu

			the annual performance report submitted for audit: Consequently, the indicator and target are not consistent.						
COM M 16 OF 2021 /22	FINDIN G NIO: 27	Inconsiste ncies between the reported performa nce achieve ments and planned performa nce targets	The following inconsistencies in reporting between the planned target per SDBIP and the reported actual achievement as per the APR were noted: This has resulted in reported performance achievements that are not useful to the users of the performance report.	This has resulted in reported performanc e achieveme nts that are not useful to the users of the performanc e report. Furthermore , the reported performanc e achieveme nts are not measurable and	Manage ment did not design and implemen t systems and processes to ensure actual performa nce achieve ments that are inline with planned performa nce targets.	Manage ment should ensure that they report on planned targets. In addition, quarterly and annual performa nce reports should be reviewed by internal audit and	We agree that the reported achieve ments were not very specific but we believe the KPIs were correctly reported as unachie ved.	As soon as the propos ed chang es are authori zed by Audito rs	PJ Ndlovu

			Furthermore, the reported performance achievements are not measurable and verifiable.	verifiable.		senior manage ment for consisten cy between planned performa nce targets and reported performa nce achieve ments.			
COM M 10 OF 2021 /22	FINDIN G NO:20	Payment of supplier invoice not made within 30 days	During the audit of expenditure, the actual date of receipt of invoice by the municipality was not indicated. Based on the invoice date, it was identified that the following payments were paid in excess of 30 days: Consequently, this results in a material noncompliance with the MFMA 65(1) and	Consequen tly, this results in a material noncomplia nce with the MFMA 65(1) and 65(2) (e), and the matter will be included in the audit report.	Inadequa te processes to ensure that suppliers are paid within 30 days of receipt of invoice.	more necessary controls will be implemen ted to ensure that suppliers are paid within 30 days of receipt of invoice. All invoices received are recorded by date.	all invoices are recorde d and paid within 30 days	ongoi ng	Acting CFO

			65(2)(e), and the matter will be included in the audit report.						
COM M 10 OF 2021 /22	FINDIN G NO:55	Failure to implemen t credit control and debt collection	 a) During the audit of revenue and debt management, the following issues were identified evidencing that the municipality did not implement the approved customer care debt and collection policy. a) The following table shows an analysis of debts that are long overdue, majority being debt whose ageing is over 365 days. 	As result of the above, manageme nt did not comply with section 62(1)(f)(iii) of the MFMA. Because of the non- complianc e, the municipality is likely to have a likely financial loss amounting to R47 011 865 in future.	 Manage ment did not implemen t its debt and collection policy to ensure that revenue due to the municipal ity is collected Lack of adequat e review and monitorin g of complian ce with applicabl 	Monthly reconsillia tions will be perfomed the age analysis to the ledger. The policy will be updated to include incentives to the public. Monthly reports from the service provider will monitore d. Indigent register moveme	This will be reviewe d during the Interim Financial Stateme nts	Ongoi ng	Acting CFO

b) In addition, for the following selected debtors, it has been identified that these are long outstanding and yet there has not been implementation of credit collection measures such as handover processes as required by the Customer care debt and collection policy:	e laws and regulation s relating to revenue manage ment.	nt will be reported monthly	
As result of the above, management did not comply with section 62(1)(f)(iii) of the MFMA. Because of the non- compliance, the municipality is likely to have a likely financial loss amounting to R47 011 865 in future.			

СО. М 1 0F 202 /22	0 G:56	Unfunded budget	During the year under review, it was noted that the municipality had adopted an unfunded budget. From an inspection of the current and prior year annual financial statements, the municipality had insufficient revenue collection to support its expenditure. The following was noted:	Adopting an unfunded budget is indicative that the municipality is experiencin g cash flow challenges during the year which ultimately contributes to a transgressio n of the legal prescript, which requires for payments to creditors within 30 days as per section 65(2) (e) of the MFMA."	The municipal ity has not implemen ted adequat e collection mechanis ms to ensure financial viability and adequat e cash manage ment. Furthermo re, the budgetin g process is not realistic to ensure budgets are set in accordan ce with realisticall y collectabl e revenue.	To ensure that all budget approved are funded. Adjustme nt budget and final	Adjustm ent budget	28/02/ 2023	Acting CFO	
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M 13 OF 2021 /22	FINDIN G NO: 5		Inadequa te design and implemen tation of the system of internal control for recording of fixed assets	National Treasury has in terms of Final Asset Management guide 2008, provided that the following information to be included in an asset register: This results in a material non- compliance with the MFMA	This results in a material non- complianc e with the MFMA	te design and implemen tation of the system of internal control to ensure that the fixed asset register is GRAP complian ce and assets are not duplicate d.	To appoint a service provider to update the FAR and reconcile to the Ledgr. The reconcilli ation of Work-in- Progress assets will be perfomed on the monthly basis and clear all differenc es between progress reports from Technical Services to the reports	The service provider has been appoint ed to update the FAR reconsilli ation monthly	30- Jun-24	Acting CFO	
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COM M 18 OF 2021 /22	FINDIN G NO: 21	Irregular expenditu re investigati on has not been properly conducte d	During the 2021- 2022 audit of consequence management, the following non- compliance issues were identified with regards to investigation of the prior year irregular expenditure amounting to R21 639 030:	Consequen tly, the writing off of irregular expenditure of R21 639 030 is not appropriate ly supported and therefore invalid The irregular expenditure is therefore understate d by R21 639 030	There is no documen ted approved process designed to ensure that irregular expenditu re is properly investigat ed as required by legislation	the Irregular expenditu re register will be updated monthly. Th current irregular expenditu re will be tabled at MPAC for them to start the investgati ons	MPAC to seat in March	ongoi ng	Acting CFO
COM M 05 OF 2021 /22	FINDIN G NO: 29	Procurem ent: Deviation s not duly approved	During the testing of procurement and contract management, it was noted that the following deviations were not approved by the accounting officer or delegated official as required by the regulations 17 and 36 of the Municipal	This results in non- complianc e with the Municipal supply chain manageme nt regulations and the expenditure is therefore deemed as irregular.	Inadequa te processes to ensure that all deviation s are approved by the delegate d official.	SOP for the SCM processe have been updated and documen ted. Theye will be followed for all procurem ent processes , documen tation	SOPs in place and monthly reports	ongoi ng	acting CFO

			Supply Chain Management Regulations (MSCM). This results in non- compliance with the Municipal supply chain management regulations and the expenditure is therefore deemed as irregular.			and authorisat ion. Monthly reports for the implemen tation of SCM policy			
COM M 05	FINDIN G NO:	Procurem ent:	During the audit of the supply	This results in non-	Inadequa te	SOP for the SCM	SOPs in place	ongoi ng	Acting CFO
OF 2021 /22	30	Award made to supplier who did not score highest points	chain management, it was noted that the award for the 'Supply and delivery of 2000 square meters instant lawn for Durnacol', RFQ/1008, was not awarded to the supplier who has scored the highest evaluation points. Instead, the 5th ranking supplier was awarded. The	complianc e with the Municipal Supply Chain Manageme nt Regulations (MSCM) as well deemed as irregular expenditure	processes to ensure that awards are assessed and evaluate d correctly.	processe have been updated and documen ted. Theye will be followed for all procurem ent processes , documen tation and authorisat ion.	and monthly reports		

			table below lists the suppliers and ranking details from whom responses were received. This results in non- compliance with the Municipal Supply Chain Management Regulations (MSCM) as well			Monthly reports for the implemen tation of SCM policy			
			deemed as						
			irregular expenditure.						
COM M 06 OF 2021 /22	FINDIN G NO: 24	Procurem ent: Declarati on of interest not submitted	While performing the audit procedures to determine whether service providers submitted their declaration of interest forms i.e., MBD4, we identified that the following service providers did not submit signed MBD4 forms.	This results in non- complianc e with the Municipal Supply Chain Manageme nt Regulations (MSCM) and the expenditure is therefore deemed to be irregular.	Inadequa te processes to ensure that suppliers have submitted the declarati ons prior to making an award.	SOP for the SCM processe have been updated and documen ted. Theye will be followed for all procurem ent processes , documen tation	SOPs in place and monthly reports	ongoi ng	Acting CFO

			This results in non- compliance with the Municipal Supply Chain Management Regulations (MSCM) and the expenditure is therefore deemed to be irregular.			and authorisat ion. Monthly reports for the implemen tation of SCM policy		
ISS.3 3	FINDIN G NO: 22	Projection s of revenue & expenditu re for each month not included in SDBIP	The Service Delivery and Budget Implementation Plan for 2021/2022 financial year did not include monthly projections of revenue and expenditure.	This results to non- compliance with section 53(3)(a) of the MFMA	Manageme nt did not implement adequate controls to ensure that revenue and expenditur e projections for each month and the service delivery targets and performan ce indicators for each quarter are conducted			

4 G	INDIN 3 NO: 23	No performa nce agreeme nts and performa nce evaluatio n system	During the audit of human resource management the following was identified: a) I was unable to obtain sufficient appropriate audit evidence that appropriate systems and procedures to monitor, measure and evaluate performance of staff were developed and adopted, as required by section 67(1)(d)	tly, manageme nt has not complied with the MSA.	Manage ment did not perform adequat e monitorin g in ensuring complian ce with the MSA on performa nce manage ment.				
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			section 57(2)(a) of the MSA						
COM M 06 OF 2021 /22	FINDIN G NO: 31	Procurem ent: Awards to service providers with tax non- complian t status	During the audit of competitive bids, it was noted that the following two winning providers were reflected as not compliant on the CSD Compliance history report as at the date of award. Refer to table below for details of the award. This results in non- compliance	This results in non- complianc e with the Municipal Supply Chain Manageme nt Regulations (MSCM) and the expenditure is therefore deemed to be irregular.	Inadequa te processes to ensure that awards are only made to suppliers whose tax matters are in order.	SOP for the SCM processe have been updated and documen ted. Theye will be followed for all procurem ent processes , documen tation and authorisat	SOPs in place and monthly reports	ongoi ng	Acting CFO

			with the Municipal Supply Chain Management Regulations (MSCM) and the expenditure is therefore deemed to be irregular.			ion. Monthly reports for the implemen tation of SCM policy			
COM M 09 OF 2021 /22	FINDIN G NO: 32	Inconsiste ncies between the predeter mined requirem ents as per the bid invite and the bid evaluatio n criterion	During the audit of the competitive bids, it was noted that the following bid was evaluation based on the additional criteria that was not included as part of the predetermined requirements as per the bid invite.	This results in non- complianc e with MFMA and the expenditure made to date on this tender is therefore deemed to be irregular.	Inadequa te processes to ensure that the predeter mined requirem ents stipulated in the bid invitation is consistent with the evaluatio n criterion used when evaluatin g responses from bid invites.	SOP for the SCM processe have been updated and documen ted. Theye will be followed for all procurem ent processes , documen tation and authorisat ion. Monthly reports for the	SOPs in place and monthly reports	ongoi ng	Acting CFO

						implemen tation of SCM policy			
COM M 09 OF 2021 /22	FINDIN G NO: 28	Procurem ent: Conflict of interest identified	During the audit of competitive bids, it was noted that the submitted MBD 4, by Perfolence (Pty) Ltd was completed by the director (Silindile Masondo) as follows: However, through inspection of Computer Assisted Audit Techniques (CAAT'S), it was identified that the director for Perfolence (Pty) Ltd, Silindile Masondo was an employee of the state, employed at Amajuba FET college, from 16 February 2021 to 31	This results in non- complianc e with the Municipal Supply Chain Manageme nt Regulations (MSCM) and the payments made during the year to Perfolence (Pty) Ltd are deemed to be irregular.	Inadequa te processes to ensure that awards are only made to suppliers who have correctly declared the status with regard to their service in the state	SOP for the SCM processe have been updated and documen ted. Theye will be followed for all procurem ent processes , documen tation and authorisat ion. Monthly reports for the implemen tation of SCM policy	SOPs in place and monthly reports	ongoi ng	Acting CFO

December	
2022, employee	
number	
0201217C.	
The above	
information	
confirms that	
the director for	
Preference was	
employed by	
the state in less	
than 12 months	
at the date of	
award which	
was on 31	
August 2021.	
Refer to table	
below for	
details of the	
award.	
This results in	
non-	
compliance	
with the	
Municipal	
Supply Chain	
Management	
Regulations	
(MSCM) and	
the payments	
made during	
the year to	
Perfolence (Pty)	
Ltd are	
deemed to be	
irregular.	

	COM M 15 OF 2021 /22	FINDIN G NO: 33		Duplicate d scope on procurem ent of finance consultan ts	During the audit of competitive bids, it was identified that an award was made to NRB Accounting for tender number: 08/07/2021 - Compilation of GRAP Compliant Infrastructure/I mmovable Fixed Asset Register.	This results in non- complianc e with the MFMA and the expenditure made to NRB Accounting is deemed fruitless and wasteful expenditure	Inadequa te review of the procurem ent process to ensure that there are no duplicate awards.	SOP for the SCM processe have been updated and documen ted. Theye will be followed for all procurem ent processes , documen tation and authorisat ion. Monthly reports for the implemen tation of SCM policy	SOPs in place and monthly reports	ongoi ng	Acting CFO
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M O	021	FINDIN G NO: 34		Possible splitting of order	During the testing of quotations, it was noted that two quotations, with subsequent requisition numbers, were requested and awarded around the same time and also the scope of works is similar. The award was made to the same service provider. If the scope was sourced in one procurement process, the competitive bidding process would have applied instead of the quotation process. The details are as follows: This results in non- compliance with the	This results in non- complianc e with the Municipal Supply Chain Manageme nt Regulations (MSCM) and the total amount paid for both the quotations is deemed as irregular expenditure	Inadequa te processes to ensure that quotation s are not deliberat ely split to avoid complyin g with competiti ve bidding process.	SOP for the SCM processe have been updated and documen ted. Theye will be followed for all procurem ent processes , documen tation and authorisat ion. Monthly reports for the implemen tation of SCM policy	SOPs in place and monthly reports	ongoi ng	Acting CFO
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			Supply Chain Management Regulations (MSCM) and the total amount paid for both the quotations is deemed as irregular expenditure.						
COM M 5 OF 2021 /22	FINDIN G NO 58	Procume nt: Supply chain manage ment documen ts not provided for audit	The following information relating to procurement and contract management testing was requested from the municipality and to date remains outstanding: Non submission of the above information results in a limitation of scope on the audit of procurement	Non submission of the above information results in a limitation of scope on the audit of procureme nt and contract manageme nt.	Lack of proper record keeping to ensure that complete , relevant, and accurate informatio n is readily accessibl e and available to support supply chain processes	SOP for the SCM processe have been updated and documen ted. Theye will be followed for all procurem ent processes , documen tation and authorisat	SOPs in place and monthly reports	ongoi ng	acting CFO

			and contract management.			ion. Monthly reports for the implemen tation of SCM policy			
COM M 20 OF 2021 /22	FINDIN G NO: 42	Differenc es between invoice amount and fixed asset register	 a) During the audit of long standing projects, variances were identified between the carrying amount of work in progress (WIP) per the fixed asset register (FAR) and the project payments made as at year end. The details of the variance are as follow: b) In addition, the progress reports, contracts and appointment letters for the previous 	Due to the limitation placed on the supporting document for the old contractors who worked on the testing ground, the overall misstateme nt on the capital work in progress is unknown.	Manage ment did not perform adequat e reviews to ensure that the total payments made to suppliers agree to the amount captured in the fixed assets register.	To appoint a service provider to update the FAR and reconcile to the Ledgr. The reconcilli ation of Work-in- Progress assets will be perfomed on the monthly basis and clear all differenc es between progress reports from	The service provider has been appoint ed to update the FAR reconsilli ation monthly	31/03/ 2023	acting CFO

contractors		Technical	
working on the		Services	
construction of		to the	
the testing		reports	
ground, were		from	
requested in		Finance	
Request for			
information 61			
dated 08			
November 2022			
and has to date			
not been			
submitted for			
audit.			
Consequently,			
the			
construction of			
the new offices			
has been			
understated by			
R6 359 032,87			
Due to the			
limitation			
placed on the			
supporting			
document for			
the old			
contractors			
who worked on			
the testing			
ground, the			
overall			
misstatement			
on the capital			
work in progress			
is unknown.			
			l l

M 24 OF 2021 /22G NO: 49al grant for prior and current year recorded in the periodof the conditional grants, the following was noted:tly, the revenue no from exchange transaction is misstatedM 24 OF 2021 /22G NO: 49al grant for prior and current year recorded in the periodof the conditional grants, the following was noted:tly, the revenue no exchange transaction is misstatedM 24 2021 /22G NO: 49al grant for prior and current year recorded transaction relating to the periodtly, the revenue no following was a) The following transaction revenueM 24 2020/21 financial year has been incorrectly recorded inthe transaction revenue	Manage Grants register is up to date of will be up to date monthly with the personal received avenue and received evenue and received evenue and will be recorded Evenue will be recognise d monthly will be recorded.
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COM M 14 OF 2021 /22	Assets that could not be verified	The following assets selected for the physical verification exercise could not be verified as the fixed assets register did not include sufficient information such as the asset number, location/GPS or detailed description:	Consequen tly, the constructio n of the new offices has been understate d by R6 359 032,87	Inadequa te design and implemen tation of the system of internal control to ensure that the fixed asset register is GRAP complian t to enable the ease of physical verificatio n of	To appoint a service provider to update the FAR and reconcile to the Ledgr. The reconcilli ation of Work-in- Progress assets will be perfomed on the monthly basis and clear all differenc	The service provider has been appoint ed to update the FAR reconsilli ation monthly	31/03/ 2023	Acting CFO	
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COM M 10 OF 2021FINDIN G NO: OF 35Reasona ble steps not taken prevent irregular expenditu reDuring the audit of the procurement and contract to and contract management, it was identified that reasonable steps were not taken to prevent irregular expenditure, as required by section 62(1)(d)Inadequa to management, e with the MFMAInadequa te the sources processes to ensure that been poli updated and documen taken to prevent irregular expenditure, as required by section 62(1)(d) the MFMA as a number of findings on non- compliance with supply chain management regulations have been identified in the current year and theyNadequa taken to section 62(1)(d) the MFMA as a number of findings on non- compliance with supply chainInadequa to management results in non- taken to prevent indings on non- compliance with supply chainInadequa to management and an and and authorisat ion. Monthly reports for the implemen	Ps ng CFO d M licy e in
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date of award that has resulted in irregular expenditure of R6 937 938,89 (R21 639 030, at 30 June 2021). In addition, note 50 to the financial statements reflects current year expenditure of R75 052 171 This results in a material non- compliance with the MFMA 62(1)(d), and an audit report finding.		
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<i>ISS.4</i> 8	FINDIN G NO:52	Financial Instrumen ts: Measure ment basis for financial instrumen ts not disclosed	Contrary to the above, the measurement basis in preparing financial statements for the following financial instruments are not disclosed in the summary of significant accounting policies: i) Receivables from exchange transactions ii) Cash and cash equivalents iii) Employee benefits obligations iv) Other financial liabilities. v) Employee benefits obligation. vi) Trade and other payables from non- exchange transactions.	This results in non- complianc e with the GRAP standards.	The financial statemen ts are not adequat ely reviewed against the GRAP checklist to ensure that GRAP complian ce requirem ents are adhered to.	The interim financial ststement s will be prepared and be reviewed to eliminate errors	This will be reviewe d during the Interim Financial Stateme nts		Acting CFO
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			with the GRAP standards.						
COM M 17 OF 2021 /22	FINDIN G NO: 45	Balances per annual financial statemen t differs to the bank confirmati ons	 (i) During the audit of Cash and cash equivalents the following variances were noted between the financial statement (note 11) and the bank confirmations: (ii) In addition, it was identified that the amount for the following reported bank call account was different to 	Consequen tly, the cash and cash equivalents reported on the annual financial statement is understate d by R1 952 011.	Manage ment did not perform adequat e reviews to ensure that amount reported for each bank account in the financial statemen ts is accurate agrees with the investme	The interim financial ststement s will be prepared and be reviewed to eliminate errors	This will be reviewe d during the Interim Financial Stateme nts	31/03/ 2023	Acting CFO

	the amount on the investment register: Consequently, the cash and cash equivalents reported on the annual financial statement is understated by R1 952 011.	nt reconcilia tions and is supporte d and agrees to the bank confirmati ons.		
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COM M 17 OF 2021 /22	I FINDIN G NO:46	Bank account inappropr iately presente d and disclosed	During the audit of Cash and cash equivalents, the following was noted: c) The Standard Bank account number 060032073 is incorrectly presented as the primary account in note 11 to the financial statements. Upon further enquiry, it was noted that this account is not a primary account, but was solely opened to accommodate the community of the Dannhauser for making deposits since there is no First National bank in the town of Dannhauser.	The above findings result in misstateme nt of cash and cash equivalents.	Manage ment did not perform adequat e reviews of the cash and cash equivalen t accounts and balances disclosed in the financial statemen ts to ensure that they are appropria tely presente d.	The interim financial ststement s will be prepared and be reviewed to eliminate errors	This will be reviewe d during the Interim Financial Stateme nts	31/03/ 2023	Acting CFO	
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variance was also noted between the balance on the face of the financial statements and the balance as per the note 11 for cash and
equivalents.
e) The Standard Bank - Notice deposit 068483295002 account disclosed on the financial statements with a balance of R20 590 has been incorrectly included on the note as this account does not belong to
the municipality.
The above Image: Constraint of the provide statement of the provide stateme

	COM M 17 OF 2021 /22	FINDIN G NO: 47		Bank accounts disclosed are not complete	During the audit of Cash and cash equivalent, the following was noted:a) The Standard Bank account number 068480520-003 was not disclosed in note 11, however, it was disclosed in the prior year's financial statements and it is currently active.b) Furthermore, the following Standard Bank account number 068480520-003 was not disclosed in note 11, but the account was confirmed by the bank for the current year:Conseque ntly, the cash and cash equivalent is understated by R20 589,92	Consequen tly, the cash and cash equivalent is understate d by R20 589,92	Manage ment did not perform adequat e reviews of the cash and cash equivalen t accounts and balances disclosed in the financial statemen ts to ensure that there are complete	The interim financial ststement s will be prepared and be reviewed to eliminate errors	This will be reviewe d during the Interim Financial Stateme nts	31/03/ 2023	Acting CFO	
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	SS.5	FINDIN G NO: 28	Conflict of interest identified	During the audit of competitive bids, it was noted that the submitted MBD 4, by Perfolence (Pty) Ltd was completed by the director (Silindile Masondo) as follows: 1. Perfolence has declared that they were not in the service of state in the last 12 months 2. Perfolence has declared that their directors were not in the service of state in the last 12 months 3. Perfolence has declared that their directors were not in the service of state in the last 12 months 3. Perfolence has declared that neither of provider or a director, manager's spouse, child or parent were in the service of the state in the	This results in non- compliance with the Municipal Supply Chain Management Regulations (MSCM) and the payments made during the year to Perfolence (Pty) Ltd are deemed to be irregular	Inadequate processes to ensure that awards are only made to suppliers who have correctly declared the status with regard to their service in the state	SOP for the SCM processe have been updated and documen ted. Theye will be followed for all procurem ent processes , documen tation and authorisat ion. Monthly reports for the implemen tation of SCM policy	SCM SOPs and SCM policy are in place		Acting CFO
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				last 12 months					
<i>ISS.5</i> 9	FINDIN G NO:29	SI	Peviation not duly approved	During the testing of procurement and contract management, it was noted that the following deviations were not approved by the accounting officer or delegated official as required by the regulations 17 and 36 of the Municipal Supply Chain	Deviations not duly approved	Inadequate processes to ensure that all deviations are approved by the delegated official	SOP for the SCM processe have been updated and documen ted. Theye will be followed for all procurem ent processes , documen tation and	SCM SOPs and SCM policy are in place	Acting CFO

			Management Regulations (MSCM).			authorisat ion. Monthly reports for the implemen tation of SCM policy		
ISS.6 O	FINDIN G NO: 31	. Awards to service providers with tax non- complian t status	During the audit of competitive bids, it was noted that the following two winning providers were reflected as not compliant on the CSD Compliance history report as at the date of award. Refer to table below for details of the award	This results in non- compliance with the Municipal Supply Chain Management Regulations (MSCM) and the expenditure is therefore deemed to be irregular.	Inadequate processes to ensure that awards are only made to suppliers whose tax matters are in order.	SOP for the SCM processe have been updated and documen ted. Theye will be followed for all procurem ent processes , documen tation and authorisat ion. Monthly reports for the implemen tation of SCM policy	SCM SOPs and SCM policy are in place	Acting CFO

ISS.6	FINDIN G NO:	Reaso ble ste	9	This results in a material	This results in a	SOP for the SCM	SCM SOPs	Acting CFO
1	35	not tal		non-	material		and	
	55	to	and contract	compliance	non-	processe	SCM	
				with the		have		
		prever	Ū.	MFMA	compliance with the	been	policy	
		irregul				updated	are in	
		expen		62(1)(d), and	MFMA	and	place	
		re	steps were not	an audit	62(1)(d),	documen		
			taken to	report finding	and an	ted.		
			prevent		audit	Theye will		
			irregular		report	be		
			expenditure, as		finding.	followed		
			required by			for all		
			section 62(1)(d)			procurem		
			the MFMA as a			ent		
			number of			processes		
			findings on non-			, de europe		
			compliance			documen		
			with supply			tation		
			chain			and		
			management			authorisat		
			regulations			ion.		
			have been			Monthly		
			identified in the			reports for		
			current year			the		
			and they			implemen		
			constitute			tation of		
			irregular			SCM		
			expenditure.			policy		
			Among the					
			findings					
			identified are					
			repeat findings					
			that relates to					
			awards to					
			service					
			providers with					
			non-compliant					
			tax status at					

			date of award that has resulted in irregular expenditure of R6 937 938,89 (R21 639 030, at 30 June 2021).					
<i>ISS.6</i> 2	FINDIN G NO: 37	Risk Assessme nt not performe d	 The municipality has no risk assessment processes in place and no strategic and operational risk registers was kept. No quarterly performance evaluations for all senior managers were performed 	Non- compliance with MFMA Poor financial performance and management of the municipality due to performance of management not being monitored and evaluated.	Manageme nt did not adequately exercise oversight responsibili ty over risk manageme nt and internal controls. Manageme nt did not monitor compliance with MFMA.	Manage ment should: • Establish and maintain effective, efficient and transpare nt risk manage ment strategies and methodol ogy • Perform risk manage ment		MM

						process and maintain a risk register · Perform performa nce evaluatio n for senior manage ment on a quarterly basis.		
<i>ISS.6</i> <i>4</i>	FINDIN G NO 38	. No financial delegatio n of authority	Contrary to the abovemention ed it was noted that the municipality has no established financial delegation of authority.	 There are no clear guide of authorisation powers Possible occurrence of unauthorised expenditure 	Manageme nt did not adequately exercise oversight responsibili ty over internal controls.	Manage ment should establish and maintain a delegatio n of authority which clearly defines who will be responsibl e to authority which transactio n and hierarchy of	MM	

						powers.		
ISS.6 5	FINDIN G NO : 43	. Incompl ete informatio n in the fixed asset register	Consequently, this results in an overstatement of the property plant and equipment. Non-compliant asset register	Consequently , this results in an overstateme nt of the property plant and equipment.	Inadequate design and implement ation of the system of internal control to ensure that the fixed	powers. To appoint a service provider to update the FAR and reconcile to the	The service provider has been appoint ed to update the FAR	
					the fixed asset register is GRAP compliant to enable the ease of physical verification of assets.	to the Ledgr. The reconcilli ation of Work-in- Progress assets will be perfomed on the monthly basis and clear all	the FAR reconsilli ation monthly	
						differenc es between progress reports from Technical Services to the reports from Finance		

COM M 07 OF 2021 /22	FINDIN G NO: 50	Expenditu re classified incorrectl y	During the audit of operational expenditure, it was noted that the ward committee stipend was incorrectly classified under mayoral expenses vote instead of being disclosed under the ward committee general ledger vote/account.	Consequently , ward council committee expenditure is understated by R172 650 and mayoral expenditure is overstated by the same amount.	Manageme nt did not perform adequate reviews of the posting of transaction s to ensure that they are captured in the correct general ledger account.	The interim financial ststement s will be prepared and be reviewed to eliminate errors	This will be reviewe d during the Interim Financial Stateme nts	acting CFO
COM M 17 OF 2021 /22	FINDIN G NO: 51	Expenditu re from contracte d services understat ed by VAT amount	During the audit of the expenditure, it was noted that the following supplier is not a VAT vendor and no VAT amount or VAT number was reflected on the supplier invoice. However, it was confirmed through the vendor search on the SARS website that this supplier was not registered for vat, but the payment has	Consequently , the contracted service expenditure is understated by a projected amount of R78 880.	Manageme nt did not perform adequate reviews of the posting of the expenditur e payments and invoices to ensure that the transaction s are captured at the correct amount, and that all VAT transaction s are	The interim financial ststement s will be prepared and be reviewed to eliminate errors	This will be reviewe d during the Interim Financial Stateme nts	

	been captured in contracted expenditure account net of the VAT amount.	supported by valid tax invoices.			
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OVERSIGHT COMMITTEE REPORT – 2021/2022

11. CONCLUSION

The Municipal Oversight Committee (Municipal Public Accounts Committee) commends Council, the Municipal Manager, the Senior Management Team and all staff at Dannhauser Municipality on the strides made towards good governance. However, much needs to be done to strengthen internal controls relative to procurement processes and contract management. The 2021/2022 financial year must target focus attention in this area. In this regard, the Municipal Public Accounts Committee will be monitoring the implementation of the Action Plan developed by the Management Team in response to the Auditor-General's findings including commitments made by the Mayor and the Municipal Manager to address audit outcomes in the prior and current years

Having performed the following tasks:-

- ✓ Reviewed and analysed the Annual Report;
- ✓ Considered that no written comments were received on the Annual Report from the public consultation process;
- Received and considered Council's Audit Committee views and comments on the annual financial statements and the performance report; and
- ✓ Prepared the draft Oversight Report, taking into consideration, the views and inputs of representatives of the Auditor-General, and Council's Audit Committee;

The Municipal Public Accounts Committee has pleasure in presenting the Oversight Report to Council for consideration;

COMMITTEE RECOMMENDS:

1. That Council having fully considered the Annual Report of Dannhauser Municipality for the 2021/2022 Financial Year, adopts the Oversight Report for the 2021/2022 Financial Year.

OVERSIGHT COMMITTEE (MPAC) CHAIRPERSON CLLR ES KUNENE