EMAKHAZENI LOCAL MUNICIPALITY



BUDGET POLICY ANNEXURES

APPROVED BY COUNCIL ON: _ JUNE 2015

IMPLEMENTATION DATE: 1 JULY 2015

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- 1. Budget Virement Procedures
- 2. Budget Virement request forms

Budget Virement Procedures

- 1. All virement proposals must be submitted in writing and forwarded to the Deputy Manager Budget for checking and approval process.
- 2. All virement proposals in writing must include the following information:
 - a. Department and vote from where funds are proposed to move from
 - b. Department and vote from where funds are proposed to <u>move to</u>
 - c. Proposed amount
 - d. Purpose for the virement proposal
- 3. All virment proposals must be signed by the Senior Manager of the Department within which the vote is allocated.
- 4. All virements within a function (between the various cost centres that are linked to the function regardless of the department) should be approved by the specified officials as per the Finance Delegations framework.
- 5. All virements between functions which should be approved by means of a council decision.
- 6. All documentation must be in order and approved before any expenditure can be committed or incurred. (Section 79 MFMA)
- 7. Once all documentation is in order and approved, the Budget Officer will transact the virement on the municipal's financial system.
- 8. All virements must be reported to the Municipal Council on a monthly basis.



(In line with the municipality's Approved System of Delegations)

EMAKHAZENI LOCAL MUNICIPALITY

25 Scheepers Street Belfast, 1100 P.O Box 17 Belfast, 1100 Tel: 013-253-1121 Fax: 013-253-2440/ 013-253-1889

E-mail: municipality@emakhazenilm.co.za

	BUDGET VIREMENT REQUEST FORM							
(R0.01 - R200,000.00)								
VOTE EROM:	VOTE TO:							

	VOIL FROW.	1	VOIL IO.		
VOTE NR	VOTE DESCRIPTION	VOTE NR	VOTE DESCRIPTION	AMOUNT	REASONS
TOTAL					
Attach proof of f	funds balances from the Accountin	ng System.		•	
Requested by	(Manager Name):		Signature;		Date:
Approved by: (CFO- Name):		Signature;		Date:	
Captured by: (Budget office):		Signature;		Date:	



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BUDGET VIREMENT REQUEST FORM

(R200,001.00 - R500,000.00) VOTE FROM: VOTE TO: AMOUNT REASONS VOTE NR VOTE DESCRIPTION VOTE NR VOTE DESCRIPTION TOTAL Attach proof of funds balances from the Accounting System. Requested by (Manager Name): Signature; Approved by: (CFO- Name): Signature: Approved by: (Municipal Manager): Signature;_____ Captured by: (Budget office): Signature;_____ Date:



(In line with the municipality's Approved System of Delegations)

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BUDGET VIREMENT REQUEST FORM (R500.001.00 and above)

		60000V	VVVVV		
VOTE FROM:		VOTE TO:		****	
VOTE NR	VOTE DESCRIPTION	VOTE NR	VOTE DESCRIPTION	AMOUNT	REASONS
TOTAL					
Attach proof of funds	balances from the Accounting	System.			
Requested by (Ma	anager Name):		Signature;		Date:
Approved by: (CFC	O- Name):		Signature;		Date:
Approved by: (Mu	ınicipal Manager):		Signature;		Date:
Approved by: (Cou	uncil Resolution nr):		_		Date;
Captured by: (Bud	get office):		Signature;		Date: