

**Community Development workers (CDW)  
Monthly Report as per the Division of Revenue Act**

**Municipality** Breede Valley (WC025)

**Financial Year** 2020/2021  
**Month End** M04 October 2020

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

|   | July  | August | September | October | November | December | January | February | March | April | May   | June  | Total |
|---|-------|--------|-----------|---------|----------|----------|---------|----------|-------|-------|-------|-------|-------|
| Received Prior Months ( Current Financial Year) | 0     | 0      | 0         | 0       | 0        | 0        | 0       | 0        | 0     | 0     | 0     | 0     |       |
| Received in the Current Month                   | 0     | 0      | 0         | 0       | 0        | 0        | 0       | 0        | 0     | 0     | 0     | 0     | 0     |
| Total CDW funds Received                        | 0     | 0      | 0         | 0       | 0        | 0        | 0       | 0        | 0     | 0     | 0     | 0     | 0     |
| Spent Prior Months ( Current Financial year)    | 0     | 0      | 0         | 0       | 0        | 0        | 0       | 0        | 0     | 0     | 0     | 0     |       |
| Spent in the Current Month                      | 0     | 0      | 0         | 0       | 0        | 0        | 0       | 0        | 0     | 0     | 0     | 0     | 0     |
| Accumulated CDW Expenditure                     | 0     | 0      | 0         | 0       | 0        | 0        | 0       | 0        | 0     | 0     | 0     | 0     | 0     |
| Total CDW funds Received and Not Spent          | 0     | 0      | 0         | 0       | 0        | 0        | 0       | 0        | 0     | 0     | 0     | 0     |       |
| Expenditure Percentage to date                  | 0,00% | 0,00%  | 0,00%     | 0,00%   | 0,00%    | 0,00%    | 0,00%   | 0,00%    | 0,00% | 0,00% | 0,00% | 0,00% |       |
| Funds Currently Committed but Not Spent         |       |        |           |         |          |          |         |          |       |       |       |       |       |
| Scheduled Transfers Withheld                    |       |        |           |         |          |          |         |          |       |       |       |       |       |

**Comments:**

(Print Name Below)

I, **R. T. Ontong**  
and that this report has been submitted electronically as required.

, The Accounting Officer or Delegate certify that the above information is correct

**Signed**



**Dated: 11 November 2020**