

## QUALITY CERTIFICATE

I, **Dr Michele Gratz**, the municipal manager of **GEORGE MUNICIPALITY** (name of municipality), hereby certify that –

(mark as appropriate)

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The monthly budget statement

For the month of **April 2022** (month/year) has been prepared in accordance with the Municipal Finance Management Act and regulations made under the Act.

Print name     **Dr Michele Gratz**

Municipal Manager of **GEORGE WC044** (name and demarcation of municipality)

Signature.....*m. Gratz*.....

Date .....*16/05/2022*.....

*Note: The footnotes included in the document explaining discrepancies.*