MPUMALANGA PROVINCIAL GOVERNMENT

Department of Finance

Litiko LeteTimali	UmNyango weZeemali	Departement van Finansies	Kgoro ya Matlotlo

TO	:	**HEADS OF DEPARTMENT** **CEOs OF PUBLIC ENTITIES LISTED ON SCHEDULE 3C**
FROM	:	**MR J.B.MBATHA** **ACTING HEAD OF DEPARTMENT**
SUBJECT	:	**SUBMISSION OF ANNUAL PLANS ON ROTATION OF SCM PRACTITIONERS ATTACHED TO THE SUB COMPONENTS OF THE SCM UNIT**

The purpose of this memorandum is to eliminate corrupt and fraudulent practices which seem to be prevalent in the Government procurement system. The memorandum is applicable to all provincial departments and the public entities listed on schedule 3C of the Public Finance Management Act.

In September 2009, the Provincial Treasury issued a circular to all departments and public entities listed on schedule 3C of the Public Finance Management Act, giving a directive on processes to be followed in rotating SCM practitioners. In the process, the Provincial Treasury has observed that most of Government institutions which are mentioned above are experiencing some difficulties in implementing the directive.

Having considered the prevailing situation, we then reconsidered the matter and resolved that the rotation process should be carried out annually instead of quarterly basis, as it was required in terms of our initial circular dated 8 September 2009. In the light of the above, all provincial departments and public entities listed on schedule 3C of the PFMA are requested to submit their annual implementation plans as per the attached template, on or before Friday, 29 April 2011. Your cooperation will be appreciated.

Regards,

MR J.B. MBATHA
ACTING HEAD OF DEPARTMENT

DATE: 19/4/2011

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PFMA/ SCM Template on rotation of staff in terms of Circular PFMA/ SCM 1/2009

Name of Institution: _____

Personal Particulars			SCM Unit' Components		Logistical Arrangement			Rotation Period	
Surname and Initials	Rank	Persal No.	Current Placement	SCM Component Rotated to	BAS or LOGIS Accessibility				
					Yes	No	From	To	

Recommendations: _____

_____

Chief Financial Officer

Date: _____

Approved / Not approved _____

_____

Head of Department

Date: _____

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