

Registration number: LR2/6/6/1 275 Kent Avenue, Ferndale, Randburg 2125 PO Box 2578, Randburg +27 (0) 861 664 226 www.mibco.org.za

DATE: 15 MAY 2024

TO: ALL PARTICIPANTS IN THE MOTOR INDUSTRY

SUBJECT: IMPLEMENTATION OF REMITTANCE ADVICES FOR

PAYMENT ALLOCATION

**MIBCO** has identified discrepancies between payments received and the corresponding Returns in the Council's bank account, hindering the correct allocation to intended funds. This has led to delays and complications in payment allocation.

To address this issue, the Council will implement several measures, including the mandatory use of **REMITTANCE ADVICES** during the payment process.

Starting from **20 May 2024**, **REMITTANCE ADVICES** will be a compulsory inclusion in Forecast Statements and Debtors Statements. Upon making a payment, employers are required to complete the **REMITTANCE ADVICE** with the relevant payment details and return it to the Council by **EMAIL** to **Returns@mibco.org.za** to facilitate accurate allocation.

## **REMITTANCE ADVICE** Defined:

A Remittance Advice is not only a proof of payment but also provides essential details regarding the payer's intentions, crucial for the payment allocation process.

For reference, an example of the new MIBCO Remittance Advice is attached.

For any inquiries related to the correct payment reference, please contact the MIBCO Call Centre at **086 166 4226**.

Circular Letter no: 2024/0005

## **MIBCO** PAYMENT REMITTANCE ADVANCE ALTERNATIVE PAYMENT TICK IF THIS IS ( PLEASE COMPLETE DETAILS) THE DUE RETURN CAPITAL GROSS FUND REF INVOICE DATE INTEREST AMOUNT IS PERIOD AMOUNT AMOUNT DUE THE PAID GROSS AMOUNT CAPITAL INTEREST AMOUNT AMOUNT PAID Mar-22 AWPROV 10/06/2023 10 000.00 1 200.00 11 200.00 6 985.00 7 807.00 822.00 Mar-22 MIPROV 10/06/2023 8 000.00 800.00 8 800.00 9 500.00 800.00 10 300.00 Mar-22 COUNCL 10/06/2023 325.00 325.00 Mar-22 NUMSA 10/06/2023 412.00 412.00 412.00 41.00 453.00 TOTAL PAYMENT TOTAL PAYMENT DUE ACTUALLY MADE 20 737.00 18 917.00 **EMPLOYER** PAYMENT BANK CODE DATE AMOUNT 18 917.00 7958631

PLEASE USE THE FORM BELOW TO PROVIDE DETAILS OF THE DIFFERENCES IN GROSS AMOUNT DUE AS PER RETURN AND GROSS AMOUNT ACTUALLY PAID

FUND CODE	EMPLOYEE NAME	EMPLOYEE NUMBER	AMOUNT PAID	REDUCED AMOUNT	REASON FOR THE ADDITIONAL PAYMENT OR REDUCED PAYMENT			
		-	-					
RECONCILED TOTAL								

Circular Letter no: 2024/0005