

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION

POSITION DUTY STATEMENT

PROPOSED

CURRENT

CDCR INSTITUTION OR HEADQUARTERS PROGRAM Sierra Conservation Center		POSITION NUMBER (Agency-Unit-Class-Serial) 099-800-4177-001		MCR / HCR 1
DIVISION / UNIT Business Services/Accounting/Trust		CLASSIFICATION TITLE Accountant I (Specialist)		
		WORKING TITLE Accountant I (Specialist)		
		TIME BASE / TENURE PFT	CBID R01	WWG 2
LOCATION Jamestown, California		INCUMBENT		EFFECTIVE DATE 09/12/2023

CDCR'S MISSION and VISION

Mission

We enhance public safety through safe and secure incarceration of offenders, effective parole supervision, and rehabilitative strategies to successfully reintegrate offenders into our communities.

Vision

We enhance public safety and promote successful community reintegration through education, treatment, and active participation in rehabilitative and restorative justice programs.

COMMITMENT TO DIVERSITY, EQUITY, AND INCLUSION

The California Department of Corrections and Rehabilitation (CDCR) and California Correctional Health Care Services (CCHCS) are committed to building and fostering a diverse workplace. We believe cultural diversity, backgrounds, experiences, perspectives, and unique identities should be honored, valued, and supported. We believe all staff should be empowered. CDCR/CCHCS are proud to foster inclusion and representation at all levels of both Departments.

DIVISION OVERVIEW

The primary mission of the Sierra Conservation Center (SCC) is to provide housing programs and service for minimum and medium custody inmates, to aid in their rehabilitation. SCC is responsible for the training and placement of male inmates in the Conservation Camp Program. SCC administers 31 male camps located throughout the State of California.

The Accounting Office receives, processes, and maintains inmate trust accounts, process family aid, special purchase order, distributing payroll checks and vendor invoicing for reimbursements.

GENERAL STATEMENT

Under the general supervision of the Senior Accounting Officer (Supervisor), the Accountant I (Specialist) performs semiprofessional accounting work in the maintenance of inmate financial records and associated accounts. Essential duties can be reassigned for the well-being and efficient operation of the Accounting Department and the Institution.

% of time performing duties	Indicate the duties and responsibilities assigned to the position and the percentage of time spent on each. Group related tasks under the same percentage with the highest percentage first.
45%	Review and apply financial obligations for restitution and/or direct orders into inmate accounts. Run inmate trust statements upon request. Post charges to inmate accounts for payment of various types which may include postage, notary charges, copy charges, charges for damages, legal supplies, etc. Participate in sorting and distributing payroll warrants and other various checks to staff. Provide customer service at the window as needed. Load the printer with check stock daily and execute printing the work that has been input throughout the day from Trust Restitution Accounting Canteen System (TRACS). Maintain appropriate daily logs for checks printed and check stock. Prepare proper stop payment forms utilizing the Stop Payment Request (STD. 432) form.
20%	Collect/reconcile tokens and cash collected for the Inmate Welfare Fund (IWF) Photo Project. Prepare pre-listing income receipts to be posted to inmate trust accounts. Collect and audit inmate pay sheets and post inmate pay to inmate trust accounts. Post various income types into inmate accounts; vendor refunds, money orders, settlements, etc.

20%	Prepare the monthly Indigent Inmate List from received requests from inmates by placing in numerical order when received, printing Indigent Mailroom Report from TRACS, verifying indigence and forwarding to Mailroom and Warehouse for distribution of envelopes and/or supplies. Notify the inmate in writing about the reason for denial of indigent envelopes.
10%	Review and verify inmate account information to respond to counselors, correctional officers, inmates and other institution. Respond to informal Inmate/Parolee Request for Interview, Item or Service (CDCR 22) appeals. Process and maintain logs for Prison Litigation Reform Act (PLRA). Prepare certified trust statements. Maintain a log for Stop Payments. Provide back-up coverage for other Accounting work stations during staff absences or vacancies as needed. Attend required 40 hours of In-Service Training (IST) annually. Perform other duties as required within the scope and duties of an Accountant I (Specialist). Perform all other duties as assigned by the Senior Accounting Officer, Supervisor or Correctional Business Manager.
5%	Perform administrative duties including, but not limited to: adhere to Department policies, rules and procedures; submit administrative requests including leave, travel, and training in a timely and appropriate manner; accurately report time, and submit timesheets by the due date.

SPECIAL REQUIREMENTS

- CDCR does not recognize hostages for bargaining purposes. CDCR has a "NO HOSTAGE" policy and all prison inmates, visitors, nonemployees and employees shall be made aware of this.

CONSEQUENCE OF ERROR

- Consequences of error may result in loss of time and could cause significant delays in program production. Such delays can result in inefficient use or misdirection of department resources resulting in the inability to meet efficiency and time line goals, and varying degrees of negative financial impacts to the department.

To be reviewed and signed by the supervisor and employee:

EMPLOYEE'S STATEMENT:

- *I HAVE DISCUSSED THE DUTIES AND RESPONSIBILITIES OF THE POSITION WITH MY SUPERVISOR AND RECEIVED A COPY OF THIS DUTY STATEMENT.*

EMPLOYEE'S NAME (Print)	EMPLOYEE'S SIGNATURE	DATE
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SUPERVISOR'S STATEMENT:

- *I CERTIFY THIS DUTY STATEMENT REFLECTS CURRENT AND AN ACCURATE DESCRIPTION OF THE ESSENTIAL FUNCTIONS OF THIS POSITION*
- *I HAVE DISCUSSED THE DUTIES AND RESPONSIBILITIES OF THE POSITION WITH THE EMPLOYEE AND PROVIDED THE EMPLOYEE A COPY OF THIS DUTY STATEMENT.*

SUPERVISOR'S NAME (Print)	SUPERVISOR'S SIGNATURE	DATE
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