CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION

POSITION DUTY STATEMENT - General

☐ PROPOSED

☒ CURRENT

CDCR INSTITUTION OR HEADQUARTERS PROGRAM	POSITION NUMBER (Agency-Unit-Class-Serial)			MCR / HCR
Pelican Bay State Prison	394-800-4177-001			
DIVISION / UNIT	CLASSIFICATION TITLE			
	Accountant I, Specialist			
	WORKING TITLE			
Administration- Accounting Office	Accountant I, Specialist			
	TIME BASE / TENURE	CBID	WWG	COI
	Perm/ FT	R01	2	Yes ☐ No ☒
LOCATION	INCUMBENT		EFFECTIVE DATE	
Crescent City, California			1/1/2026	

CDCR'S MISSION, VISION and COMMITMENT

Mission

To facilitate the successful reintegration of the individuals in our care back to their communities equipped with the tools to be drug-free, healthy, and employable members of society by providing education, treatment, rehabilitative, and restorative justice programs, all in a safe and humane environment.

Vision

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

Commitment

CDCR and CCHCS are committed to transforming the correctional landscape to create safer, more professional, and more fulfilling environments for our employees, the incarcerated population, and those supervised in our communities. Through systemwide improvements grounded in proven and emerging practices, we aim to strengthen rehabilitation, enhance workplace satisfaction, and support successful reentry into the community through our institutions, parole, and community partnerships. Our shared mission is to promote safety, wellness, and human dignity while fostering positive change for all those who live and work within our institutions and communities.

CDCR and CCHCS are committed to building an inclusive respectful workplace. We are determined to attract and hire candidates from all communities and empower employees from a variety of backgrounds, perspectives, and personal experiences. We are proud to foster inclusion and drive collaborative efforts at all levels of the Department.

DIVISION OVERVIEW

You are a valued member of the department's team. You are expected to work cooperatively with team members and others to enable the department to provide the highest level of service possible. Your creativity and productivity are encouraged. Your efforts to treat others fairly, honestly, and with respect are important to everyone who works with you.

GENERAL STATEMENT

Under the general supervision of the Senior Accounting Officer (Supervisor), the Accountant I (Specialist) perform semi-professional accounting work in the maintenance of incarcerated persons financial records and associated accounts

% 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.
50%	Processes and file incarcerated persons trust withdrawals (CDC-193) in the Trust Restitution Accounting Canteen System (TRACS). Prepares the printed checks for signature; enters check deposits for incarcerated persons into TRACS. Processes and enters batches for incarcerated persons payroll for support, Incarcerated persons Welfare Fund (IWF), and contracting agencies, which include the collection of incarcerated persons pay calculation forms at institution sites. Enters batches for incarcerated persons pay. Posts charges (a withdrawal or a hold against funds) to incarcerated persons accounts for payment of various types (may include postage, notary charges, medical co pays, and copy charges, charges for damages, family visits and legal supplies). Sorts and distributes incoming mail.
25%	Places funds from incarcerated persons account on hold. Enter information for checks to be printed in TRACS for check requests, special purchase orders, and annual/quarter package orders. Assists in preparing checks for signature for incarcerated persons fundraisers in TRACS.
20%	Reviews and verifies incarcerated persons account information to respond to counselors, correctional officers, incarcerated persons, and other institutions. Processes informal appeals (GA22). Process legal verification of account activity. (Informa Pauperis). Print and distributes monthly incarcerated persons statements. Forwards transferred incarcerated persons charges to new locations. Prepares weekly indigent list for mailroom staff. Preform Notary Public duties as needed for the institution.
5%	Participates in annual In-Service Training as mandated. Provides coverage behind staff vacancies as needed. Perform administrative duties including, but not limited to adhering 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 PERSONAL CHARACTERISTICS

- Influence, change, and strengthen the community. Set an example each day through positive and pro-social role modeling, utilizing dynamic security concepts through observation and building rapport.
- Willingness to play a significant role in the collaborative efforts toward rehabilitation and public safety enhancement.
- Ability to facilitate conversations as a coach and mentor, engaging in a respectful and understanding manner.
- Ability to build trust, improve communication, and assist with the transformation of correctional culture.

SPECIAL REQUIREMENTS

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

CONSEQUENCE OF ERROR

- Example: 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 timeline 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

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**