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|  |  | |  |  | | --- | --- | | |  | | --- | | This position description serves as the official classification document of record for this position. Please complete the information as accurately as you can as the position description is used to determine the proper classification of the position. | | |  | | |  |  | | --- | --- | | **2. Employee's Name (Last, First, M.I.)** | **8. Department/Agency** | |  | MDHHS-COM HEALTH CENTRAL OFF | | **3. Employee Identification Number** | **9. Bureau (Institution, Board, or Commission)** | |  | Bureau of Finance and Accounting | | **4. Civil Service Position Code Description** | **10. Division** | | Accounting Assistant-E | Expenditure Operations | | **5. Working Title (What the agency calls the position)** | **11. Section** | | Accounting Assistant | Accounts Payable | | **6. Name and Position Code Description of Direct Supervisor** | **12. Unit** | | DAVIS, DALLAS M; FINANCIAL MANAGER-3 | Procurement Contract Payment | | **7. Name and Position Code Description of Second Level Supervisor** | **13. Work Location (City and Address)/Hours of Work** | | MANIEZ, KIMBERLY; STATE ADMINISTRATIVE MANAGER-1 | Lansing, MI / Monday - Friday, 8 a.m. - 5 p.m. | | |  | | |  |
|  | |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  | |  | |  | | --- | | **14. General Summary of Function/Purpose of Position** | |  |  | |  |  |  |  | | |  | | --- | | This position performs a range of accounting assistant work in SIGMA. Duties include: processing payment vouchers, purchase order payments and various other types of payments in SIGMA and will perform other accounting assistant duties as assigned. | | | |  | |  |  |  |  | | | |  |

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|  |  |  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **15. Please describe the assigned duties, percent of time spent performing each duty, and what is done to complete each duty.  List the duties from most important to least important. The total percentage of all duties performed must equal 100 percent.** | | | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  | | --- | --- | --- | | **Duty 1** | | | | **General Summary:** | **Percentage:** | **45** | | Process SIGMA purchase orders, payment vouchers and other various SIGMA payments to vendors. | | | | **Individual tasks related to the duty:** |  |  | | * Receive and pre-audit vendor invoices and statements. * Calculate rates paid for all purchases and price extensions. * Verify Items billed against Items ordered and received and reconcile differences through follow-up with the vendor and other employees. * Determine proper payment type in SIGMA for each payment based on transaction type and vendor information. * Post financial data to appropriate accounts in an automated accounting system. | | | | **Duty 2** | | | | **General Summary:** | **Percentage:** | **20** | | Proofread and corrects accounts, vouchers, and payments for accuracy and completeness of information and correct errors found. | | | | **Individual tasks related to the duty:** |  |  | | * Review on-line transactions for accuracy. * Determine proper method/document to correct errors when found. * Prepare entry to correct errors | | | | **Duty 3** | | | | **General Summary:** | **Percentage:** | **15** | | Perform data entry into SIGMA to post revenue and expenditures to proper accounts. | | | | **Individual tasks related to the duty:** |  |  | | * Review journal voucher for completeness of information. * Determine correct process for posting transaction. * Review entry and balances transaction. | | | | **Duty 4** | | | | **General Summary:** | **Percentage:** | **10** | | Assists in year-end closing. | | | | **Individual tasks related to the duty:** |  |  | | * Reviews outstanding invoices and open purchase orders * Contacts vendors, Purchasing, and DHHS program staff to assist in determining proper year end treatment of accounting items * Identifies accounts payable and valid encumbrances * Prepares necessary accounts payable, encumbrance, and journal voucher documents for entry into SIGMA for supervisory review. | | | | **Duty 5** | | | | **General Summary:** | **Percentage:** | **5** | | Participate in training classes for the accounting computer system or other classes as needed. | | | | **Individual tasks related to the duty:** |  |  | | * Attend classes regarding new systems and/or systems updates. * Attend classes to improve work efficiency as needed (such as Excel, Word, Access, etc.) * Integrate new systems/systems updates into the daily work. | | | | **Duty 6** | | | | **General Summary:** | **Percentage:** | **5** | | Other tasks as required. | | | | **Individual tasks related to the duty:** |  |  | |  | | | | | | | | | | |  |
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|  |  |  |  | |  |  | | --- | --- | |  |  | |  | |  | | --- | | **16. Describe the types of decisions made independently in this position and tell who or what is affected by those decisions.** | | |  |  | | |  | | --- | | Decides proper payment amount when voucher, invoice/receiver don't agree. Verifies account coding and what type of document to use when processing transactions. Decides proper method of correcting errors found. | | | | | | | | |  |
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|  |  |  |  |  |  | |  |  | | --- | --- | |  |  | |  | |  | | --- | | **17. Describe the types of decisions that require the supervisor's review.** | | |  |  | | |  | | --- | | When documents are received in Accounting which do not comply with Accounting procedures. When the workload is heavy, the supervisor must prioritize the work. | | | | | | |  |
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|  |  |  | |  |  |  | | --- | --- | --- | |  | |  | | --- | | **18. What kind of physical effort is used to perform this job? What environmental conditions in this position physically exposed to on the job? Indicate the amount of time and intensity of each activity and condition. Refer to instructions.** | | |  |  | | |  | | --- | | Typical office setting | | | | | | | | | |  |
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|  |  |  |  |  | |  |  |  |  | | --- | --- | --- | --- | | |  | | --- | | **19. List the names and position code descriptions of each classified employee whom this position immediately supervises or oversees on a full-time, on-going basis.** | | | | |  |  |  | | |  | | --- | | **Additional Subordinates** | | |  | |  |  |  | |  | |  | | --- | |  | |  | |  |  |  | | | | | |  |
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|  | |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  | | --- | | **20. This position's responsibilities for the above-listed employees includes the following (check as many as apply):** | | | | | | | | | | |  |  |  |  |  |  |  |  |  | |  | |  | | --- | | N | |  | |  | | --- | | Complete and sign service ratings. | |  | |  | | --- | | N | |  | |  | | --- | | Assign work. | |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  | |  | | --- | | N | |  | |  | | --- | | Provide formal written counseling. | |  | |  | | --- | | N | |  | |  | | --- | | Approve work. | |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |  |  |  | |  | | --- | | N | |  |  |  | |  | |  | | --- | | N | |  | |  | | --- | | Approve leave requests. | |  |  | |  | | --- | | Review work. | |  | |  |  |  |  |  |  | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  | |  | | --- | | N | |  | |  | | --- | | Approve time and attendance. | |  | |  | | --- | | N | |  | |  | | --- | | Provide guidance on work methods. | |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  | |  | | --- | | N | |  | |  | | --- | | Orally reprimand. | |  | |  | | --- | | N | |  | |  | | --- | | Train employees in the work. | |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | | | | | | | | | |  |
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|  | |  |  |  | | --- | --- | --- | | |  | | --- | | **22. Do you agree with the responses for items 1 through 20? If not, which items do you disagree with and why?** | | | |  |  | |  | |  | | --- | | Yes | | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  | | --- | --- | --- | | |  | | --- | | **23. What are the essential functions of this position?** | | | |  |  | |  | |  | | --- | | This position performs a range of accounting assistant work in SIGMA. Duties include: processing payment vouchers, purchase order payments and various other types of payments in SIGMA and will perform other accounting assistant duties as assigned. | | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **24. Indicate specifically how the position's duties and responsibilities have changed since the position was last reviewed.** | | | |  |  | |  | |  | | --- | | New establishment for reassignment purposes. | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  | |  |  |  | | --- | --- | --- | | |  | | --- | | **25. What is the function of the work area and how does this position fit into that function?** | | | |  |  | |  | |  | | --- | | The Payment Processing Unit is responsible for all aspects of expenditure processing. Financial payments and expenditure reconciling are functions of this unit. | | | | | | | | | |  |
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|  |  | |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | |  | | --- | | **26. What are the minimum education and experience qualifications needed to perform the essential functions of this position.** | | | | | | |  | |  |  |  |  |  |  |  | | |  | | --- | | **EDUCATION:** | | |  |  |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | Education typically acquired through completion of high school. | | | | | | | | |  |  |  |  |  |  |  | | |  | | --- | | **EXPERIENCE:** | | |  |  |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | **Accounting Assistant 5** No specific type or amount is required.  **Accounting Assistant 6** One year of administrative support experience.  **Accounting Assistant E7** Two years of administrative support experience, including one year equivalent to an Accounting Assistant 6, involving posting financial data to ledgers, preparing invoices, billings and/or vouchers, reviewing and coding financial information, and maintaining account balances. | | | | | | | | |  |  |  |  |  |  |  | | |  | | --- | | **KNOWLEDGE, SKILLS, AND ABILITIES:** | | | |  |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | As listed on the Civil Service job specification. In addition to:  Knowledge of accounting and bookkeeping procedures, practices and terminology.   Ability to compare data from a variety of sources for accuracy and completeness.   Ability to communicate effectively.   The MDHHS mission is to provide opportunities, services, and programs that promote a healthy, safe, and stable environment for residents to be self-sufficient. We are committed to ensuring a diverse workforce and a work environment whereby all employees are treated with dignity, respect and fairness. | | | | | | | | |  |  |  |  |  |  |  | | |  | | --- | | **CERTIFICATES, LICENSES, REGISTRATIONS:** | | | | |  |  |  | |  |  |  |  |  |  |  | | |  | | --- | | None | | | | | | | | |  |  |  |  |  |  |  | |  | |  | | --- | | ***NOTE: Civil Service approval does not constitute agreement with or acceptance of the desired qualifications of this position.*** | | | | |  |  | |  |  |  |  |  |  |  | | | | | | | | |  |
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|  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | |  | |  | | --- | | ***I certify that the information presented in this position description provides a complete and accurate depiction of the duties and responsibilities assigned to this position.*** | | | |  | |  | |  | | --- | |  | |  | |  | | --- | |  | |  | |  |  |  |  |  | |  | |  | | --- | | **Supervisor** | |  | |  | | --- | | **Date** | |  | |  |  |  |  |  | | | | | | | | |  |
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|  |  |  |  |  |  |  |  | |  | | --- | | **TO BE FILLED OUT BY APPOINTING AUTHORITY** | |  |  |
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|  |  |  |  |  |  |  | |  |  |  | | --- | --- | --- | |  |  |  | |  | |  | | --- | | **Indicate any exceptions or additions to the statements of employee or supervisors.** | |  | |  |  |  | |  | |  | | --- | | None | |  | |  |  |  | | | |  |
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|  |  |  |  |  |  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | |  | |  | | --- | | ***I certify that the entries on these pages are accurate and complete.*** | | | |  | |  |  |  |  |  | |  | |  | | --- | | HILLARY PLATTE | |  | |  | | --- | | 3/4/2021 | |  | |  |  |  |  |  | |  | |  | | --- | | **Appointing Authority** | |  | |  | | --- | | **Date** | |  | |  |  |  |  |  | | | |  |
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|  |  |  |  |  |  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  |  |  |  | |  | |  | | --- | | ***I certify that the information presented in this position description provides a complete and accurate depiction of the duties and responsibilities assigned to this position.*** | | | |  | |  | |  | | --- | |  | |  |  |  | |  |  | |  | | --- | |  | |  | |  |  |  |  | |  |  |  |  |  | |  | |  | | --- | | **Employee** | |  |  |  | |  |  | |  | | --- | | **Date** | |  | |  |  |  |  | |  |  |  |  |  | | | |  |
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