



Lummi Commercial Company

2751 Haxton Way #1, Bellingham, WA 98226

Phone: (360) 758-4223 Fax: (360) 758-2573

JOB DESCRIPTION

JOB TITLE: Staff Accountant - Operations

EMEMPT: Yes

SALARY: \$DOE

SHIFT/STATUS: Day/Temp

VACANCY: 1

JOB CODE:

ORGANIZATION: Lummi Commercial Company

LOCATION: LCC Admin.

SUPERVISOR: Controller

JOB SUMMARY: Under the direction of the Controller, the Staff Accountant - Operations is responsible for ensuring the proper financial management of the Lummi Commercial Company (LCC) Operations Accounting. In carrying out this responsibility, the Staff Accountant has the necessary authority to manage, revise and maintain the status of the financial systems, analyze operations reports for completeness and comparison to the approved plan and budgets, recommend improvements to obtain accurate information from personnel within the project/operation, prepare and present timely financial reports and ensure that all activities of the company are in compliance with generally acceptable accounting principles (GAAP).

ESSENTIAL JOB DUTIES & RESPONSIBILITIES: includes the following, and other duties as assigned:

- Ensure the proper and timely preparation of information on financial performance, including but not limited to: monthly financial statements and accounts reconciliations, the general ledger, annual audits and fixed assets.
- Analyze operating budgets and assist in reporting and managing accounting reports for each operation.
- Provide financial analysis, financial reporting and policies necessary to inform business operations and ensure sound business practices.
- Review/maintain internal controls, review/update policies and procedures to ensure company compliance with tribal, federal, state and local jurisdictions.
- Assists in the preparation of the annual budget, the review of financial reports to ensure adherence to budget, reviews and manages assigned project and operations accounts.
- Assists with other financial functions and responsibilities specific to assigned LCC operations.
- Assists as custodian of the company's financial responsibilities to all jurisdictions, including, but not limited to, the Lummi Nation, the State of Washington and other local jurisdictions
- Provide comprehensive customer service to internal and external customers by delivering accurate, prompt and courteous assistance on assigned duties
- Travel off-site to attend trainings, conferences and meetings as required or mandated.
- Other duties as assigned by Controller.

KNOWLEDGE, SKILLS & ABILITIES

- Proven ability using MS Access, MS Excel, MS Word and creating PDF files.
- Able to work with all staff in a respectful and professional manner at all times.
- Must be able to exercise good judgment, balance priorities and workload.
- Must be able to communicate effectively with all employees and management.
- Maintain the highest degree of confidentiality at all times.

MINIMUM QUALIFICATIONS

- Lummi/Native American/Veteran policy applies
- Bachelor of Science or Bachelor of Arts or equivalent degree in Business Management, Accounting or:
- At least ten (10) years in accounting, business financial management in a related field or equivalent combination of work experience and education. Please be prepared to explain
- Minimum of five (5) years' experience working as staff accountant or equivalent education capacity desired but not required.
- Requires demonstrated successful experience in accounting; specifically, in reviewing general ledger accounting, income statements, balance sheets, fixed assets, and audit preparation.
- Requires fluency in computers, Excel, Word, Outlook and office equipment
- Experience in Sage or similar accounting system preferred.
- Requires willingness and ability to work in excess of 40 hours per week as needed
- Requires excellent problem solving, oral and written communication skills, attention to detail and follow up
- Requires strong communication skills and the ability to work with people of diverse backgrounds
- Requires demonstrated willingness to take direction and serve under multiple managers on simultaneous tasks
- Must be able to sit for prolonged periods of time
- Must pass pre-employment and random drug and alcohol test to be eligible for and maintain employment, as required by the LIBC Drug & Alcohol-Free Workplace Policy
- Must pass an extensive criminal background check

LUMMI COMMERCIAL COMPANY EMPLOYMENT APPLICATION

2751 Haxton Way #1, Bellingham, WA 98226, 360-758-4223 T, 360-758-2573 F
Tom Kinley ThomasK@lcc-lummi.com

Please include a cover letter and resume along with this application.

Please Type or Print. Answer all questions fully and accurately.			
Your Application will not be considered if incomplete, unsigned, or returned after advertised closing date.			
Name			
Please list any aliases, previous name, nickname, other name change legal or otherwise			
Address (Street, PO Box)		City	State
			Zip Code
How long at this residence?		If less than 1 year provide other addresses	
Phone No:		E-mail Address:	
Valid WA driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you legally permitted to work in this country? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you enrolled in a Federally Recognized Native American Nation/Tribe?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, you must provide official enrollment verification to qualify for Native Preference. Attach enrollment card.			
Name of Tribe/Nation:		Are you a Lummi Fisherman? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Enrollment No:		Are you an American Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, provide Branch, service dates, & discharge type:			
Have you ever been fingerprinted? If yes, list reason:		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been convicted of any offense(s)?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Include all offenses where you have been found guilty, pled guilty or nolo contendere (no contest). Leave out traffic fines of less than \$50.00. FAILURE TO DISCLOSE WILL RESULT IN LOST EMPLOYMENT OPPORTUNITY.			
Cashier Addendum Questions. (Answer if applying to work in any of our stores.)			
Are you over 18? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you able to lift 40 pounds unassisted? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you over 21? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you able to stand for long periods? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have or are you capable of obtaining a Food Handler's Permit within 90 days?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
When are you available for work?		<input type="checkbox"/> Anytime <input type="checkbox"/> 5:30am-3:00pm <input type="checkbox"/> 1:30pm-12:30am <input type="checkbox"/> Weekends	
Positions(s) Applying For: (Check all that apply)			
<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time	<input type="checkbox"/> On-Call	<input type="checkbox"/> Seasonal
<input type="checkbox"/> Cove	<input type="checkbox"/> Mini Mart	<input type="checkbox"/> 260 TFS	<input type="checkbox"/> LIBC Café
			<input type="checkbox"/> Skipper's
			<input type="checkbox"/> Loomis Trail
Years of Experience:		Expected Salary:	
(Provide Copies of Transcripts or Diploma) EDUCATION			
Type of School	Name and State	Years Completed	Graduated Y/N
High School			
Vocational/Trade			
College/University			
Type of Degree Obtained <input type="checkbox"/> Associates <input type="checkbox"/> BA <input type="checkbox"/> MA <input type="checkbox"/> PHD <input type="checkbox"/> Other _____			
What is your Degree in?			
Please provide any additional knowledge, skills, qualifications that you may have, and any professional organizations, which you belong to that, are relative to the position(s) you are currently applying for.			
Must list 3 references that can be contacted for verification. (Professional who can verify your work abilities.)			
Name	Title	Company	Phone Number/Email

HR Use Only			
Date Received: _____		Received from: _____	
		Entered into Database: _____	
Rev. 6.26.2019			

Please list names of your immediate family member(s) that are currently employed with the Lummi Nation

Family Members Name	Position/Title	Relationship

Employment History (Please List Present or Last Position First) Provide work history for last 5 years. If unemployed or in school please list. Supplemental sheet available.

Name of Employer	Position/Title	Dates of Employment
Supervisors Name	Phone Number	Beginning Rate of Pay
		Ending Rate of Pay

Explain in Detail your duties

What do/did you enjoy most about this position? What do/did you enjoy least about this position?

Explain why you left this position or why you wish to leave current position

Name of Employer	Position/Title	Dates of Employment
Supervisors Name	Phone Number	Beginning Rate of Pay
		Ending Rate of Pay

Explain in Detail your duties

What did you enjoy most about this position? What did you enjoy least about this position?

Explain why you left this position

Name of Employer	Position/Title	Dates of Employment
Supervisors Name	Phone Number	Beginning Rate of Pay
		Ending Rate of Pay

Explain in Detail your duties

What did you enjoy most about this position? What did you enjoy least about this position?

Explain why you left this position

Agreement and Declarations

Please Read the Following Prior to Signing Application

I certify that the statements made in this application are correct and complete to the best of my knowledge.
 I understand that false or misleading information may result in termination of my employment.
 I authorize the LCC Human Resources Department to verify any of the statements, employment/education information provided and to solicit information desired in connection with this application. I hereby release said organizations, companies and individuals from all liability for any damage for issuing this information. I understand that all positions are subject to criminal background investigation.
 If accepted for employment with the LCC, I agree to abide by all of the LCC Policies and Procedures.
 I understand that any false statements made by me may be considered sufficient cause for cancellation of any opportunity to work for the LCC and/or dismissal if already employed.
 I understand that if I owe the Lummi Nation or any of its entities an account receivable or other debt, I must make arrangements to pay this debt to be considered for a position with the Lummi Nation. The HR Department must receive from the LIBC Accounting Dept. a written statement stating I have made arrangements to repay my debt.
 I understand that THE LCC IS A DRUG FREE WORKPLACE. All employment offers are contingent upon successfully passing a drug and alcohol test. Applicants who fail the initial drug/alcohol test cannot reapply for 3 months. All employees are subject to annual random drug testing and testing following any on-the-job injury and when a supervisor reasonably believes and employee is unfit for duty. In addition to random testing some positions are considered a Safety, Security-Sensitive position, which requires annual drug and alcohol testing. If an employee refuses to test or tests positive they will be terminated, in accordance with the policy set forth in the LCC Alcohol and Drug Free Workplace Policy.

Signature of Applicant	Date
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Supplemental page for Residence verification

Name		
Address (Street, PO Box)		
City	State	Zip
Dates lived at this residence:		

Address (Street, PO Box)		
City	State	Zip
Dates lived at this residence:		

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City	State	Zip
Dates lived at this residence:		

Address (Street, PO Box)		
City	State	Zip
Dates lived at this residence:		

Address (Street, PO Box)		
City	State	Zip
Dates lived at this residence:		

Supplemental page for employment history

Name of Employer	Position/Title	Dates of Employment
Supervisors Name	Phone Number	Beginning Rate of Pay
		Ending Rate of Pay
Explain in Detail your duties		
What do/did you enjoy <u>most</u> about this position?	What do/did you enjoy <u>least</u> about this position?	
Explain why you left this position or why you wish to leave current position		
Name of Employer	Position/Title	Dates of Employment
Supervisors Name	Phone Number	Beginning Rate of Pay
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Explain in Detail your duties		
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