



## Job Description

**Job Title:** Accounts Payable Clerk

**Job Description:** Responsible for all aspects of the accounts payable division of the accounting department

**Reporting Structure:** This position reports to the Controller

**Duties:**

- ❖ Develop spreadsheets that outline the accounts payable vendors
- ❖ Handle day to day accounting transactions
- ❖ Ensure that accounts payable are paid in a timely manner
- ❖ Incorporate all applicable vendor credits into payments made
- ❖ Take all economical supplier discounts
- ❖ Organize and match invoices to authorizing purchase order sand proof of receipt
- ❖ Communicate with suppliers regarding invoice changes
- ❖ Process expense accounts
- ❖ Issue stop payments and void checks
- ❖ Communicate to vendors about uncashed checks
- ❖ Update supplier master list
- ❖

**Job Requirements and Definition:**

- ❖ Accounting training with two to four (2-4) years related experience
- ❖ Extensive knowledge of accounts payable
- ❖ Excellent organizational skills
- ❖ Experience on Accounting Software or similar software
- ❖ Capable of resolving conflicts with vendors
- ❖ Ability to resolve conflict issues with employees directly reporting to this position
- ❖ Excellent interpersonal and communication skills
- ❖ Be a team player



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# Employment Application

COMPANY OR EMPLOYER NAME:

Position applying for: \_\_\_\_\_

## EMPLOYEE INFORMATION

Name: \_\_\_\_\_

  Last \_\_\_\_\_ First \_\_\_\_\_

Middle \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Alternate telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Are you able to perform the essential functions of the position with or without accommodations?

Yes  No

If necessary for the job are you older than:

14  15  16 (Check one)

18  19  21

I am legally eligible for employment in the U.S.?

Yes  No

I am seeking a permanent position:  Yes  No

**I will be able to report to work**

\_\_\_\_\_ days after being notified I am hired.

### If necessary for the job, I am able to:

Work overtime?  Yes  No

Provide a valid Alaska Driver's License?  Yes  No

If so, fill out the following: Issuing state: \_\_\_\_\_

Type: \_\_\_\_\_

Endorsement(s):  Hazardous Material  Passengers

Tankers  Tank with Hazardous Materials

School Bus  Double/Triple trailers

Work the following shifts: (check all that apply)

Any  Day  Night  Swing  Rotating

Split  Graveyard Other: \_\_\_\_\_

## EMPLOYMENT HISTORY

List most recent employment first. Include summer or temporary jobs. Be sure all your experience or employers related to this job are listed here, in the summary following this section or on an extra sheet of paper if necessary. No more than 10 years history recommended.

Employer name and address:	Position title/duties, skills:	Start date:	End date:
		Reason for leaving:	
Pay: \$	Supervisor: _____	Telephone: _____	
Per: _____			
Employer name and address:	Position title/duties, skills:	Start date:	End date:
		Reason for leaving:	
Pay: \$	Supervisor: _____	Telephone: _____	
Per: _____			
Employer name and address:	Position title/duties, skills:	Start date:	End date:
		Reason for leaving:	
Pay: \$	Supervisor: _____	Telephone: _____	
Per: _____			
Employer name and address:	Position title/duties, skills:	Start date:	End date:
		Reason for leaving:	
Pay: \$	Supervisor: _____	Telephone: _____	
Per: _____			

Summarize other employment related to this job:

## EDUCATION

	Institution name	Years completed	Field of study	Graduate or degree
High school				
College/university				
Business/technical				
Additional				

## MILITARY

Are you a veteran?  Yes  No

Duty/specialized training: \_\_\_\_\_

## SKILLS & QUALIFICATIONS

Other qualifications such as special skills, abilities or honors that should be considered:

Types of computers, software, and other equipment you are qualified to operate or repair:

Professional licenses, certifications or registrations:

Additional skills, including supervision skills, other languages or information regarding the career/occupation you wish to bring to the employer's attention:

Typing speed: \_\_\_\_\_ per minute

## REFERENCES

List two personal references who are not relatives or former supervisors.

Name	Address	Telephone	Occupation	Years known
Name	Address	Telephone	Occupation	Years known

## CONTACT

In case of accident or illness, please contact: Name: \_\_\_\_\_ Daytime phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Relationship: \_\_\_\_\_

## INFORMATION TO THE APPLICANT

As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references.

If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the United States, have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms. I understand and agree to the information shown above.

Signature of Applicant

Date

**Equal Employment Opportunity:** While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no affect on your application for employment.

Developed at employer request by the Alaska Department of Labor & Workforce Development, Employment Security Division.