



# Josephine County, Oregon

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## Human Resources Office

Josephine County Courthouse  
500 NW 6<sup>th</sup> Street Dept 11 / Grants Pass OR 97526  
(541) 474-5217 / FAX (541) 474-5218 / TTY (800) 735-2900

### POSITION DESCRIPTION

Job Title: Purchasing / Warehouse Coordinator  
Department: Public Works  
FLSA Status: Non-Exempt  
Job Code: 3469  
WC Code: 8380  
Effective Date: May 1, 1996  
Last Revised: April 4, 2014  
Pay Grade: A11  
Union: AFSCME

#### SUMMARY

Purchases, receives and stores parts, supplies and materials for the Public Works Department; performs data input into inventory, purchasing, cost accounting and fleet management systems; does related work as required. An employee in this class is responsible for purchasing, receiving and storing supplies in the warehouse and maintaining inventory and records of supplies received. Work is performed under the general supervision of the Fleet Manager who reviews work on the basis of results attained. Supervision is not normally a responsibility of positions in this classification.

#### ESSENTIAL DUTIES AND RESPONSIBILITIES

(Illustrative Only. Any single position in this classification will not necessarily involve all of the listed duties below and other positions will involve duties which are not listed. These duties represent the essential functions needed of persons in this classification.)

1. Confers with suppliers regarding departmental purchases; obtains bids and price quotations using public rules & regulations; purchases parts, supplies and materials assures purchases are charged to correct expense accounts.
2. Maintains computer records of supplies received, stored and issued; maintains records on materials, supplies and parts allocated for departmental projects; performs daily & monthly fuel usage reconciliation.
3. Ships, receives, unpacks and stores supplies in proper storage area; checks incoming materials against invoices and purchase orders.
4. Distributes materials and supplies to personnel and destinations as needed.
5. Takes inventory of parts and supplies and prepares reports periodically.
6. Answers incoming radio and phone calls and relays messages to proper personnel.
7. Provides secondary labels for hazardous materials; maintains files (Safety Data Sheets) on hazardous materials used by the department.

## SUPERVISORY RESPONSIBILITIES

This position has no supervisory responsibilities.

## QUALIFICATIONS

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed are representative of the knowledge, skill, and/or ability required. Requires considerable knowledge of public purchasing methods and procedures; warehouse methods and procedures; inventory recordkeeping; purchase and requisition procedures. Ability to understand and follow oral and written instructions; communicate effectively both verbally and in writing; work independently and exercise initiative and judgment in completing tasks and responsibilities; establish and maintain effective working relationships with other employees, vendors and sales representatives; read and interpret specifications for repair or replacement of materials.

## EDUCATION AND EXPERIENCE

High school graduation or equivalency; and three years experience in purchasing, ordering, working with stock or in a warehouse environment; or any satisfactory combination of experience and training which demonstrates the knowledge, skills and ability to perform the above described duties.

## JOB IMPACT

The most common consequence of error would involve financial loss due to error in ordering parts, supplies or equipment.

Typical problems encountered generally revolve around locating vendors, receiving quotations and determining proper materials and supplies for projects.

## JOB CONTACTS

Contacts are with sales representatives and vendors to obtain prices and other Public Works employees to give and receive information.

## LANGUAGE SKILLS

Ability to communicate effectively both verbally and in writing; maintain records and prepare reports; use initiative and judgment; work independently; establish and maintain effective relationships with county departments.

## MATHEMATICAL SKILLS

Ability to add, subtract, multiply, and divide in all units of measure, using whole numbers, common fractions, and decimals.

## REASONING ABILITIES

Ability to apply common sense understanding to carry out detailed but uninvolved written or oral instructions. Ability to deal with problems involving a few concrete variables in standardized situations.

## OTHER SKILLS AND ABILITIES

Operating a fork lift to perform assigned duties; the operation of standard office equipment, including the operation of a computer to access/update inventory tracking, cost accounting, purchasing and all fleet management systems.

## CERTIFICATES, LICENSES, REGISTRATIONS

Possession of or ability to obtain a valid Oregon Driver's License; safe driving record.

## BACKGROUND INVESTIGATION

Those employed in this position may be subject to a background investigation including criminal background investigation. Conviction of a crime will not necessarily disqualify an individual for this classification.

## WORK ENVIRONMENT

Work is performed in a warehouse facility and involves frequent lifting up to 50 pounds, climbing stairs and ladders. The position is impacted by repetitiveness and the need for attention to fine detail in purchasing the correct parts for projects and equipment.

## PHYSICAL REQUIREMENTS

The physical requirements outlined are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

**PHYSICAL REQUIREMENTS**  
**Purchasing Warehouse Coordinator**

| Check if required for essential job function | Activity                       | Never 0%                            | Occasionally 1-33%                  | Frequently 34-66%                   | Continuous 67-100%       |
|--|--------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| <input checked="" type="checkbox"/>          | Standing                       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/>          | Sitting - 1/2 hour plus        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/>          | Moving about work area         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/>          | Bending forward                | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input type="checkbox"/>                     | Stoop position - 1 minute plus | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input type="checkbox"/>                     | Climbing stairs - 1 floor      | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input type="checkbox"/>                     | Crawling - hands & knees       | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input checked="" type="checkbox"/>          | Reaching overhead              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input checked="" type="checkbox"/>          | Lifting strength               | <b># of pounds = 50+ lbs</b>        |                                     |                                     |                          |
| <input checked="" type="checkbox"/>          | Lifting                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/>                     | Patient Lifting                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input checked="" type="checkbox"/>          | Lifting Overhead               | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input checked="" type="checkbox"/>          | Moving carts, etc.             | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input checked="" type="checkbox"/>          | Carry items                    | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/>          | Dexterity/Coordination         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/>          | Keyboard Operation             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/>                     | Rapid-mental/hand/eye coord.   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input type="checkbox"/>                     | Operation of motor vehicle     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |

**Speech, Vision & Hearing**

|                                     |                          |   |
|-------------------------------------|--------------------------|---|
| <input checked="" type="checkbox"/> | Distinguish colors       | Yes: <input checked="" type="checkbox"/> No: <input type="checkbox"/> |
| <input type="checkbox"/>            | Distinguish shades       | Yes: <input checked="" type="checkbox"/> No: <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | Depth perception         | Describe: Diagrams/ Drawings  |
| <input checked="" type="checkbox"/> | Ability to hear          | Normal Speech Level:  |
| <input type="checkbox"/>            | Other Spec. Hearing Req. | Describe:   |

**Exposure - Environmental Factors**

|                                     |                    |                                     |                                     |                                     |                          |
|-------------------------------------|--------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| <input checked="" type="checkbox"/> | Heat               | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | Cold               | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | Humidity           | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | Wet Area/Slippery  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | Noise              | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | Dust               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | Smoke              | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/>            | Vibration          | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | Chemical Solutions | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | Uneven Area        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | Ladder/Scaffold    | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input type="checkbox"/>            | Ionization         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input type="checkbox"/>            | Radiation          | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | Body Fluids        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |