Department of Financial Services | Division of Accounting and Auditing

Workiva User Account Request Form

Last Name	First Name	Middle Initial	Email Address	Phone Number	Agency OLO	Action	Workiva User Role	File Folder Access	Training Completion Date
						Add	Workspace Member	GASB 87 Lite	
						Add	Workspace Member	GASB 87 Lite	
						Add	Workspace Member	GASB 87 Lite	