Bureau of the Fiscal Service FedInvest Access Request (Form Completion Instructions)

General Information: This form is intended to be used by employees of federal agencies or their contractors who manage or audit funds that have been granted the legislative authority to invest in Government Account Series (GAS) Treasury securities. The FedInvest Access Request Form is for employees who need either Update or View access to the FedInvest online investment system to manage their GAS portfolio.

Complete each section using the detailed information below:

- Effective Date: This field is required.
- Action Requested: Select one item from the following group. This field is required.
 - **Grant Access** = New access to FedInvest
 - Add Accounts = Access to additional Treasury Account Symbols
 - **Revoke Access** = Revoke user access to FedInvest
 - **Revoke Accounts** = Revoke specified Treasury Account Symbols
 - Supervisor Change = Change in Supervisor
 - Other (List) = List any other requested changes
- Role Requested: Select one item from the following group. This field is required.
 - Update Access This role is for employees of federal agencies or their contractors who
 manage GAS portfolios. Update access enables a user to post investment and redemption
 transactions and produce reports in FedInvest for specific Treasury Account Symbols.
 - View Access This role is for employees of federal agencies or their contractors who need
 to view or audit GAS portfolios. View Access enables a user to view investment and
 redemption transactions and produce reports in FedInvest for specific Treasury Account
 Symbols.

• Account Specific Information:

- Update Access List the account(s) for which you are requesting access. If more than 8
 accounts are requested, please include a supplemental attachment listing additional
 accounts.
- View Access List the account(s) for which you are requesting access. If more than 8
 accounts are requested, please include a supplemental attachment listing additional
 accounts.

- User Information: Please fill out <u>all</u> information as completely as possible. Fields are required unless noted below.
 - Name:
 - Agency Name:
 - Street Address Line 1:
 - Street Address Line 2: (optional)
 - City, State, ZIP:
 - Telephone Number:
 - E-mail Address: Must be linked to PIV/CAC card or ID.me account.
 - User's Signature:
- Supervisor Information: All fields are required.
 - Supervisor Name:
 - Telephone Number:
 - Email Address:
 - Supervisor Signature:

After verifying your information is correct, email the form to FedInvestor@fiscal.treasury.gov.

If you require assistance with this form, please contact the Investments Program Team using the following contact information:

Email: fedinvestor@fiscal.treasury.gov

Phone: 304-480-5151