## **GENESEO**

## **Direct Deposit Reactivation Request**

Please re-activate my previous Direct Deposit already on file. There has been no change to my financial institution or my account\*.

Name Of Bank	Date
Print Name	Last 4 digits of SSN
Signature	
*Changes require completion of a ne	ew Direct Deposit Enrollment form.
Send form to: Payroll, Doty Hall 318	3