GLACIER BANCORP INC.

DIRECT DIVIDEND DEPOSIT AUTHORIZATION AGREEMENT

(Please print all information)

Please deposit my Glacier Bancorp Inc. dividends into the deposit account as indicated below. In addition, in the unlikely event that an erroneous deposit should transpire, I authorize American Stock Transfer & Trust Company and the financial institution indicated below to correct such inaccuracy with a credit or debit to the same account.

Name of financial institution where deposit account is maintained:

Savings ☐ **Checking** ☐

Name: _____

Bank Account Number ☐☐☐☐☐☐☐☐☐☐☐☐☐

City: _____ State: ____ Zip: _____

Transit / ABA Number: (Nine digit number at the bottom left-hand corner of personal check)

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Please be advised that we cannot process your request without this #. If unsure, please contact your bank.

Name(s) as it appears on shareholder records:

_____

(Can be obtained from stock certificate and/or dividend check)

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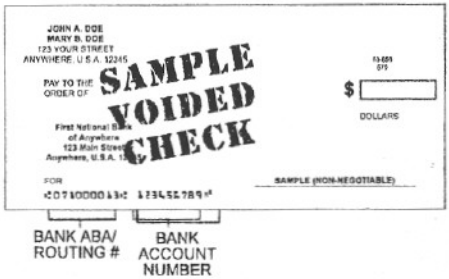
Shareholder account number. (Can be obtained from the dividend check)



Special Note: In order to ensure the correctness of the depository institution indicated above, please attach a voided check.

This authorization will remain in force and effect until American Stock Transfer & Trust Company has received written notification from me (us) of its discontinuation. Note: Please allow 30 days for termination to be effective.

Signed: _____ Date: _____

Print Name: _____

Tax ID Number

☐☐☐☐☐☐☐☐☐

Address: _____

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Signed _____ Date: _____

Tax ID Number

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