## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
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STATEMENT (	OF CHANGES	IN BENEFICIAL	<b>OWNERS</b>

OMB APPRO	VAL
OMB Number:	3235-0287
Estimated average burd	en
hours per response:	0.5
	OMB Number: Estimated average burd

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

# SHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person* SLITER EVERIT A			2. Issuer Name and Ticker or Trading Symbol GLACIER BANCORP INC [GBCI]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
<u>SLIIE</u>	KEVEK	<u> </u>											-			X Direct	or		10% Ov	vner	
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)									1	Office below	r (give title )	7	Other (s	specify		
49 COM	49 COMMONS LOOP						12/08/2006									Chairman of the Board					
(Street)					4. If	Ame	endmen	t, Date	of O	riginal I	Filed	(Month/D	ay/Yea	r)	6. Lir	Individual or ne)	Joint/Group	Filin	g (Check Ap	plicable	
KALISP	ELL M	IT	59901													X Form	filed by One	e Rep	orting Perso	n	
(City)	(S	state)	(Zip)													Form Perso		re tha	ın One Repo	rting	
				n-Deriv	ative	Se	curiti	es A	cani	ired.	Disr	nosed (	of. or	Bene	ficia	lly Owne	d d				
1. Title of Security (Instr. 3) 2. Tran				2. Trans	action	ar)	2A. Deemed Execution Date, if any		e,	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)			(A) or	5. Amor d Securit Benefic	5. Amount of		n: Direct or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					-	(Month/Day/Year)			8)		Amount (A) or			Reporte							
										Code	V	Amount		5)	Price	(Instr. 3					
Common Stock 12				12/08	3/2006	/2006				G		800		D	\$0.0	00 22	8,192		(1)(2)	See footnotes	
		т	ahla II -	Derivat	tive S	Saci	ıritios	: Acc	nuira	ed Di	eno	sed of	or B	enefi	cially	y Owned		<u> </u>			
		'		(e.g., p												y Ownea					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transactior Code (Instr. B)		n of		6. Date Exercisal Expiration Date (Month/Day/Year			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	is Blly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exe	e rcisable		piration te	Title	or Nu of	nount imber ares						
Option	\$14.162								07/2	29/2003	01	/29/2008	Comm Stoc		,579		2,579		D		
Option	\$20.055								07/2	28/2004	01	/28/2009	Comm		,344		4,923		D		
Option	\$25.011								07/2	26/2005	01	/26/2010	Comm		,481		7,404		D		
Option	\$31.44								07/2	25/2006	01	/25/2011	Comm		,500		9,904		D		

#### **Explanation of Responses:**

1. Mr. Sliter holds 15,835 shares in a SEPP account; 3,771 shares in an SRA account; 100,693 shares in an IRA account for his benefit; 2,296 shares in a family LP; 29,878 shares in an IRA account for the benefit of Mr. Sliter's wife and 75,719 shares owned by Mr. Sliter's wife.

2. Mr. Sliter also holds 13,904 shares directly and 28,745 jointly with his wife.

### Remarks:

Michael J. Blodnick on behalf

12/12/2006

of Everit A. Sliter \*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.