

Continental Stock Transfer & Trust Company 1 State Street 30th Floor New York, NY 10004-1561

INSTRUCTIONS TO SELL SHARES

Name and Address of Registered Holder:		
REQUE	ST TO SELL SHARES: I/We hereby elect to se	ell Shares of the United Community Banks,
	•	Banks, Inc. Dividend Reinvestment and Share
Purcha	se Plan and elect to receive net proceeds as	s indicated below: (Choose one)
0	Please issue and mail a check for the proceeds less brokerage commissions and transaction fees.	
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0	Please wire the proceeds less brokerage commissions and transaction fees. I/We hereby further elect to pay all costs associated with the wire transaction (approx. \$50) by deduction from the proceeds of the sale.	
	Name(s) on Banking Account:	
	Account Type: Checking (Savings
	Banking Institution:	Routing Number:
	Banking Address:	Account Number:
REQUII	RED SIGNATURES: (All registered holders or	named custodians must sign)
Date:		
Contact Phone Number:		Email: