| EMERGENCY/LATE Absentee Ballot Application for 2024 Leonardtown Election | |
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| Please read the instructions before completing this form, and print your information | |
| I am requesting an absentee ballot Part 1 - Voter Information | |
| | Middle |
| Street Address | Apt |
| City | State |
| Date of Birth | |
| Phone Number | |
| Part 2 - Signature Important Note: If you complete and submit this form, you must affirm on the oath that it be returned with your voted ballot that you "will be absent or unable to vote in person in the election." If you will not be | |
| absent or are able to vote in person in the election, you sho | uld not complete and submit this form and |
| X | Date |
| Part 3 - Certificate of Assistance (complete only if someone | helped you complete this form) |
| Under penalty of perjury, I hereby certify that the voter named above needed help completing this form because of a disability or inability to read or write and authorized me to complete this application. If the voter was unable to sign Part 3 of this application because of a disability or inability to read or write, I have printed the voter's name in Part 3 and written my initials. | |
| Signature of Assistant | Date |
| Printed Name of Assistant | Date |
| this designation of agent and specify the individual you wish to have pick up and deliver the absentee ballot to you. If you are unable to complete or sign the designation without assistance, you may be assisted as indicated above. The individual you wish to pick up and deliver the absentee ballot to you must complete the Acceptance by Agent portion below. I designate the following person, who is at least 18 years old and not a candidate on my ballot, to act as my agent to pick up and deliver an absentee ballot in accordance with the requirements for absentee voting stated in Election Law Article, Section 9-307, Annotated Code of Maryland. | |
| Printed Name of Agent: | Phone # |
| Address of Agent: | |
| Signature of Voter: | Date |
| Acceptance by Agent: Under penalty of perjury, I hereby certify that I am at least 18 years of age and not a candidate on the voter's ballot, and that I am acting as the voter's designated agent, will pick up and deliver the absentee ballot to the voter, and will return it to the Town. | |
| Signature of Agent | Date |
| TO BE COMPLETED BY AGENT WHEN VOTED BALLOT IS RETURNED | |
| Under penalty of perjury, I hereby certify that the voter for whom I am acting as an agent marked the ballot and sealed it in an envelope in my presence, with assistance if necessary, and that I have returned it in person, without alteration, to the Town. | |
| Signature of Agent | Date |
| WARNING: Any person who is convicted of violating the absente imprisonment for up to 20 years, or both. (Election Law Artic | |
| This application must be returned to the office of the Town Commissioners by 7 pm on May 7, 2024 | |
| IT MUST BE RECEIVED (NOT JUST MAILED) BY THE DEADLINE ABOVE | |