

TOWN OF HIGHLAND BEACH, MARYLAND

REQUEST FOR ABSENTEE BALLOT

_____ Date

I, _____, request an absentee ballot for the Election to be held
(print name)

on _____ I will not be able to vote in person because _____

_____ (state reason)

My residence address is: _____

Please mail the absentee ballot to me at the following address:

_____ I affirm, under penalty of perjury, that the information in this Request for Absentee Ballot is true.

_____ Date

_____ Signature

An absentee ballot will not be sent to you unless you are registered to vote in Highland Beach Elections and you have completed the Voter Qualification Registration Application form. Please mail request to: Board of Supervisors of Elections, 3243 Walnut Dr., Highland Beach, Md 21403.

THIS FORM MUST BE NOTARIZED

State of _____
County of _____

Signed and sworn to (or affirmed) before me on _____,
(date)

by _____

_____ (Notary Public)

My commission expires: