

or petty officer, other than applicant; if in Merchant Marine, certifying officer may be a master, first officer, chief engineer or purser; or an ambassador, minister, charge d'affaires, counselor to or secretary of a legation, consul general, consul, vice-consul, commercial attache, or consular agent to the United States accredited to the country where the acknowledgment is made; or a notary public of the country where the acknowledgment is made; or a judge or clerk of a court of record of the country where the acknowledgment is made.)】

(ii) Any qualified voter who is unable to vote in person because of physical disability shall complete the medical certificate required by subsection (b) of this Section, which shall be in substantially the following form and which certificate shall be filed with the Board at the same time this application is returned to the Board.

SUPERVISORS OF ELECTIONS OF
CITY OF ROCKVILLE
111 South Perry Street
Rockville, Maryland, 20850

CERTIFICATE OF PHYSICIAN

(THIS CERTIFICATE MUST BE RECEIVED AND FILED AT OUR OFFICE NOT LATER THAN TEN (10) DAYS PRIOR TO THE ELECTION)

This is to certify that in the opinion of the undersigned attending physician who resides at, is mentally competent to vote in the municipal election to be held on and that because of illness or injury the voter is now, or will be prevented from personally voting at said election.

.....
Physician Reg. No.
(Address)

(iii) The application for all other absentee voters shall be in the following form:

.....
Date
Board of Supervisors of Elections of the City of Rockville

I,, hereby apply for a City of Rockville Absentee Ballot for the Election to be held on
(Date of Election)

I will not be able to vote in person because
(State Reason)

.....
My home address is, Rockville, Montgomery County, Maryland, and my voting district, to the best of my knowledge is