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¡Hola, votante! Usted tiene derecho a votar en Maryland.

Si es ciudadano estadounidense, tiene al menos 18 años y es residente de Maryland, aún puede votar aunque esté:

- A la espera de un juicio por cualquier cargo, incluido un delito grave
- Encarcelado por una **condena por un delito menor**

Si actualmente está encarcelado por una **condena por un delito grave**, no puede votar. Sin embargo, puede votar una vez que salga del centro correccional, incluso mientras esté en libertad condicional.

Las próximas elecciones son las elecciones primarias del martes 23 de junio de 2026. Si es elegible, lo animamos a votar. Votar por correo es fácil y gratuito, pero debe actuar ahora.

¿Cómo me registro para votar y solicitar una boleta por correo en un centro correccional?

1. Complete el formulario de registro de votantes y la solicitud de boleta por correo que se encuentran en este sobre.

Para ambos formularios, debe usar las direcciones correctas:

- A. Para la dirección de residencia,** utilice la dirección de su casa más reciente, incluso si se encuentra en una ciudad o condado diferente al lugar en el que está encarcelado.
- B. Para la dirección postal,** utilice la dirección en la que estará el día de las elecciones (23 de junio de 2026).

A	Residence address Required <i>(No PO boxes)</i>	5	Address where you live	Apt or Lot #	City or Town	State	Zip Code
						MD	
B	Mailing address <i>If different from your address in section 5.</i>	6	Address where you receive mail	Apt or Lot #	City or Town	State	Zip Code

De vuelta a la página para el paso 2



2. Envíe por correo su formulario de registro de votantes y la solicitud de boleta por correo.

Puede enviar ambos formularios en el **mismo sobre**, pero recuerde que tienen **plazos diferentes**. Las fechas límite para devolver los formularios son:

Formulario de registro de votantes: 2 de junio de 2026

Maryland Voter Registration Form
Please complete in BLACK INK. Detach form and fold where indicated to mail.

Eligibility Required
1 Are you a U.S. Citizen? Yes No
Are you at least 16 years old? Yes No
If you answer "No" in response to either of these questions, do not complete this form.

Reason Required
2 Check boxes that apply and complete sections 3-9.
 New registration Name change Party affiliation change Address change

Voter information Required
3 Last name First name Middle name Suffix
Birthdate (Not today's date) Month Day Year Gender Male Female Unspecified or Other

Verification Required
4 MD Driver's License (DL) #, MD Learner's Permit # or MD Non-Driver ID # OR Last 4 digits of your SSN
 I do not have either a current, valid Maryland driver's license / MVA ID card or a Social Security Number

Residence address Required
5 Address where you live Apt or Lot # City or Town State Zip Code MD

Mailing address
6 Address where you receive mail Apt or Lot # City or Town State Zip Code
If different from your address in section 5.

Party affiliation
7 You must register with a political party if you want to take part in that political party's primary election, caucus, or convention. Check one box only. If you do not choose a party, you will automatically be registered as unaffiliated.
 Democratic Green Other — Specify
 Republican Working Class Unaffiliated (independent)

Contact information
8 Email address Phone number

Signature Required
9 I swear or affirm under penalty of perjury that:
• I am a U.S. citizen. • I have not been convicted of buying or selling votes.
• I am a Maryland resident. • I am not currently serving a prison sentence for a felony conviction.
• I am at least 16 years old. • The information on this application is true to the best of my knowledge, information and belief.
Voter, sign here (power of attorney not allowed) Today's Date
Month Day Year

Previous registration information
10 Last name First name Middle name Suffix
Former address Apt or Lot # City or Town State Zip Code
(If applicable)

Solicitud de boleta por correo: 16 de junio de 2026

Maryland Mail-in Ballot Request Form
To vote by mail, you must be registered to vote in Maryland. Visit vote.md.gov/Voter5vcs to register or update your voter record.

Print voter information
Use blue or black ink.
1 Last name Suffix (Jr., Sr., III, IV, if applicable)
First name Middle name or initial
Date of birth (mm/dd/yyyy)

Residential address
2 This address must match your voter registration so that we can send the correct ballot for your precinct or ward.
Street Unit #
City State MD Zip
No P.O. Boxes in this section.
Did you move to this address less than 21 days before Election Day?
 Yes No

Political party affiliation
3 To vote in a party's primary, you must choose that political party.
 Democratic Green
 Republican Working Class
 Unaffiliated (independent of any party) Other:

Election
4 You can sign up for a mail-in ballot for upcoming elections or for all future elections.
 June 23, 2026 Primary Election only
 November 3, 2026 General Election only
 Both the 2026 Primary and General Elections
 I would like to receive a mail-in ballot for all future federal and state elections

Where should we send your ballot?
5 If you choose option B, we will email you a link to print your ballot about 3 weeks before the election.
*If you choose option B or C, we will use the information on your ballot to mark a scannable ballot for you. Then we will scan that ballot.
If you choose option B or C, you will need to use your own envelope and stamp to return your ballot by mail. Or you can deliver it to your election office or a drop box (when available).
Please see the instructions for deadlines.
Choose A, B, or C (only choose 1)
A Send my ballot by U.S. Mail to
 Same as residential address in section 2
 Or a different address: Street Unit #
or P.O. Box: City State Zip
B Email a link to print my ballot
Email
AND MD Driver's License or ID Card #
Issue date (mm/dd/yyyy)
OR Last 4 digits of your Social Security # X X X - X X -
C Fax my ballot
Fax

Ballot status updates
6 How should we send you updates on your ballot? (choose 1)
 Text message (cell phone that can receive text messages)
 Email

Signature Required
7 Voter, sign and date here (Required) Date (mm/dd/yyyy)
X
Assistant, sign here (Required if the voter received help on this form)
Under penalty of perjury, I hereby certify that this voter needed help with this form because he or she has a disability or is unable to read or write. The voter authorized me to complete this form. If the voter could not sign this form, I printed the voter's name and wrote my initials.
X Print voter name

Use el sobre que se encuentra en este paquete para enviar por correo su formulario de registro de votantes y su solicitud de boleta por correo al menos **5 días antes de la fecha límite**.

Escriba la dirección de la **junta electoral de su condado** en el sobre. Use el condado donde vive, no el condado donde se encuentra el centro correccional.

¿Dónde encuentro la dirección postal de mi junta electoral local?

Puede encontrar la lista completa de información de contacto de las juntas electorales locales adjunta a su formulario de solicitud de boleta por correo.

OFFICIAL ELECTION MAIL
U.S. POSTAGE PERMITTED BY PERMIT NO. 123456789

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

I am submitting a:
(Check all that apply)

Voter registration form

Mail-in ballot request form