

Notice of Substitution of Elector for President and Vice President Due to Death or Disqualification

Who uses this form	 State Chair of non-recognized political party at Commonwealth of Virginia for the office of Presidential Candidate attempting Commonwealth of Virginia for the office of Presidential Candidate 	esident and Vice President. ng to achieve ballot access within the
How to submit this form	This form may be submitted in person, by mail, or Address: VA Department of Elections ATTN: Elections Administration 1100 Bank Street, 1st Floor Richmond, VA 23219 ea@elections.virginia.gov	electronically by the deadline.
Required	Your substitute must provide the "Oath for Elector Form).	s for President and Vice-President" (ELECT-543
Deceased or Disqualified Elector Information:		
Elector Name	Last Name Middle Name	First Name Suffix
Substitute Elector Information:		
Elector Name	Last Name	First Name
	Middle Name	Suffix
Sign and date	X State Chair's Signature/Presidential Candidate's Signature	/

ELECT-543(A) 9/2023