

**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**  
(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

**NOTE: This form must be on file with the qualifying officer before opening the campaign account.**

**RECEIVED**

**JUL 28 2021**

**GADSDEN COUNTY  
SUPERVISOR OF ELECTIONS**

JUL 28 21 11:43 AM

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**OFFICE USE ONLY**

**1. CHECK APPROPRIATE BOX(ES):**

Initial Filing of Form      Re-filing to Change:  Treasurer/Deputy     Depository     Office     Party

**2. Name of Candidate** (in this order: First, Middle, Last)

Domonique Grant

**3. Address** (include post office box or street, city, state, zip code)

196 Planters Circle  
GAINCY, FL 32352

**4. Telephone**

(850) 743-8347

**5. E-mail address**

grantdeenig@aol.com

**6. Office sought** (include district, circuit, group number)

County Commissioner District 4

**7. If a candidate for a nonpartisan office, check if applicable:**

My intent is to run as a Write-In candidate.

**8. If a candidate for a partisan office, check block and fill in name of party as applicable:** My intent is to run as a

Write-In     No Party Affiliation     Democratic Party candidate.

**9. I have appointed the following person to act as my**     Campaign Treasurer     Deputy Treasurer

**10. Name of Treasurer or Deputy Treasurer**

Domonique Grant

**11. Mailing Address**

196 Planters Circle

**12. Telephone**

(850) 743-8347

**13. City**

GAINCY

**14. County**

GADSDEN

**15. State**

FL

**16. Zip Code**

32352

**17. E-mail address**

grantdeenig@aol.com

**18. I have designated the following bank as my**

Primary Depository     Secondary Depository

**19. Name of Bank**

Capital City Bank

**20. Address**

3513 Apalachee Pkwy

**21. City**

Tallahassee

**22. County**

Leon

**23. State**

FL

**24. Zip Code**

32311

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.**

**25. Date**

7/28/2021

**26.**

**27. Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)

I, Domonique Grant, do hereby accept the appointment

(Please Print or Type Name)

designated above as:

Campaign Treasurer     Deputy Treasurer

7/28/2021

Date

Signature of Campaign Treasurer or Deputy Treasurer

**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

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JUN 14 2021

GADSDEN COUNTY  
SUPERVISOR OF ELECTIONS

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**1. CHECK APPROPRIATE BOX(ES):**

Initial Filing of Form      Re-filing to Change:  Treasurer/Deputy     Depository     Office     Party

**2. Name of Candidate** (in this order: First, Middle, Last)

Dominique Lafrica Grant

**3. Address** (include post office box or street, city, state, zip code)

1916 Planters Circle

**4. Telephone**

(850) 743-8347

**5. E-mail address**

grantdeenig@aol.com

Quincy, FL 32352

**6. Office sought** (include district, circuit, group number)

County Commissioner District 4

**7. If a candidate for a nonpartisan office, check if applicable:**

My intent is to run as a Write-In candidate.

**8. If a candidate for a partisan office, check block and fill in name of party as applicable:** My intent is to run as a

Write-In     No Party Affiliation     Democrat Party candidate.

**9. I have appointed the following person to act as my**  Campaign Treasurer     Deputy Treasurer

**10. Name of Treasurer or Deputy Treasurer**

Judy Green

**11. Mailing Address**

1142 Cox Rd

**12. Telephone**

(850) 510-3277

**13. City**

Quincy

**14. County**

Gadsden

**15. State**

FL

**16. Zip Code**

32352

**17. E-mail address**

darkene32351@yahoo.com

**18. I have designated the following bank as my**  Primary Depository     Secondary Depository

**19. Name of Bank**

Capital City Bank

**20. Address**

4 East Washington St

**21. City**

Quincy

**22. County**

Gadsden

**23. State**

FL

**24. Zip Code**

32351

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.**

**25. Date**

6/14/2021

**26.**

X

**27. Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)

I, Dominique Grant, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

6/14/2021  
Date

X

Signature of Campaign Treasurer or Deputy Treasurer

**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

GRADSDEN 500

JUNE 21 9:49 AM

**NOTE: This form must be on file with the qualifying officer before opening the campaign account.**

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**1. CHECK APPROPRIATE BOX(ES):**

Initial Filing of Form      Re-filing to Change:  Treasurer/Deputy     Depository     Office     Party

**2. Name of Candidate** (in this order: First, Middle, Last)

*Dominique LaErica Grant*

**3. Address** (include post office box or street, city, state, zip code)

*196 Planters Circle  
Quincy, FL 32352*

**4. Telephone**

*(850) 1743-8347*

**5. E-mail address**

*grantdeeniga@aol.com*

**6. Office sought** (include district, circuit, group number)

*County Commissioner District 4*

**7. If a candidate for a nonpartisan office, check if applicable:**

My intent is to run as a Write-In candidate.

**8. If a candidate for a partisan office, check block and fill in name of party as applicable:** My intent is to run as a

Write-In     No Party Affiliation     *Democrat* Party candidate.

**9. I have appointed the following person to act as my**  Campaign Treasurer     Deputy Treasurer

**10. Name of Treasurer or Deputy Treasurer**

*Judy Green*

**11. Mailing Address**

*1134 Cox Rd*

**12. Telephone**

*(850) 510-3277*

**13. City**

*Quincy*

**14. County**

*Gradsden*

**15. State**

*FL*

**16. Zip Code**

*32352*

**17. E-mail address**

**18. I have designated the following bank as my**  Primary Depository     Secondary Depository

**19. Name of Bank**

*Centennial Bank*

**20. Address**

*702 Pat Thomas Pkwy*

**21. City**

*Quincy*

**22. County**

*Gradsden*

**23. State**

*FL*

**24. Zip Code**

*32351*

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.**

**25. Date**

*6/8/2021*

**26. Signature**

*[Redacted Signature]*

**27. Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)

I, *Dominique Grant*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer

*6/8/2021*

Date

**X**

Signature of Campaign Treasurer or Deputy Treasurer

APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
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SUPERVISOR OF ELECTIONS

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1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form      Re-filing to Change:  Treasurer/Deputy     Depository     Office     Party

2. Name of Candidate (in this order: First, Middle, Last)

3. Address (include post office box or street, city, state, zip code)

Domonique LaErica Grant  
4. Telephone (850) 1743-8347  
5. E-mail address grantdeenig@aol.com

196 Planters Circle  
Quincy, FL 32352

6. Office sought (include district, circuit, group number)

7. If a candidate for a nonpartisan office, check if applicable:

County Commissioner District 4

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

Write-In     No Party Affiliation     Democratic Party candidate.

9. I have appointed the following person to act as my  Campaign Treasurer     Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Judy Green

11. Mailing Address

1134 Cox Rd

12. Telephone

(850) 510-3277

13. City

Quincy

14. County

Gadsden

15. State

FL

16. Zip Code

32352

17. E-mail address

18. I have designated the following bank as my

Primary Depository     Secondary Depository

19. Name of Bank

Lanviston Credit Union

20. Address

517 W. Jefferson St.

21. City

Quincy

22. County

Gadsden

23. State

FL

24. Zip Code

32351

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

4/6/2021

26. Signature

[Redacted Signature]

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, Judy Green, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

4-6-2021  
Date

[Redacted Signature]  
Signature of Campaign Treasurer or Deputy Treasurer

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**1. CHECK APPROPRIATE BOX(ES):**

Initial Filing of Form      Re-filing to Change:  Treasurer/Deputy     Depository     Office     Party

2. Name of Candidate (in this order: First, Middle, Last)

Domonique Latrice Grant

3. Address (include post office box or street, city, state, zip code)

196 Planters Circle

4. Telephone

(850) 743-8347

5. E-mail address

grantdeenig@aol.com

Quincy, FL 32352

6. Office sought (include district, circuit, group number)

County Commissioner District 4

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

Write-In     No Party Affiliation     Democratic Party candidate.

9. I have appointed the following person to act as my  Campaign Treasurer     Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Domonique Grant

11. Mailing Address

196 Planters Circle

12. Telephone

(850) 743-8347

13. City

Quincy

14. County

Gadsden

15. State

FL

16. Zip Code

32352

17. E-mail address

grantdeenig@aol.com

18. I have designated the following bank as my

Primary Depository     Secondary Depository

19. Name of Bank

Envision Credit Union

20. Address

517 W. Jefferson St

21. City

Quincy

22. County

Gadsden

23. State

FL

24. Zip Code

32351

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.**

25. Date

4/16/2021

26. Signature

X [Redacted Signature]

27. **Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)

I, Domonique Grant, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

4/16/2021

Date

X

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF  
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

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APR 28 2021

GADSDEN COUNTY  
SUPERVISOR OF ELECTIONS

I, Domonique Grant ,  
candidate for the office of County Commissioner District 4 ;  
have been provided access to read and understand the requirements of  
Chapter 106, Florida Statutes.

X

  
Signature of Candidate

3/29/2021  
Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).