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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. MARCHANT GOOD GOVERNMENT FUND 2125 N JOSEY LN ADDRESS (number and street) STE 102 (Check if address is changed) CARROLLTON 75006 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS kennymarchant.24@gmail.com (Check if address X is changed) Optional Second E-Mail Address so@gobergroup.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00393348 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. MARCHANT, KENNY, E, Mr., Type or Print Name of Treasurer MARCHANT, KENNY, E, Mr., [Electronically Filed] 10 28 2021 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. FEC FORM 1

Office			For further information contact:
Use			Federal Election Commission
Only			Toll Free 800-424-9530 Local 202-694-1100
,			LOCAI 202-094-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	naidate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	nected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(5)		_	areasted fund or porty
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fulld of party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Name		
MARCHANT GO	OOD GOVERNMENT FUND	
	rganization, Affiliated Committee, Joint Fundraising Representative, or Lea	adership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: Identi books and records.	tify by name, address (phone number optional) and position of the person	in possession of committee
MILLER, C	AROL, N, ,	1
Full Name	2125 N JOSEY LN	
Mailing Address	STE 200	
	CARROLLTON , TX , 75	006
Title or Position	CITY STATE	ZIP CODE
CUSTODIAN OF RECORDS	Telephone number	
B. Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; and the ssistant treasurer).	he name and address of
I	T, KENNY, E, Mr.,	ı
of Treasurer	2125 N JOSEY LN	
Mailing Address		
	STE 200	
	CARROLLTON TX 750	
Title or Position TREASURER	CITY STATE 972 Telephone number	ZIP CODE - 245 - 3311

12010	TIII T (INCVISCO O	2/2009)					Page 4	
Full Name of Designated Agent	MARCHANT,	MATTHEW, , ,						
Mailing Addres	<u>1</u>	0430 CRESTOVE	ER DR					
	L	DALLAS	CITY		TX STATE	75229	ZIP CODE	
Title or Position				Telephone n	umber 9	72	342 - 03	32
Ranks or Oth	D	List all banks or	other denositories in	n which the comm	nittee deposits	funds, hold	ds accounts, rent	
safety deposit	boxes or maintair	ns funds.	other depositories in	ir willon the confin				5
safety deposit	boxes or maintain Depository, etc.	ns funds.	other depositories in	ii wiiicii tile comii				5
safety deposit	boxes or maintain Depository, etc.	ns funds.			1 1 1 1 1	1 1 1		6
safety deposit	Depository, etc.	ns funds.						
safety deposit Name of Bank	Depository, etc.	RITY TEXA						6
safety deposit Name of Bank	pepository, etc. PROSPE	RITY TEXA				75086		6
safety deposit Name of Bank	pepository, etc. PROSPE	RITY TEXA					ZIP CODE	5
safety deposit Name of Bank Mailing Addres	pepository, etc. PROSPE	RITY TEXA PO BOX 869105	S					
safety deposit Name of Bank Mailing Addres	PROSPE s Depository, etc.	RITY TEXA PO BOX 869105	S					6
safety deposit Name of Bank Mailing Addres	Depository, etc. PROSPE s PROSPE Depository, etc.	PLANO	S					
safety deposit Name of Bank Mailing Addres	Depository, etc. PROSPE s PROSPE Depository, etc.	RITY TEXA PO BOX 869105 PLANO RITRADE	S					
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