

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Coalition for Renewable Natural Gas Political Action Committee (dba RNG PAC)

ADDRESS (number and street)

1017 L Street, Suite 513

☐ (Check if address is changed)

Sacramento

CITY ▲

CA

STATE ▲

95814

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

federalcompliance@nossaman.com

Optional Second E-Mail Address

johannes@rngcoalition.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

N/A

2. DATE

01 / 23 / 2026

3. FEC IDENTIFICATION NUMBER ►

C C00677757

4. 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.

Type or Print Name of Treasurer Escudero, Johannes, , ,

Signature of Treasurer Escudero, Johannes, , ,

Date

01 / 23 / 2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 06/2012)

C

Write or Type Committee Name

## Coalition for Renewable Natural Gas Political Action Committee (dba RNG PAC)

## 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: ☐ Connected Organization ☐ Affiliated Organization ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

## 7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name Dietz, Geoff, , ,

Mailing Address 1017 L Street, Suite 513

Sacramento

CA

95814

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Custodian of Records

Telephone number

916

588

3033

## 8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Escudero, Johannes, , ,

Mailing Address 1017 L Street, Suite 513

Sacramento

CA

95814

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

Telephone number

916

588

3033

Full Name of  
Designated  
Agent

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Capitol Bank of Maryland

Mailing Address

2275 Research Boulevard, Suite 600

Rockville

MD

20850

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲