

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00062309	2 Total pages filed: 21							
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Angie C.	MI	OFFICE USE ONLY						
	NICKNAME	LAST Button	SUFFIX		Date Received ELECTRONICALLY FILED 07/16/2023					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 6914 Clear Springs Cir.		ZIP CODE	Date Hand-delivered or Date Postmarked						
	Garland, TX 75044			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; font-size: x-small;">Receipt #</td> <td style="width:50%; font-size: x-small;">Amount</td> </tr> <tr> <td colspan="2" style="font-size: x-small;">Date Processed</td> </tr> <tr> <td colspan="2" style="font-size: x-small;">Date Imaged</td> </tr> </table>	Receipt #	Amount	Date Processed		Date Imaged	
	Receipt #	Amount								
	Date Processed									
Date Imaged										
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Darcy G.	MI							
	NICKNAME	LAST Button	SUFFIX							
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 6914 Clear Springs Cir.		APT / SUITE #;	CITY;						
	Garland, TX 75044			STATE; ZIP CODE						
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION							
	(972)	510-4199								
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)									
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)									
9 PERIOD COVERED	Month	Day	Year	Month						
	01	01	2023	06						
		THROUGH	06/30/2023							
10 ELECTION	ELECTION DATE		ELECTION TYPE							
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff					
03/05/2024			<input type="checkbox"/> General	<input type="checkbox"/> Special	<input type="checkbox"/> Other					
11 OFFICE	OFFICE HELD (if any)		OFFICE SOUGHT (if known)							
	State Representative District 112		State Representative District 112							

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Button, Angie C. (The Honorable)	14 Filer ID (Ethics Commission Filers) 00062309
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	24,900.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	611.88
	4. TOTAL POLITICAL EXPENDITURES	\$	14,299.71
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	327,268.38
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

 The Honorable Angie C. Button
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

_____ Signature of officer administering
 _____ Printed name of officer administering
 _____ Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Button, Angie C. (The Honorable)		19 Filer ID (Ethics Commission Filers) 00062309
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 24,900.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 13,799.71
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 500.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 4,817.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/2 Rpt: 4/21
2 FILER NAME Button, Angie C. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062309
4 Date 06/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brentwood Public Affairs <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Wan-Yu Elisa (The Honorable) <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Unitech Consulting Engineers, Inc.
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Felix (Mr.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75252	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PAJ, Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J. Ancira Strategies <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moak Casey PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78746-5776	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/21
2 FILER NAME Button, Angie C. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062309
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TXCPA PAC <hr/> 6 Contributor address; City; State; Zip Code Addison, TX 75001	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekley, Richard (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77055-7211	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Weekley Properties
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wholesale Beer Distributors of Texas Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/8 Rpt: 6/21	2 FILER NAME Button, Angie C. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062309
4 Date 06/30/2023	5 Payee name Anedot, Inc.	
6 Amount (\$) \$200.30	7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution Processing Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/29/2023	Payee name Constant Contact	
Amount (\$) \$259.02	Payee address; City; State; Zip Code 1601 Trapelo Road Suite 329 Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Renew Campaign Email Service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/08/2023	Payee name Costco Wholesale	
Amount (\$) \$339.84	Payee address; City; State; Zip Code 10401 Research Blvd Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food/beverages, plates, napkins, cutlery for Asian American Day at the Capitol on May 9, 2023
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/8 Rpt: 7/21	2 FILER NAME Button, Angie C. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062309
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4 Date 01/04/2023	5 Payee name Dallas County Council of Republican Women
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6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 11617 N. Central Expy Suite 240 Dallas, TX 75243
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsor Campaign Nuts and Bolts Training
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/18/2023	Payee name Innovation and Technology Caucus of the Texas House
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Amount (\$) \$250.00	Payee address; City; State; Zip Code 815-A Brazos Street #714 Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Renewal
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/01/2023	Payee name Murphy Nasica & Associates
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Amount (\$) \$100.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Retainer
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/8 Rpt: 8/21	2 FILER NAME Button, Angie C. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062309
4 Date 02/01/2023	5 Payee name Murphy Nasica & Associates	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Retainer
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/01/2023	Payee name Murphy Nasica & Associates	
Amount (\$) \$500.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Retainer
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/01/2023	Payee name Murphy Nasica & Associates	
Amount (\$) \$500.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Retainer
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/8 Rpt: 9/21	2 FILER NAME Button, Angie C. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062309
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4 Date 05/01/2023	5 Payee name Murphy Nasica & Associates
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6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Retainer
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/01/2023	Payee name Murphy Nasica & Associates
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Amount (\$) \$500.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Retainer
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/27/2023	Payee name Payton Interests, Inc.
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Amount (\$) \$2,955.23	Payee address; City; State; Zip Code 1609 Chisholm Trail Ste. 400 Round Rock, TX 78681
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-shirts for Asian American Day at the Capitol on 050923
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/8 Rpt: 10/21	2 FILER NAME Button, Angie C. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062309
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4 Date 04/27/2023	5 Payee name Potbelly Sandwich Works
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6 Amount (\$) \$1,954.48	7 Payee address; City; State; Zip Code 2316 Guadalupe Street Austin, TX 78705
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sandwiches for Asian American Day at the Capitol on 050623
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/16/2023	Payee name Richardson Chamber of Commerce
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Amount (\$) \$350.00	Payee address; City; State; Zip Code 411 Belle Grove Richardson, TX 75080
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Renew Chamber Membership
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/18/2023	Payee name Richardson Chamber of Commerce
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Amount (\$) \$10.00	Payee address; City; State; Zip Code 411 Belle Grove Richardson, TX 75080
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Chamber Luncheon
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/8 Rpt: 11/21	2 FILER NAME Button, Angie C. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062309
4 Date 05/01/2023	5 Payee name Rowlett Area Chamber & Visitors Center	
6 Amount (\$) \$135.00	7 Payee address; City; State; Zip Code 4418 Main St. Rowlett, TX 75088	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Renew Chamber Membership
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/14/2023	Payee name Rowlett Area Chamber & Visitors Center	
Amount (\$) \$20.00	Payee address; City; State; Zip Code 4418 Main St. Rowlett, TX 75088	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Chamber Luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/12/2023	Payee name Rowlett Area Chamber & Visitors Center	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 4418 Main St. Rowlett, TX 75088	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Chamber Luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/8 Rpt: 12/21	2 FILER NAME Button, Angie C. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062309
4 Date 06/14/2023	5 Payee name Southwest Airlines	
6 Amount (\$) \$279.95	7 Payee address; City; State; Zip Code 2702 Love Field Drive Dallas, TX 75235	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense R/T Flight to Austin to Attend 06/25/23 Fundraiser
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/27/2023	Payee name Southwest Airlines	
Amount (\$) \$59.01	Payee address; City; State; Zip Code 2702 Love Field Drive Dallas, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Additional Fee for R/T Flight to Austin to Attend 06/25/23 Fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/21/2023	Payee name TFRW Convention 2023 PAC	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 2113 Flat Creek Drive Richardson, TX 75080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship for 2023 Convention in Irving, TX
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/8 Rpt: 13/21	2 FILER NAME Button, Angie C. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062309
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4 Date 01/31/2023	5 Payee name Texas Conservative Coalition
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6 Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code PO Box 2659 Austin, TX 78768
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Renewal
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/22/2023	Payee name Texas House Republican Caucus PAC
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Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O. Box 13305 Austin, TX 78711-3305
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Renew Membership
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 14/21	2 FILER NAME Button, Angie C. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062309
4 Date 02/02/2023	5 Payee name Cara Mendelsohn For Dallas City Council	
6 Amount (\$) \$500.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 7120 Van Hook Dr Dallas, TX 75248	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/6 Rpt: 15/21
2 FILER NAME Button, Angie C. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062309
4 Date 05/30/2023	5 Name of person from whom amount is received Angela Paxton Campaign <hr/> 6 Address of person from whom amount is received; City; State; Zip Code McKinney, TX 75070	8 Amount (\$) \$262.00
7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Payton Interests, Inc. T-shirts		
Date 05/19/2023	Name of person from whom amount is received Bhojani for Texas <hr/> Address of person from whom amount is received; City; State; Zip Code Irving, TX 75063	Amount (\$) \$157.00
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches		
Date 05/25/2023	Name of person from whom amount is received Campaign of Giovanni Capriglione <hr/> Address of person from whom amount is received; City; State; Zip Code Southlake, TX 76092-5844	Amount (\$) \$157.00
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches		
Date 05/18/2023	Name of person from whom amount is received Carl Sherman Sr Campaign <hr/> Address of person from whom amount is received; City; State; Zip Code Desoto, TX 75115-2389	Amount (\$) \$157.00
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches		
Date 05/25/2023	Name of person from whom amount is received Cody Harris Campaign Account <hr/> Address of person from whom amount is received; City; State; Zip Code Palestinq, TX 75801-7737	Amount (\$) \$157.00
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches		

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 2/6 Rpt: 16/21
2 FILER NAME Button, Angie C. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062309
4 Date 05/30/2023	5 Name of person from whom amount is received Dennis Paul Campaign <hr/> 6 Address of person from whom amount is received; City; State; Zip Code Webster, TX 77598	8 Amount (\$) \$157.00
7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches		
Date 05/26/2023	Name of person from whom amount is received Dr. Suleman Lalani for Texas Campaign <hr/> Address of person from whom amount is received; City; State; Zip Code Sugar Land, TX 77498	Amount (\$) \$157.00
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches		
Date 05/22/2023	Name of person from whom amount is received Gene for Texas <hr/> Address of person from whom amount is received; City; State; Zip Code Houston, TX 77274	Amount (\$) \$157.00
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Costco Wholesale food/beverages, plates, napkins, cutlery		
Date 05/25/2023	Name of person from whom amount is received Glenn Rogers for Texas <hr/> Address of person from whom amount is received; City; State; Zip Code Graford, TX 76449	Amount (\$) \$157.00
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches		
Date 05/29/2023	Name of person from whom amount is received Hubert Vo Campaign <hr/> Address of person from whom amount is received; City; State; Zip Code Houston, TX 77072-2533	Amount (\$) \$157.00
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Costco Wholesale food/beverages, plates, napkins, cutlery		

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 3/6 Rpt: 17/21
2 FILER NAME Button, Angie C. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062309
4 Date 05/30/2023	5 Name of person from whom amount is received Hunter, Todd (Rep.)	8 Amount (\$) \$157.00
	6 Address of person from whom amount is received; City; State; Zip Code Corpus Christi, TX 78412	
	7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches	
Date 05/12/2023	Name of person from whom amount is received Jacey Jetton Campaign	Amount (\$) \$157.00
	Address of person from whom amount is received; City; State; Zip Code Sugar Land, TX 77479-4053	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches	
Date 05/17/2023	Name of person from whom amount is received Jared Patterson Campaign	Amount (\$) \$157.00
	Address of person from whom amount is received; City; State; Zip Code Frisco, TX 75035	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches	
Date 05/30/2023	Name of person from whom amount is received John Whitmire Campaign Fund	Amount (\$) \$262.00
	Address of person from whom amount is received; City; State; Zip Code Houston, TX 77007-5032	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Payton Interests, Inc. T-shirts	
Date 06/09/2023	Name of person from whom amount is received King, Phil (Sen.)	Amount (\$) \$262.00
	Address of person from whom amount is received; City; State; Zip Code Weatherford, TX 76086	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Payton Interests, Inc. T-shirts	

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 4/6 Rpt: 18/21
2 FILER NAME Button, Angie C. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062309
4 Date 05/22/2023	5 Name of person from whom amount is received Krona Thimesch Campaign	8 Amount (\$) \$157.00
	6 Address of person from whom amount is received; City; State; Zip Code Carrollton, TX 75011	
	7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches	
Date 05/29/2023	Name of person from whom amount is received Leach, Jeff (Rep.)	Amount (\$) \$157.00
	Address of person from whom amount is received; City; State; Zip Code Allen, TX 75013	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches	
Date 05/27/2023	Name of person from whom amount is received Lois W Kolkhorst Campaign	Amount (\$) \$262.00
	Address of person from whom amount is received; City; State; Zip Code Brenham, TX 77834-2546	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Payton Interests, Inc. T-shirts	
Date 05/17/2023	Name of person from whom amount is received Lynn D. Stucky State House Campaign Fund	Amount (\$) \$157.00
	Address of person from whom amount is received; City; State; Zip Code Denton, TX 76202	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches	
Date 05/16/2023	Name of person from whom amount is received Matt Shaheen Campaign	Amount (\$) \$157.00
	Address of person from whom amount is received; City; State; Zip Code Plano, TX 75025-3829	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches	

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 5/6 Rpt: 19/21
2 FILER NAME Button, Angie C. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062309
4 Date 06/23/2023	5 Name of person from whom amount is received Meza, Terry (Rep.)	8 Amount (\$) \$157.00
	6 Address of person from whom amount is received; City; State; Zip Code Irving, TX 75015	
	7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches	
Date 05/15/2023	Name of person from whom amount is received Mihaela Plesa for Texas	Amount (\$) \$157.00
	Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75248	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches	
Date 06/09/2023	Name of person from whom amount is received Morgan Meyer for Texas	Amount (\$) \$157.00
	Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75219	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches	
Date 05/22/2023	Name of person from whom amount is received Nathan Johnson Campaign	Amount (\$) \$262.00
	Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75367-0994	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Payton Interests, Inc. T-shirts	
Date 06/21/2023	Name of person from whom amount is received Tan Parker Campaign ACCT	Amount (\$) \$262.00
	Address of person from whom amount is received; City; State; Zip Code Flower Mound, TX 75027	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Officeholder Reimbursement for Payton Interests, Inc. T-shirts	

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 6/6 Rpt: 20/21
2 FILER NAME Button, Angie C. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062309
4 Date 05/25/2023	5 Name of person from whom amount is received Texans for Joan Huffman	8 Amount (\$) \$262.00
	6 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77043	
	7 Purpose for which amount is received Officeholder Reimbursement for Payton Interests, Inc. T-shirts	<input type="checkbox"/> Check if political contribution returned to filer

TEXT ANNOTATION

Sch: 1/1 Rpt: 21/21

FILER NAME

Button, Angie C. (The Honorable)

Filer ID (Ethics Commission Filers)

00062309

Schedule

K

Information entered by filer as a memo:

Officeholder Reimbursement for Potbelly Sandwich Works' sandwiches:
for Asian American Day at the Capitol Event on 050923

Officeholder Reimbursement for Payton Interests, Inc. T-shirts:
for Asian American Day at the Capitol Event on 050923

Officeholder Reimbursement for Costco Wholesale food/beverages, plates, napkins, cutlery:
for Asian American Day at the Capitol Event on 050923