CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commi 00062309		2 Total pages filed: 11				
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY				
OFFICEHOLDER NAME	The Honorable	Angie C.			Date Received				
10 WIL					ELECTRONICALLY FILED				
					07/14/2025				
	NICKNAME	LAST		SUFFIX	07/14/2025				
		Button							
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarked				
OFFICEHOLDER MAILING	6914 Clear Springs Cir.								
ADDRESS					Receipt # Amount				
Change of Address	Garland, TX 75044								
	,				Date Processed				
					Date Imaged				
					Date imageu				
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	<u> </u>				
TREASURER	Mr.	Darcy G.							
NAME		- a. b, c.							
	NICKNAME	LAST		SUFFIX					
	MORNAME	Button		301117					
		Batton							
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE).	ΔΡ.	T / SUITE #; CITY;	STATE; ZIP CODE				
TREASURER	6914 Clear Springs Cir.								
ADDRESS	0014 Olear Opinigo on:								
(Residence or Business)	Corload TV 75044								
	Garland, TX 75044								
7 CAMPAIGN	AREA CODE PHON	NE NUMBER E	EXTENSION						
TREASURER PHONE	(972) 510-4199								
FHONE									
8 REPORT				_					
TYPE	January 15	30th day before	election	Runoff	15th day after campaign treasurer appointment (officeholder only)				
	X July 15	8th day before 6	election \square	Exceeded modified	Final Report (Attach C/OH-FR)				
		our day before t	Election	reporting limit	Timal Nepolt (Attach C/OH-110)				
9 PERIOD	Month Day Year			Month Day	Year				
COVERED	01/01/2025	TH	IROUGH	06/30/202					
	01/01/2020			00/00/202					
10 ELECTION	ELECTION DATE			ELECTION TYPE					
	Month Day Year	XP	rimary	Runoff	Other				
	03/03/2026				—				
			eneral	Special					
				T					
11 OFFICE	OFFICE HELD (if any)	-:		12 OFFICE SOUGHT					
	State Representative Dist	rict 112		State Represent	ative District 112				
		GO T	O PAGE 2						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 11

13 C / OH NAME	Button, Angie C. (The	e Honorable)		14 Filer ID 00062309	(Ethics Con	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures	s accepted or political expenditus may have been made without equired to report this information	the candidate's or offic	ceholder's kr	nowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	ИЕ			
	GENERAL					
		COMMITTEE ADD	DRESS			
	SPECIFIC					
		COMMITTEE CAN	MPAIGN TREASURER NAME			
		COMMITTEE CAM	IPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS	1. TOTAL UNITEM OR GUARANTE	, \$	0.00			
		CAL CONTRIBUTIO PLEDGES, LOANS,	NS OR GUARANTEES OF LOANS	5)	\$	34,775.00
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS					\$	850.30
	4. TOTAL POLITIC	CAL EXPENDITURE	ES .		\$	17,900.30
CONTRIBUTION BALANCE		TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP		LL OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT	•				•	
			I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.			
			The Hono	orable Angie C. Butt	on	
				Candidate or Officeho		
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subs	cribed before me, by the s	aid		, this the		day
of	, 20, to co	ertify which, witness	my hand and seal of office.	,		
Signature of offi	cer administering	Printed name	of officer administering	Title of office	er administe	ring oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				3 of 11				
18 FILER		(Ethics (Commission Filers)					
Button	Angie C. (The Honorable)							
	ULE SUBTOTALS DF SCHEDULE		SU	BTOTAL AMOUNT				
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$							
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	500.00				
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$					
4.	SCHEDULE E: LOANS		\$					
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	17,900.30					
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$					
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$					
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$					
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$					
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$					
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$					
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$					

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/11	
2	FILER NAME Button, Angi	e C. (The Honorable)	3	Filer ID (Ethics Commissi 00062309	on Filers)	
4	Date 06/30/2025	5 Full name of contributor out-of-state PAC (ID#:_ Apartment Association of Greater Dallas PAC 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$7,500.00
_	Deignaignal annu	Irving, TX 75038	O Familia var (Gan Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Heinbaugh, Christopher (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Dallas, TX 75204 pation / Job title (See Instructions)	Employer (See Instructions)		
	· ····o.pa. oooa	panon, cos uno (cos menusuono)		,		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#: Moyers, James (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$125.00
		Dallas, TX 75219-3448				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Springer, Lydia (Mrs.) Contributor address; City; State; Zip Code Muenster, TX 76252)		Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/28/2025	Full name of contributor out-of-state PAC (ID#:_ TREPAC-Texas Realtors PAC Non-Corporate Contributor address; City; State; Zip Code Austin, TX 78768-2246)		Amount of Contribution (\$)	\$10,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/11		
2	FILER NAME Button, Angi	e C. (The Honorable)		3	Filer ID (Ethics Commission 00062309	on Filers)
4	Date 06/27/2025	 Full name of contributor out-of-state PAC (ID#:_ Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$5,000.00
	Dringing occur	Austin, TX 78701	Employer /See Instructions	<u></u>		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Texas Apartment Association PAC Contributor address; City; State; Zip Code Austin, TX 78701-1951			Amount of Contribution (\$)	\$7,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Valero Political Action Committee Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00
	Principal occu	San Antonio, TX 78269 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:_ Weekley, Richard (Mr.) Contributor address; City; State; Zip Code Houston, TX 77027)		Amount of Contribution (\$)	\$2,500.00
	Principal occu Developer	pation / Job title (See Instructions)	Employer (See Instructions Weekley Properties	<u> </u>		

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 6/11 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Button, Angie C. (The Honorable) 00062309 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 06/25/2025 Associated Republicans of Texas Campaign Fund \$500.00 Campaign Digital 7 Contributor address; City; State; Zip Code Advertising Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1: Sch: 1/5 Rpt: 7/11	2 FILER NAME Button, Angie C. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00062309	
L			_
4	Date 01/01/2025	5 Payee name Catalyst Advisors Group LLC	
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1108 Lavaca St 110-506 Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Monthly Consulting Fee	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	_
	02/01/2025	Catalyst Advisors Group LLC	
H	Amount (\$)	Payee address; City; State; Zip Code	_
	\$500.00	1108 Lavaca St	
		110-506	
		Austin, TX 78701	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
	LXI LINDITORL	Check if Austin, TX, officeholder living expense	
		Monthly Consulting Fee	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	03/01/2025	Catalyst Advisors Group LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	1108 Lavaca St	
		110-506	
		Austin, TX 78701	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Monthly Consulting Fee	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
\vdash			_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Transport in District Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
	Credit Gard F dyment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 2/5 Rpt: 8/11	Button, Angie C. (The Honorable) 00062309	
4	Date	5 Payee name	_
	04/01/2025	Catalyst Advisors Group LLC	
-			_
0	Amount (\$)		
	\$500.00	1108 Lavaca St	
		110-506	
		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Consulting Expense	
	LA LIBITORE	Check if Austin, TX, officeholder living expense	
		Monthly Consulting Fee	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experiulture to beriefft C/Oi		
	Date	Payee name	_
	05/01/2025	Catalyst Advisors Group LLC	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$500.00	1108 Lavaca St	
	4000.00	110-506	
		Austin, TX 78701	_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Monthly Consulting Fee	
		Worlding Consulting 1 cc	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	Tandidate/Onice holder hame Onice sought Onice held	
			_
	Date	Payee name	
	06/01/2025	Catalyst Advisors Group LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	1108 Lavaca St	
		110-506	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Monthly Consulting Fee	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	-1	
			-

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			mmittee	Food/Beverage Ex Gift/Awards/Memor Legal Services The Instruction			kpens /ages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:	2	FILER NAME	=					3	Filer ID	(Ethics Commission Filers)
	Sch: 3/5 Rpt: 9/11		Button, Ang	gie C. (The Ho	onorable)					00062309	
4	Date	5	Payee name						•		
	01/11/2025		DCCRW								
6	Amount (\$)	7	Payee addre	ess; City;	State	e; Zip Co	de				
	\$300.00		1 Gettysbu	rg Lane							
L			Richardson	, TX 75080							
8	PURPOSE	(a)	Category (S	ee Categories listed	at the top of this scl	hedule)	(b)	Description			
	OF EXPENDITURE			ns/Donations						de of Texas. Com	
			Candidate/	Officeholder/F	olitical Comn	nittee		_		officeholder living C's of Leade	ership Training
								_ 0		_ 5 5. 20000	y
9	Complete ONLY if direct		Candidate/Off	iceholder name	<u>, </u>	Office sou	ght			Office he	eld
	expenditure to benefit C/O	Н									
	Date		Payee name								
	01/06/2025		Deb Shinde	er Campaign							
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	de				
	\$500.00		3009 Sunru	ıse Dr							
			Rowlett, TX	75088							
	PURPOSE	(a)		ee Categories listed		hedule)	(b)	Description			
	OF EXPENDITURE			ns/Donations		nittos		=		de of Texas. Com officeholder living	
			Candidate/	Officeholder/F	roillicai Comn	iiillee		Political Cam			
										J : : : : : : : : : : : : : : : : : : :	
	Complete ONLY if direct		Candidate/Off	iceholder name	;	Office sou	ght			Office he	eld
	expenditure to benefit C/OI	Н									
	Date		Payee name								
	03/03/2025		Innovation	and Technolo	gy Caucus of	the Texa	as H	louse			
	Amount (\$)		Payee addre	ess; City;	State	e; Zip Co	de				
	\$250.00		815-A Braz	os Street							
			#714								
			Austin, TX	78701							
	PURPOSE	(a)	Category (S	ee Categories listed	at the top of this scl	hedule)	(b)	Description			
	OF EXPENDITURE		Fees							de of Texas. Com	
								Check if Austin		officeholder living	expense
								L'CHCAA MICHIK	J G I S	omp	
	Complete ONLY if direct		Candidate/Off	iceholder name	;	Office sou	ght			Office he	eld
	expenditure to benefit C/O						-				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/5 Rpt: 10/11	Button, Angie C. (The Honorable) 00062309
4	Date	5 Payee name
	06/05/2025	Smith, Victoria (Ms.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4,000.00	4330 Bull Creek Rd
	·	#1128
		Austin, TX 78731
Ļ		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Contract labor for Campaign Services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	02/07/2025	Texas Conservative Coalition
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	PO Box 2659
		Austin, TX 78768
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Membership Renewal
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/21/2025	Texas House Republican Caucus
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P.O. Box 13305
		Austin, TX 78711-3305
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Membership Renewal
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	experience to beliefft G/O	·
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	ı - ıl Co	mmittee	Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services	ense	Polling Expens Printing Expen	id/Rental Expense e se s/Contract Labor		Travel in District Travel Out of Dis	
	Credit Card Payment			The Instruction Guide	e explains l	now to compl	ete this form.			
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 5/5 Rpt: 11/11		Button, An	gie C. (The Honora	ble)			l	00062309	
4	Date	5	Payee name					<u> </u>		
	06/05/2025			nanda (Ms.)						
<u>ا</u>	Amount (\$)	7	Payee addre		State:	Zip Code				
ľ	\$6,000.00	ľ	5300 Wood		State,	Zip Code				
	φ0,000.00		3300 W000	amoor Dr.						
				-0-04						
L			Austin, TX	78721						
8	PURPOSE	(a)	Category (S	See Categories listed at the to	op of this sch	edule) (b)	Description			
	OF EXPENDITURE		Salaries/W	ages/Contract Lab	or		_			plete Schedule T.
							Contract labor		officeholder living	
							Contract labo	JI 10	or Campaigi	i Services
Ļ	0 1: 0.11.7.7.1.	<u> </u>	0 11 1 101	·					0,1,1	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Of	ficeholder name	C	Office sought			Office he	eia
L	·									