



MICHIGAN DEPARTMENT OF ELECTIONS  
 BUREAU OF ELECTIONS

RECEIVED

OCT 25 2019

FOR OFFICIAL USE ONLY

CANDIDATE COMMITTEE  
 COVER PAGE

INGHAM COUNTY CLERK'S OFFICE

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: 1/1/2019 to 10/20/2019


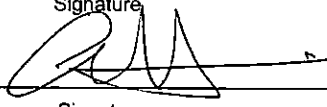
1. Committee I.D. Number <u>46536</u>	4. Candidate Last Name <u>Hussain</u> First Name <u>Adam</u> M.I. <u>N.</u>
2. Committee Name <u>Adam Hussain for 3rd Ward</u>	4a. Office Sought Including District # or Community Served (If applicable) <u>Lansing City Council, 3rd Ward</u> <input checked="" type="checkbox"/> 4b. County of Residence <u>Ingham</u> <input checked="" type="checkbox"/>

5. Committee's Mailing Address <u>3814 Calvin Dr. Lansing, Mi. 48911</u>  Area Code and Phone <u>517-528-2218</u> If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	6. Treasurer's Name & Residential Address <u>Adam Hussain</u> <u>3814 Calvin Dr. Lansing, Mi. 48911</u>  Area Code & Phone <u>517-528-2218</u>
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7. Treasurer's Business Address <u>Nil</u>  Area Code and Phone _____	8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) <u>Adam Hussain</u> <u>3814 Calvin Dr. Lansing, Mi. 48911</u>  Area Code and Phone <u>517-528-2218</u>
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9. TYPE OF STATEMENT 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election  Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus  Date of Election, Convention or Caucus <u>11/5/19</u>	Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly  9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year  9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)	9e. Dissolution of Candidate Committee <input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no lates fees or has any outstanding debt.  Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.  Effective date of dissolution _____  Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.
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10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper <u>Adam Hussain</u> Type or Print Name	 Signature	Date <u>10/24/19</u>
Candidate <u>Adam Hussain</u> Type or Print Name	 Signature	Date <u>10/24/19</u>



1. Committee I.D. Number 46536  
 2. Committee Name Adam Hossain for 3rd Ward

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>\$ 1,100</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$ 1,100</u>	(18.) \$ <u>1,100</u>
<b>4. Other Receipts (Schedule 1A -1, Column 6)</b>	(4.) \$ <u>\$ 0</u>	(19.) \$ <u>0.00</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>\$ 1,100</u>	(20.) \$ <u>1,100</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$ <u>\$ 0.00</u>	(21.) \$ <u>0.00</u>
<b>7. In-Kind Expenditures (Schedule 1B-IK, Column 6)</b>	(7.) \$ <u>\$ 0.00</u>	(22.) \$ <u>0.00</u>
<b>EXPENDITURES</b>		
<b>8. Expenditures</b>		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$ 108.43</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>\$ 0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$ 0.00</u>	
<b>9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)</b>	(9.) \$ <u>\$ 108.43</u>	(23.) \$ <u>\$ 108.43</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
<b>10. Disbursements</b>		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>\$ 0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>\$ 0.00</u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ <u>\$ 0.00</u>	(24.) \$ <u>0.00</u>
<b>DEBTS AND OBLIGATIONS</b>		
<b>12. Debts and Obligations</b>		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$ 0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>\$ 0.00</u>	
<b>BALANCE STATEMENT</b>		
<b>13. Ending Balance of last report filed</b> (Enter zero if no previous reports have been filed.)	(13.) \$ <u>67.45</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>1,100</u>	
<b>15. SUBTOTAL Add lines 13 and 14</b>	(15.) = \$ <u>1,167.45</u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$ <u>108.43</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>1,059.02</u>	



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46536  
2. Committee Name Adam Hossain for 3rd Ward

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>Plumbers &amp; Pipe-fitters Local, 333 5405 S. Martin Luther King Blvd. Lansing, Mi. 48911</u>	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>5/23/19</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>1,000</u>	\$ <u>1,000</u>
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 Name & Address: <u>Elaine &amp; David Wamboldt 4815 Tressa Dr. Lansing, Mi. 48910</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/09/2019</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>100</u>	\$ <u>100</u>
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3 Name & Address:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ _____	\$ _____
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4 Name & Address:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ _____	\$ _____
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$ 1,100  
Grand Total of All Schedules 1A (Complete on last page of Schedule) \$ 1,100

Enter this total on line 3a of Summary Page.



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 46536  
2. Committee Name Adnan Hossain for 3rd Ward

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>MSU Federal Credit Union</u> Address <u>200 E. Jolly Rd. Lansing, Mi. 48910</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Check orders</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/30/19</u> Date	<u>\$ 1600</u>
Expenditure #2 Name <u>Practical Political Consulting</u> Address <u>920 N. Washington Ave. Lansing, Mi. 48906</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Voter Lists</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/1/19</u> Date	<u>\$ 92.43</u>
Expenditure #3 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page \$108.43  
 Grand Total of all Schedules 1B (Complete on last page of Schedule) \$108.43

Enter this total on line 8a of Summary Page



**DEBTS AND OBLIGATIONS  
SCHEDULE 1E  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46536  
2. Committee Name Adnan Hussain for 3rd Ward

This Schedule itemizes:  
a  Debts and obligations owed by or forgiven the committee OR b  Debts and obligations owed to or forgiven by the committee.  
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Adnan Hussain</u> <u>3814 Calvin Dr.</u> <u>Lansing, MI 48911</u>	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>3/20/15</u> 6. <u>Original Amount of Debt:</u> <u>\$ 244.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0.00</u>	\$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Adnan Hussain</u> <u>3814 Calvin Dr.</u> <u>Lansing, MI 48911</u>	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>3/24/15</u> 6. <u>Original Amount of Debt:</u> <u>\$ 500.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0.00</u>	\$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Adnan Hussain</u> <u>3814 Calvin Dr.</u> <u>Lansing, MI 48911</u>	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>7/16/2015</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1,000</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0.00</u>	\$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt) 0.00

Grand Total of all Schedules 1E  
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



**DEBTS AND OBLIGATIONS  
SCHEDULE 1E  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46536  
2. Committee Name Adnan Hossain for 3rd Ward

This Schedule itemizes:

a  Debts and obligations owed by or forgiven the committee OR b  Debts and obligations owed to or forgiven by the committee.  
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Adnan Hossain</u> <u>3814 Calvin Dr.</u> <u>Lansing, Mi. 48911</u>	4. Type: <u>Loan</u> 5. Date Debt Was Incurred: <u>10/11/15</u> 6. Original Amount of Debt: <u>\$ 500.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0.00</u>	\$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Adnan Hossain</u> <u>3814 Calvin Dr.</u> <u>Lansing, Mi. 48911</u>	4. Type: <u>Loan</u> 5. Date Debt Was Incurred: <u>12/31/15</u> 6. Original Amount of Debt: <u>\$ 1,600</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0.00</u>	\$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. Date Debt Was Incurred: _____ 6. Original Amount of Debt: _____ \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) \$ 0.00

Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee) \$ 0.00

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.