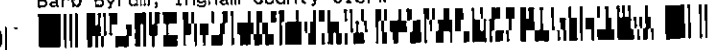




CAND



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COVER PAGE

INGHAM COUNTY CLERK

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: 8/25/2015 to 10/18/2015

1. Committee I.D. Number  
46536

4. Candidate Last Name HOSSAIN First Name ADAM M.I. N.  
4a. Office Sought Including District # or Community Served (If applicable)  
Lansing City Council, 3rd Ward

2. Committee Name  
Adam Hossain for 3rd Ward

4b. County of Residence Ingham

5. Committee's Mailing Address  
3814 Calvin Dr.  
Lansing, MI. 48911  
Area Code and Phone 517-528-2218  
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  
Adam Hossain  
3814 Calvin Dr.  
Lansing, MI. 48911  
Area Code & Phone 517-528-2218

7. Treasurer's Business Address  
  
Area Code and Phone \_\_\_\_\_

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)  
  
Area Code and Phone \_\_\_\_\_

9. TYPE OF STATEMENT

9a. ☒ Pre-Election OR 9b. ☐ Post-Election

Required ONLY if candidate is not on the ballot for the current year:

☐ July Quarterly  
☐ October Quarterly

9c. ☐ Annual Statement (\_\_\_\_\_) Coverage Year

9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)

9e. Dissolution of Candidate Committee

☐ 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 late 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.

Date of Election, Convention or Caucus

11-3-15

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 Adam Hossain Signature [Signature] Date 10/22/15  
Type or Print Name

Candidate Adam Hossain Signature [Signature] Date 10/22/15  
Type or Print Name



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 46536

2. Committee Name Adnan 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>7460.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>7460.00</u>	(18.) \$ <u>15,014.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>52.04</u>	(19.) \$ <u>52.04</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$	<u>7512.04</u>	(20.) \$ <u>15,066.04</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>241.30</u>	(21.) \$ <u>441.30</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>0</u>	(22.) \$ <u>0</u>
<b>EXPENDITURES</b>			
<b>8. Expenditures</b>			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>3961.49</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>0</u>	
<b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>3961.49</u>	(23.) \$ <u>9794.75</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)			
<b>10. Disbursements</b>			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>0</u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$	<u>0</u>	(24.) \$ <u>0</u>
<b>DEBTS AND OBLIGATIONS</b>			
<b>12. Debts and Obligations</b>			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>2288.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>0</u>	
<b>BALANCE STATEMENT</b>			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>1720.74</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>7460.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>9180.74</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>3961.49</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$	<u>5219.25</u>	



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46536  
2. Committee Name Adam Hassan 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 all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES

4. Date of Receipt 8/27/15

Name & Address:

Mary Jo Marshall  
3220 Calvin Ct. Lansing, Mi. 48911

\$100.00 \$500.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 9/15/15

Name & Address

Sonara Morgan  
2312 Bernard  
Lansing, Mi. 48911

\$500.00 \$500.00

5. If over \$100.00 cumulative, please provide:

Occupation Call Center Mgr. Employer Messa

[Click Here for Memo Itemization](#)

Business Address 1475 Kenda Blvd. East Lansing, Mi. 48823

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #3 PAC Receipt? ☒ YES

4. Date of Receipt 9/15/15

Name & Address:

IBEW Local 352  
3315 S. Pennsylvania  
Lansing, Mi. 48910

\$1,500 \$1,500

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #4 PAC Receipt? ☒ YES

4. Date of Receipt 10/1/15

Name & Address

Plumbers Local 333  
5405 S. Martin Luther King Jr.  
Lansing, Mi. 48911

\$1,500 \$3,000

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

\$3,600

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**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	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/1/15</u>	
Name & Address: <u>Susan Robertson</u> <u>6327 Hagg Rd.</u> <u>Lansing, Mi. 48911</u>		<u>\$ 200.00</u>	<u>\$ 200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>6/1/15</u>	
Name & Address: <u>Melvin Pashek</u> <u>9377 Rayna Dr.</u> <u>Davison, Mi. 48463</u>		<u>\$ 100.00</u>	<u>\$ 200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/1/15</u>	
Name & Address: <u>Mary Jo Marshall</u> <u>3920 Calvin Ct.</u> <u>Lansing, Mi. 48911</u>		<u>\$ 100.00</u>	<u>\$ 600.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/1/15</u>	
Name & Address: <u>Richard Wendorf</u> <u>1817 Jerome St.</u> <u>Lansing, Mi. 48912</u>		<u>\$ 150.00</u>	<u>\$ 150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Teacher</u> Employer <u>Lansing Schools</u>		Click Here for Memo Itemization	
Business Address <u>519 W. Kalamazoo St. Lansing, Mi. 48933</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal \$ 550.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46536  
2. Committee Name Adam Hussein 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 all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 10/1/15  
Name & Address:

Gloria Barks  
3534 Locie St.  
Lansing, Mi. 48211

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/1/15  
Name & Address:

Penelope Tsemoglow for I.C.C.  
1147 Prescott Dr.  
East Lansing, Mi. 48823

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 10/9/15  
Name & Address:

Mary Ann Prince  
2116 Fernol St.  
Lansing, Mi. 48910

\$ 25.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 10/9/2015  
Name & Address:

Rina Risper  
503 W. 6th River Ave.  
Lansing, Mi. 48906

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

175.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number

46536

2. Committee Name

Adnan Hussain 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 all contributions regardless of amount.

6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution #1

PAC Receipt?

☐ YES

4. Date of Receipt

10/9/15

Name & Address:

Kathy Toke  
4030 Ocleyborn Rd.  
Lansing, MI. 48911

\$ 50.00 \$ 70.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #2

PAC Receipt?

☐ YES

4. Date of Receipt

10/9/15

Name & Address:

Andrew Breyer  
3121 Lucie St.  
Lansing, MI. 48911

\$ 15.00 \$ 15.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #3

PAC Receipt?

☐ YES

4. Date of Receipt

10/9/15

Name & Address:

Glenn Freeman III - For E.C.C.  
435 S. Stoll Rd.  
Lansing, MI. 48917

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #4

PAC Receipt?

☐ YES

4. Date of Receipt

10/9/15

Name & Address:

Kathy Sinicropi  
3433 W. Herkimer Rd.  
Livestock, MI. 48620

\$ 50.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:

☒ Direct

☐ Loan from a person

☒ Fund Raiser

Page Subtotal

165.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**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 all contributions regardless of amount.

6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution # 1

PAC Receipt? ☐ YES

4. Date of Receipt

10/9/2015

Name & Address:

Jacqueline Garvey  
126 E. Monroe St.  
Villa Park, Ill. 60181

\$ 100.00 \$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:

☒ Direct

☐

Loan from a person

☐

Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

10/9/2015

Name & Address

Ronald John Kniffen Jr.  
6129 Buckden Way Apt. 8  
East Lansing, Mi. 48823

\$ 100.00 \$ 140.00

5. If over \$100.00 cumulative, please provide:

Occupation Maintenance Employer Michigan State University

[Click Here for Memo Itemization](#)

Business Address 908 Aless Rd. East Lansing, Mi. 48825

Type of Contribution:

☒ Direct

☐

Loan from a person

☐

Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

10/9/2015

Name & Address:

Adam Harris  
625 Parker Rd.  
Lansing, Mi. 48917

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:

☒ Direct

☐

Loan from a person

☒

Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

10/9/2015

Name & Address

Kyle Hopkins  
4401 Tuscan Ln.  
Holt, Mi. 48842

\$ 50.00 \$ 90.00

5. If over \$100.00 cumulative, please provide:

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

Type of Contribution:

☒ Direct

☐

Loan from a person

☒

Fund Raiser

Page Subtotal

350.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46536  
2. Committee Name Adam Hussain 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)
<p>3. Contribution #1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/9/15</u></p> <p>Name &amp; Address: <u>Alfonso Salais</u> <u>4623 Wydesdale Rd.</u> <u>Lansing, MI 48906</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		<u>\$ 20.00</u>	<u>\$ 20.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/11/2015</u></p> <p>Name &amp; Address: <u>Brian McConnell</u> <u>3521 Karen St.</u> <u>Lansing, MI 48911</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		<u>\$ 20.00</u>	<u>\$ 40.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/11/15</u></p> <p>Name &amp; Address: <u>Deborah Strawn</u> <u>501 W. Sheridan</u> <u>Lansing, MI 48906</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		<u>\$ 50.00</u>	<u>\$ 75.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/11/15</u></p> <p>Name &amp; Address: <u>Carol McConnell</u> <u>3521 Karen St.</u> <u>Lansing, MI 48911</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		<u>\$ 20.00</u>	<u>\$ 80.00</u>
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal

110.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 46536  
2. Committee Name Adam Hussain 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	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/11/15</u>	
Name & Address: <u>Melissa Jeffries</u> <u>3704 S. Fox Pointe St.</u> <u>Lansing, Mi. 48911</u>		<u>\$ 40.00</u>	<u>\$ 40.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/11/15</u>	
Name & Address: <u>Naureen Marshall</u> <u>3921 Calvin Ct.</u> <u>Lansing, Mi. 48911</u>		<u>\$ 70.00</u>	<u>\$ 270.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Sw. Worker</u> Employer <u>Michigan State University</u>		Click Here for Memo Itemization	
Business Address <u>361 Delta Ct. Rm. 190 East Lansing, Mi. 48825</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/13/2015</u>	
Name & Address: <u>Edward Zeineh</u> <u>2627 Little Hickory Dr.</u> <u>Lansing, Mi. 48911</u>		<u>\$ 250.00</u>	<u>\$ 250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Lawyer</u> Employer <u>Law Office of Edward Zeineh</u>		Click Here for Memo Itemization	
Business Address <u>1704 E. Michigan Ave. Lansing, Mi. 48912</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/13/2015</u>	
Name & Address: <u>Carol Wood</u> <u>1018 W. Lapeer St.</u> <u>Lansing, Mi. 48915</u>		<u>\$ 150.00</u>	<u>\$ 150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Council Representative</u> Employer <u>City of Lansing</u>		Click Here for Memo Itemization	
Business Address <u>124 W. Michigan Ave. Lansing, Mi. 48933</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

\$10.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 46536  
2. Committee Name Adam Hussain 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)
<p>3. Contribution #1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10-11-15</u></p> <p>Name &amp; Address: <u>Adam Hussain</u> <u>3814 Calum Dr.</u> <u>Lansing, MI 48911</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Teacher</u>      Employer <u>Waverly Community Schools</u> Business Address <u>620 Snow Rd. Lansing MI 48906</u> Type of Contribution: <input checked="" type="checkbox"/> Direct      <input checked="" type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>500.00</u>	\$ <u>2244.00</u>
<p>3. Contribution #2      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>10-16-15</u></p> <p>Name &amp; Address: <u>UAW-VPAC</u> <u>8000 E. Jefferson</u> <u>Detroit, MI 48214</u></p> <p>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</p>		\$ <u>1500</u>	\$ <u>1500</u>
<p>3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____</p> <p>Name &amp; Address: _____</p> <p>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</p>		\$ _____	\$ _____
<p>3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____</p> <p>Name &amp; Address: _____</p> <p>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</p>		\$ _____	\$ _____

Page Subtotal

2000.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

7460.00

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED OTHER RECEIPTS  
SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. Number 46536

2. Committee Name Adnan Hossain for 3rd Ward

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: <u>Keystone Printing</u> <u>3540 Jefferson Ave.</u> <u>Grandledge, MI</u> <u>48837</u>	Date of Receipt <u>10/17/15</u>	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input checked="" type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	\$ <u>52.04</u>
Receipt #2 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #3 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #4 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #5 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #6 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #7 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	\$ _____

Page Subtotal

52.04

Grand Total of All Schedules 1A-1  
(Complete on last page of Schedule)

52.04

Enter this total on  
line 4 of Summary  
Page



# ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-IK

### CANDIDATE COMMITTEE

1. Committee I. D. Number

46536

2. Committee Name

Adam Hussain for 3rd Ward

3. Name and Address from whom received  
If contribution is from an individual, enter last  
name first. Check box to indicate if contribution  
is from a Political Committee or an Independent  
Committee (Both are commonly called PACs).  
Report all in-kind contributions.

4. Type of In-Kind Contribution (Check applicable box)

5. Date of Receipt

6. Name & Address of Vendor from whom goods or services were  
purchased

7. Amount or  
Fair Market  
Value

8. Cumulative  
for Election  
Cycle (Through  
date in Item 5)

Contribution # 1 PAC Receipt? ☐ Yes

Name & Address:

Thomas Morgan  
2312 Bernard  
Lansing, MI. 48911

If over \$100.00 cumulative, please provide:

Occupation: Communications  
Consultant

Employer Name & Business Address:

MESSA  
1475 Kirdake  
East Lansing, MI. 48823

☐ Fund Raiser Contribution

4. ☐ Endorsement or Guarantee of Bank Loan

☒ Goods Donated or Loaned ☐ Services Donated

☐ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description Food

5. Date Of Receipt: 10/6/2015

6. Vendor Name & Address:

Exchange of Lansing  
314 E. Michigan Ave.  
Lansing, MI. 48933

[Click Here for Memo Itemization](#)

\$ 241.30 \$ 431.30

Contribution # 2 PAC Receipt? ☐ Yes

Name & Address

If over \$100.00 cumulative, please provide:

Occupation:

Employer Name & Address:

☐ Fund Raiser Contribution

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☐ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description

5. Date Of Receipt:

6. Vendor Name & Address:

[Click Here for Memo Itemization](#)

Contribution #3 PAC Receipt? ☐ Yes

Name & Address:

If over \$100.00 cumulative, please provide:

Occupation:

Employer Name & Address:

☐ Fund Raiser Contribution

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☐ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description

5. Date Of Receipt:

6. Vendor Name & Address:

[Click Here for Memo Itemization](#)

Page Subtotal

241.30 431.30

Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule)

241.30

Enter this total  
on line 6 of Summary  
Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

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

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <u>Keystone Millbrook</u> Address <u>3540 Jefferson Hwy.</u> <u>Grand Ledge, Mi. 48837</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/23/15</u> Date	<u>\$ 392.14</u>
<b>Expenditure #2</b> Name <u>Keystone Millbrook</u> Address <u>3540 Jefferson Hwy.</u> <u>Grand Ledge, Mi. 48837</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/23/15</u> Date	<u>\$ 392.14</u>
<b>Expenditure #3</b> Name <u>Keystone Millbrook</u> Address <u>3540 Jefferson Hwy.</u> <u>Grand Ledge, Mi. 48837</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/1/15</u> Date	<u>\$ 422.68</u>
<b>Expenditure #4</b> Name <u>Keystone Millbrook</u> Address <u>3540 Jefferson Hwy.</u> <u>Grand Ledge, Mi. 48837</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/1/15</u> Date	<u>\$ 422.68</u>
<b>Expenditure #5</b> Name <u>Meijer</u> Address <u>6200 Pennsylvania Ave.</u> <u>Lansing, Mi. 48911</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/23/15</u> Date	<u>\$ 29.40</u>

Subtotal this page 1,659.04  
Grand Total of all Schedules 1B  
(Complete on last page of Schedule)

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES**  
**SCHEDULE 1B**  
**CANDIDATE COMMITTEE**

1. Committee I. D. Number 46536  
2. Committee Name Adam 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>Keystone Millbrook</u> Address <u>3540 Jefferson Hwy.</u> <u>Grand Ledge, Mi. 48837</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/14/15</u> Date	<u>\$ 625.66</u>
Expenditure #2 Name <u>Keystone Millbrook</u> Address <u>3540 Jefferson Hwy.</u> <u>Grand Ledge, Mi. 48837</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/14/15</u> Date	<u>\$ 1123.02</u>
Expenditure #3 Name <u>Keystone Millbrook</u> Address <u>3540 Jefferson Hwy.</u> <u>Grand Ledge, Mi. 48837</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/14/15</u> Date	<u>\$ 553.77</u>
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 2,302.45  
Grand Total of all Schedules 1B  
(Complete on last page of Schedule) 3,962.49  
Enter this total  
on line 8a of  
Summary Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS

SCHEDULE 1E

CANDIDATE COMMITTEE

1. Committee I.D. Number

46536

2. Committee Name

Adam Hossain for 3rd Ward

This Schedule itemizes:

☒ Debts and obligations owed by or forgiven the committee OR ☐ 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.

Debt #1 Corp? ☐ Yes

Owed to or by:

Adam Hossain  
3814 Calvin Dr.  
Lansing, Mi. 48911

4. Type of Obligation (Description)

5. Indicate date debt was incurred

6. Indicate original amount of debt

4. Type: LOAN

5. Date Debt Was Incurred:

3/20/2015

6. Original Amount of Debt:

\$ 244.00

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)

\$

\$

\$

\$

\$

\$ 0

\$ 244.00

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Amount Endorsed: \$

Debt #2 Corp? ☐ Yes

Owed to or by:

Adam Hossain  
3814 Calvin Dr.  
Lansing, Mi. 48911

4. Type: LOAN

5. Date Debt Was Incurred:

3/24/2015

6. Original Amount of Debt:

\$ 500.00

\$

\$

\$

\$

\$

\$ 0

\$ 544.00

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Amount Endorsed: \$

Debt #3 Corp? ☐ Yes

Owed to or by:

Adam Hossain  
3814 Calvin Dr.  
Lansing, Mi. 48911

4. Type: LOAN

5. Date Debt Was Incurred:

7/16/2015

6. Original Amount of Debt:

\$ 1,000

\$

\$

\$

\$

\$

\$ 0

\$ 1,000.00

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Amount Endorsed: \$

Page Subtotal (Outstanding debt)

1,788.00

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

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.

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



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

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

1. Committee I.D. Number 46536  
2. Committee Name Adam 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 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>Adam Hossain</u> <u>3814 Calvin Dr.</u> <u>Lansing, Mi. 48911</u>	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>10/11/2015</u> 6. <u>Original Amount of Debt:</u> <u>\$ 500.00</u>	\$ \$ \$ \$ \$	\$ <u>0</u>	\$ <u>500.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ \$ \$ \$ \$	\$ _____	\$ _____ <input 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. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ \$ \$ \$ \$	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) 500.00

Grand Total of all Schedules 1E 2288.00  
(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.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE

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

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>10-6-15</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>20</u>	5. Type of Fund Raising Activity <u>Reception</u>	6. Address and Name (If any) of the place where the activity was held. <u>The Exchange, 314 Michigan, Lansing, MI 48933</u> <input type="checkbox"/> Private Residence
--	---	--	--

7. Total Contributions \$975  
8. Other Receipts -  
9. Gross Receipts (Add lines 7 and 8) \$975  
10. Total Cost of Event \$241.30  
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.