Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report
Municipal Form
Office of Campaign and Political Finance

RECEIVED
JAN 15 2026
Town Clerk
Hingham, MA

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 5/24/2025 Ending Date: 12/31/2025

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

Julie Moran Strehle
Candidate Full Name (if applicable)

Hingham Select Board
Office Sought and District

231 Leavitt Street, Hingham, MA 02043
Residential Address

E-mail: juliestrehle9gmail.com

Phone # (optional): 781-727-2788

Committee to Elect Julie Strehle
Committee Name

Marisa B Costello
Name of Committee Treasurer

9 Partridge Drive, Hingham, MA 02043
Committee Mailing Address

E-mail: 66mabc@gmail.com

Phone # (optional): 781-424-0305

SUMMARY BALANCE INFORMATION:

Line 1:	Ending Balance from previous report	$330.69
Line 2:	Total receipts this period (page 3, line 11)	0.00
Line 3:	Subtotal (line 1 plus line 2)	$330.69
Line 4:	Total expenditures this period (page 5, line 14)	$7.95
Line 5:	Ending Balance (line 3 minus line 4)	$322.74
Line 6:	Total in-kind contributions this period (page 6)	0
Line 7:	Total (all) outstanding liabilities (page 7)	0
Line 8:	Name of bank(s) used:	Eastern Bank

Affidavit of Committee Treasurer:
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Marisa B Costello (Treasurer's signature) Date: 12/31/2025

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee
☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

Candidate without Committee
☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Julie M Strehle (Candidate's signature) Date: 12/31/2025

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over $50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over $50. In addition, the occupation and employer must be reported for all persons who contribute $200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of $200 or more)

Line 9: Total Receipts over $50 (or listed above)		
Line 10: Total Receipts $50 and under* (not listed above)		
Line 11: TOTAL RECEIPTS IN THE PERIOD	0	← Enter on page 1, line 2

* If you have itemized receipts of $50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of $200 or more)

Line 9: Total Receipts over $50 (or listed above)	0
Line 10: Total Receipts $50 and under* (not listed above)	0
Line 11: TOTAL RECEIPTS IN THE PERIOD	0 ← Enter on page 1, line 2

* If you have itemized receipts of $50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over $50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over $50. Expenditures $50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
5/31/2025	Stripe		Fees for processing donations through DonorBox	$7.95

Line 12: Total Expenditures over $50 (or listed above)	0
Line 13: Total Expenditures $50 and under* (not listed above)	$7.95
Enter on page 1, line 4 → **Line 14: TOTAL EXPENDITURES IN THE PERIOD**	$7.95

* If you have itemized expenditures of $50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report
Municipal Form

Office of Campaign and Political Finance

RECEIVED
JUN 02 2025
Town Clerk
Hingham, MA

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 4/16/2025 Ending Date: 5/23/2025

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☒ 30 day after election ☐ year-end report ☐ dissolution

Julie Moran Strehle
Candidate Full Name (if applicable)

Hingham Select Board
Office Sought and District

231 Leavitt Street, Hingham, MA 02043
Residential Address

E-mail: juliestrehle9gmail.com

Phone # (optional): 781-727-2788

Committee to Elect Julie Strehle
Committee Name

Marisa B Costello
Name of Committee Treasurer

9 Partridge Drive, Hingham, MA 02043
Committee Mailing Address

E-mail: 66mabc@gmail.com

Phone # (optional): 781-424-0305

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	$1,969.45
Line 2: Total receipts this period (page 3, line 11)	$150.00
Line 3: Subtotal (line 1 plus line 2)	$2,119.45
Line 4: Total expenditures this period (page 5, line 14)	$1,788.76
Line 5: Ending Balance (line 3 minus line 4)	$330.69
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	Eastern Bank

Affidavit of Committee Treasurer:
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Marisa B Costello (Treasurer's signature) Date: 5/23/2025

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

☒ **Candidate with Committee**
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

☐ **Candidate without Committee**
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Julie M Strehle (Candidate's signature) Date: 5/23/2025

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over $50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over $50. In addition, the occupation and employer must be reported for all persons who contribute $200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of $200 or more)
4/20/25	Philip Edmundson 55 Cottage Street Hingham, MA 02043	$50	
4/23/25	Ron Sherwood 16 Partridge Drive Hingham, MA 02043	$100	

Line 9: Total Receipts over $50 (or listed above)	$100
Line 10: Total Receipts $50 and under* (not listed above)	$50
Line 11: TOTAL RECEIPTS IN THE PERIOD	$150 ← Enter on page 1, line 2

* If you have itemized receipts of $50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of $200 or more)

Line 9: Total Receipts over $50 (or listed above)	0	
Line 10: Total Receipts $50 and under* (not listed above)	0	
Line 11: TOTAL RECEIPTS IN THE PERIOD	0	← Enter on page 1, line 2

* If you have itemized receipts of $50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over $50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over $50. Expenditures $50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
4/16/25	Town of Hingham	South Shore Country Club 274 South Street Hingham, MA 02043	Payment of use of the bowling alley at the SSCC on May 4th for celebration party	$350
5/15/24	Julie Strehle	231 Leavitt Street Hingham, MA 02043	Payment to caterer for May 4th celebration party	$1,368
5/15/24	Cynthia Galko	45 Lincoln Street Hingham, MA 02043	Seltzers and water for May 4th celebration party	$70.76

Line 12: Total Expenditures over $50 (or listed above)	$1,788.76
Line 13: Total Expenditures $50 and under* (not listed above)	0
Line 14: TOTAL EXPENDITURES IN THE PERIOD	$1,788.76

Enter on page 1, line 4 →

* If you have itemized expenditures of $50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount

	Line 12: Expenditures over $50 (or listed above)	0
	Line 13: Expenditures $50 and under* (not listed above)	0
Enter on page 1, line 4 →	**Line 14: TOTAL EXPENDITURES IN THE PERIOD**	0

* If you have itemized expenditures of $50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than $50. In-kind contributions $50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value

Line 15: In-Kind Contributions over $50 (or listed above)	0
Line 16: In-Kind Contributions $50 & under (not listed above)	0
Line 17: TOTAL IN-KIND CONTRIBUTIONS	0

Enter on page 1, line 6 →

* If an in-kind contribution is received from a person who contributes more than $50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is $200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount

Enter on page 1, line 7 → **Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)** 0

Commonwealth of Massachusetts

Form CPF M 102: Campaign Finance Report
Municipal Form
Office of Campaign and Political Finance

RECEIVED
APR 17 2025
Town Clerk
Hingham, MA

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01/01/2025 Ending Date: 04/15/2025

Type of Report: (Check one)

☐ 8th day preceding preliminary ☒ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

Julie Moran Strehle	Committee to Elect Julie Strehle
Candidate Full Name (if applicable)	Committee Name
Hingham Select Board	Marisa B Costello
Office Sought and District	Name of Committee Treasurer
231 Leavitt Street, Hingham, MA 02043	9 Partridge Drive, Hingham, MA 02043
Residential Address	Committee Mailing Address
E-mail: juliestrehle9@gmail.com	E-mail: 66mabc@gmail.com
Phone # (optional): 781-727-2788	Phone # (optional): 781-424-0305

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	$2,225.00
Line 2: Total receipts this period (page 3, line 11)	$2,915.00
Line 3: Subtotal (line 1 plus line 2)	$5,140.00
Line 4: Total expenditures this period (page 5, line 14)	$3,170.55
Line 5: Ending Balance (line 3 minus line 4)	$1,969.45
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	Eastern Bank

Affidavit of Committee Treasurer:
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Marisa B Costello (Treasurer's signature) Date: 4/16/25

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

☒ **Candidate with Committee**
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

☐ **Candidate without Committee**
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Julie M Strehle (Candidate's signature) Date: 4/17/25

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over $50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over $50. In addition, the occupation and employer must be reported for all persons who contribute $200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of $200 or more)
3/30/25	Molly Ascrizzi 23 Bridge Street, Apt 509 Quincy, MA 02069	100	
3/10/25	Marco and Laura Boer 33 Elm Street Hingham, MA 02043	100	
3/3/25	Kate Boland 338 Main Street Hingham, MA 02043	40	
2/10/25	Henry Buckley 235 Lincoln Street Hingham, MA 02043	25	
1/6/25	Amy Crean 10 Edward Walker Court Hingham, MA 02043	100	
3/3/25	Jennifer Davis 49 School Street Hingham, MA 02043	50	
3/10/25	Amy Farrell 95 Central Street Hingham, MA 02043	200	Banker Citizens Bank
3/17/25	Lucy and Skip Hancock 69 Worcester Island Road Wolfeboro, MA 03894	50	
3/11/25	Alyson Hussey 149 Leavitt Street Hingham, MA 02043	100	
3/4/25	Ted and Monica Matthews 102 Hersey Street Hingham, MA 02043	50	
3/4/25	Eileen McIntyre 111 Martins Lane Hingham, MA 02043	100	
1/13/25	Cheryl Pinarchick 17 Volunteer Road Hingham, MA 02043	100	
Line 9: Total Receipts over $50 (or listed above)		1,015	
Line 10: Total Receipts $50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		1,015	← Enter on page 1, line 2

* If you have itemized receipts of $50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of $200 or more)
4/10/25	Tom O'Reilly 19 Porters Cove Road Hingham, MA 02043	200	CFO and COO Combined Jewish Philanthropies
3/4/25	Susan Quoss 92 Popes Lane Hingham, MA 02043	100	
3/15/25	Cathy and Bill Salisbury 205 Linden Ponds Way #714 Hingham, MA 02043	250	Retired
3/11/25	Craig Smith 589 Main Street Hingham, MA 02043	100	
3/27/25	Andrew Strehle 231 Leavitt Street Hingham, MA 02043	1,000	Attorney Brown Rudnick
1/20/25	Sara Taylor 3 Grist Mill Lane Hingham, MA 02043	100	
3/4/25	Liz Townsend 164 Black Rock Drive Hingham, MA 02043	50	
2/10/25	Andrew Turner 172 Wompatuck Road Hingham, MA 020431,1,015	100	

Line 9: Total Receipts over $50 (or listed above)	1,900	
Line 10: Total Receipts $50 and under* (not listed above)		
Line 11: TOTAL RECEIPTS IN THE PERIOD	1,900	← Enter on page 1, line 2

* If you have itemized receipts of $50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over $50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over $50. Expenditures $50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
1/17/25	Julie Strehle	231 Leavitt Street Hingham, MA 02043	Photos for campaign, domain name & regi, digi experience platform, thank you cards	$711.30
1/30/25	Cynthia Galko	45 Lincoln Street Hingham, MA 02043	Deposit at Tosca	$300.00
4/9/25	Katie Sutton	245 Leavitt Street Hingham, MA 02043	Design of Campaign Logo/yard sign, website design and configuration	$500.00
4/15/25	East Coast Printing	2 Keith Way, Unit #5 Hingham, MA 02043	Printing of Lawn Signs	$1,508.75
12/1-4/15/25	Stripe		Fees for processing donations through DonorBox	$150.50

Line 12: Total Expenditures over $50 (or listed above)	$3,170.55
Line 13: Total Expenditures $50 and under* (not listed above)	0
Line 14: TOTAL EXPENDITURES IN THE PERIOD	$3,170.55

Enter on page 1, line 4 →

* If you have itemized expenditures of $50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount

Line 12: Expenditures over $50 (or listed above)	0
Line 13: Expenditures $50 and under* (not listed above)	0
Line 14: TOTAL EXPENDITURES IN THE PERIOD	0

Enter on page 1, line 4 →

* If you have itemized expenditures of $50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than $50. In-kind contributions $50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value

	Line 15: In-Kind Contributions over $50 (or listed above)	0
	Line 16: In-Kind Contributions $50 & under (not listed above)	0
Enter on page 1, line 6 →	**Line 17: TOTAL IN-KIND CONTRIBUTIONS**	0

* If an in-kind contribution is received from a person who contributes more than $50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is $200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount

Enter on page 1, line 7 → **Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)** 0