



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Vertex Pharmaceuticals Incorporated Political Action Committee**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>	<input type="text" value="86004.41"/>	<input type="text" value="86004.41"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="91812.66"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="12512.14"/>	<input type="text" value="41997.78"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="104324.80"/>	<input type="text" value="128002.19"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="26559.61"/>	<input type="text" value="50237.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="77765.19"/>	<input type="text" value="77765.19"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**  
  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Vertex Pharmaceuticals Incorporated Political Action Committee**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10221.51	19202.36
(ii) Unitemized .....	2290.63	17795.42
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	12512.14	36997.78
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	12512.14	36997.78
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	12512.14	41997.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	12512.14	41997.78

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	59.61	237.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	59.61	237.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26500.00	50000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	26559.61	50237.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26559.61	50237.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	12512.14	36997.78
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12512.14	36997.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	59.61	237.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	59.61	237.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Altshuler, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive VP Global Research and Chi  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 318.63

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871969**  
 Amount of Each Receipt this Period  
 192.00  
 Memo Item

**B. Altshuler, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive VP Global Research and Chi  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 510.63

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932560**  
 Amount of Each Receipt this Period  
 192.00  
 Memo Item

**C. Anderson, Kwamme, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Federal Government Affairs Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676853**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	434.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Anderson, Kwamme, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Federal Government Affairs Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871982**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Anderson, Kwamme, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Federal Government Affairs Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **05 / 06 / 2022**  
**Transaction ID : A2022-932521**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Andrikopoulos, Konstantinos, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Director Intellectual Proper  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **04 / 08 / 2022**  
**Transaction ID : A2022-676762**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Andrikopoulos, Konstantinos, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Director Intellectual Proper  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871888**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Andrikopoulos, Konstantinos, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Director Intellectual Proper  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **05 / 06 / 2022**  
**Transaction ID : A2022-932498**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Arbuckle, Stuart, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Vice President and Chief Ope  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1344.00

Date of Receipt **04 / 08 / 2022**  
**Transaction ID : A2022-676795**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	292.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Arbuckle, Stuart, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Vice President and Chief Op  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1536.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871918**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**B. Arbuckle, Stuart, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Vice President and Chief Op  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1728.00

Date of Receipt **05 / 06 / 2022**  
**Transaction ID : A2022-932546**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**C. Auster, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) State Government Affairs Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **04 / 08 / 2022**  
**Transaction ID : A2022-676786**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	434.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 70
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Auster, Martha, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) State Government Affairs Director
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2022

**Transaction ID : A2022-871914**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Auster, Martha, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) State Government Affairs Director
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2022

**Transaction ID : A2022-932502**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. Badia, Michael, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Assistant General Counsel Intellectual
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2022

**Transaction ID : A2022-676772**

Amount of Each Receipt this Period  
30.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	130.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Badia, Michael, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Assistant General Counsel Intellectual
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2022

**Transaction ID : A2022-871900**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. Badia, Michael, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Assistant General Counsel Intellectual
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2022

**Transaction ID : A2022-932476**

Amount of Each Receipt this Period  
30.00

Memo Item

**C. Baker, MaryEllen, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Patient Advocacy Associate Director
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2022

**Transaction ID : A2022-676826**

Amount of Each Receipt this Period  
30.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Baker, MaryEllen, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Patient Advocacy Associate Director
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04		22		2022

**Transaction ID : A2022-871954**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. Baker, MaryEllen, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Patient Advocacy Associate Director
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
05		06		2022

**Transaction ID : A2022-932541**

Amount of Each Receipt this Period  
30.00

Memo Item

**C. Barnes, Scott, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Federal Government Affairs Associate C
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04		08		2022

**Transaction ID : A2022-676852**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	110.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Barnes, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Federal Government Affairs Associate I  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871981**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Barnes, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Federal Government Affairs Associate I  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **05 / 06 / 2022**  
**Transaction ID : A2022-932520**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Booth, Kathryn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Marketing  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **04 / 08 / 2022**  
**Transaction ID : A2022-676778**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Booth, Kathryn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871905**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Booth, Kathryn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932479**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Bruckner, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Technical Accounting &  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676792**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Bruckner, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Technical Accounting &  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871913**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Bruckner, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Technical Accounting &  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932509**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Brunsvold, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) State Government Affairs Director  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676830**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Brunsvold, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) State Government Affairs Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871958**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Brunsvold, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) State Government Affairs Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **05 / 06 / 2022**  
**Transaction ID : A2022-932556**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Carroll, Kilpatrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President Disease Area Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **04 / 08 / 2022**  
**Transaction ID : A2022-676776**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	130.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Carroll, Kilpatrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President Disease Area Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871906**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**B. Carroll, Kilpatrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President Disease Area Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932480**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**C. Crouch, Kristin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Director Medical Affairs MSL  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676859**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Crouch, Kristin, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Director Medical Affairs MSL
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2022

**Transaction ID : A2022-871990**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. Crouch, Kristin, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Director Medical Affairs MSL
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2022

**Transaction ID : A2022-932529**

Amount of Each Receipt this Period  
30.00

Memo Item

**C. Dunn, Marissa, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Patient Advocacy Associate Director
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2022

**Transaction ID : A2022-676833**

Amount of Each Receipt this Period  
30.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Dunn, Marissa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Patient Advocacy Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871955**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**B. Dunn, Marissa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Patient Advocacy Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932543**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**C. Ebert, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President Medical Affairs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676769**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	110.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Ebert, Deborah, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Vice President Medical Affairs
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2022

**Transaction ID : A2022-871889**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Ebert, Deborah, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Vice President Medical Affairs
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2022

**Transaction ID : A2022-932496**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. Franklin, Stephanie, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Vice President and Chief Human
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2022

**Transaction ID : A2022-676757**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Franklin, Stephanie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President and Chief Human Resources Officer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 400.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871884**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Franklin, Stephanie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President and Chief Human Resources Officer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 450.00

Date of Receipt **05 / 06 / 2022**  
**Transaction ID : A2022-932499**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Garcia, Julia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Policy & Alliance Development Manager  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 220.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871953**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	130.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Garcia, Julia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Policy & Alliance Development Manage  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 06 / 2022**  
**Transaction ID : A2022-932551**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Harrington, Jenna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President Patient Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **04 / 08 / 2022**  
**Transaction ID : A2022-676816**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Harrington, Jenna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President Patient Services  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871946**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Harrington, Jenna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President Patient Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932561**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Henry, Danyel, , Ms.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President Policy & Alliance Devel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676846**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**C. Henry, Danyel, , Ms.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President Policy & Alliance Devel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871975**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	110.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:	PAGE 24 OF 70
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Henry, Danyel, , Ms.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President Policy & Alliance Devel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932524**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. Hill, Theophelus, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Medical Affairs Strategy Medical Direc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676808**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Hill, Theophelus, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Medical Affairs Strategy Medical Direc  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871938**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 100.00  
**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Hill, Theophelus, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Medical Affairs Strategy Medical Direc  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932550**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**B. Ingram, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Policy & Alliance Development Director  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676851**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**C. Ingram, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Policy & Alliance Development Director  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871980**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 70  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Ingram, James, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Policy & Alliance Development Director
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2022

**Transaction ID : A2022-932519**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. Jacquis, Michelle, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) State Government Affairs Director
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2022

**Transaction ID : A2022-676818**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. Jacquis, Michelle, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) State Government Affairs Director
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2022

**Transaction ID : A2022-871939**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	130.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Jacquis, Michelle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) State Government Affairs Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932558**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Johnson, Kathleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President Legal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676822**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Johnson, Kathleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President Legal  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871949**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	110.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 70  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Johnson, Kathleen, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Vice President Legal
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2022

**Transaction ID : A2022-932557**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. Kamrath, Kyle, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) State Government Affairs Director
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2022

**Transaction ID : A2022-676811**

Amount of Each Receipt this Period  
30.00

Memo Item

**C. Kamrath, Kyle, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) State Government Affairs Director
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2022

**Transaction ID : A2022-871934**

Amount of Each Receipt this Period  
30.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Kamrath, Kyle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) State Government Affairs Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932569**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**B. KEPLINGER, COURTNEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Policy & Alliance Deve  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676849**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**C. KEPLINGER, COURTNEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Policy & Alliance Deve  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871978**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. KEPLINGER, COURTNEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Policy & Alliance Deve  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 05 / 06 / 2022  
**Transaction ID : A2022-932516**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Kewalramani, Reshma, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) President and Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1344.00

Date of Receipt 04 / 08 / 2022  
**Transaction ID : A2022-676768**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**C. Kewalramani, Reshma, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) President and Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1536.00

Date of Receipt 04 / 22 / 2022  
**Transaction ID : A2022-871895**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	414.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Kewalramani, Reshma, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) President and Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1728.00

Date of Receipt **05 / 06 / 2022**  
**Transaction ID : A2022-932482**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**B. Khetarpal, Rani, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Business Systems Principal Analyst  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **04 / 08 / 2022**  
**Transaction ID : A2022-676804**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Khetarpal, Rani, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Business Systems Principal Analyst  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871932**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	252.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Khetarpal, Rani, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Business Systems Principal Analyst  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932552**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. King, Bryan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Medical Affairs MSL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676866**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. King, Bryan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Medical Affairs MSL  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871995**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	130.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. King, Bryan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Medical Affairs MSL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **05 / 06 / 2022**  
**Transaction ID : A2022-932537**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Kotas, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) State Government Affairs Associate Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **04 / 08 / 2022**  
**Transaction ID : A2022-676831**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Kotas, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) State Government Affairs Associate Dir  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871957**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Kotas, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) State Government Affairs Associate Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **05 / 06 / 2022**  
**Transaction ID : A2022-932540**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Krauss, Kelly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **04 / 08 / 2022**  
**Transaction ID : A2022-676761**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Krauss, Kelly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Marketing  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871886**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	110.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Krauss, Kelly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt **05 / 06 / 2022**  
**Transaction ID : A2022-932477**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Lee, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Patient Support Operat  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **04 / 08 / 2022**  
**Transaction ID : A2022-676788**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Lee, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Patient Support Operat  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871916**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Lee, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Patient Support Operat  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932504**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Liang, Erin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) State Government Affairs Associate Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676825**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Liang, Erin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) State Government Affairs Associate Dir  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871950**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 37 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Liang, Erin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) State Government Affairs Associate Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt **05 / 06 / 2022**  
**Transaction ID : A2022-932555**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Litner, Jessica, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Associate Director Patient Support Ope  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **04 / 08 / 2022**  
**Transaction ID : A2022-676814**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Litner, Jessica, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Associate Director Patient Support Ope  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871941**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Litner, Jessica, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Associate Director Patient Support Ope
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2022

**Transaction ID : A2022-932562**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. Lough, Jean, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Executive Assistant
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2022

**Transaction ID : A2022-676847**

Amount of Each Receipt this Period  
30.00

Memo Item

**C. Lough, Jean, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Executive Assistant
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2022

**Transaction ID : A2022-871976**

Amount of Each Receipt this Period  
30.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Lough, Jean, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Assistant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 05 / 06 / 2022  
**Transaction ID : A2022-932518**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Machado, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) State Government Affairs Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 06 / 2022  
**Transaction ID : A2022-932464**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. MacNaught, Eustacia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President Community Affairs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 08 / 2022  
**Transaction ID : A2022-676806**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	110.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. MacNaught, Eustacia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President Community Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871927**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. MacNaught, Eustacia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President Community Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932553**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Marie, Dawn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Sales  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676862**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Marie, Dawn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871988**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Marie, Dawn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932527**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. McGoohan, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Policy & Alliance Deve  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676845**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	130.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 70
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. McGoohan, Scott, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Director Policy & Alliance Deve
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2022

**Transaction ID : A2022-871974**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. McGoohan, Scott, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Director Policy & Alliance Deve
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2022

**Transaction ID : A2022-932522**

Amount of Each Receipt this Period  
30.00

Memo Item

**C. McNulty, Shannon, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Patient Advocacy Associate Director
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2022

**Transaction ID : A2022-676810**

Amount of Each Receipt this Period  
30.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 70  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. McNulty, Shannon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Patient Advocacy Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 22 / 2022  
**Transaction ID : A2022-871936**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. McNulty, Shannon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Patient Advocacy Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 05 / 06 / 2022  
**Transaction ID : A2022-932548**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Meeks, Tracey, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Patient Advocacy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 08 / 2022  
**Transaction ID : A2022-676809**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 110.00  
**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 70  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Meeks, Tracey, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Patient Advocacy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 22 / 2022  
**Transaction ID : A2022-871935**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Meeks, Tracey, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Patient Advocacy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 06 / 2022  
**Transaction ID : A2022-932549**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Meininger, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President Pipeline Develop  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 08 / 2022  
**Transaction ID : A2022-676843**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 70  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Meininger, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President Pipeline Develop  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871972**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Meininger, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President Pipeline Develop  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932514**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Meltzer, Noel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Medical Science Liaison  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871984**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 130.00  
**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Meltzer, Noel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Medical Science Liaison  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **05 / 06 / 2022**  
**Transaction ID : A2022-932532**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Olson, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Director State Govt Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1344.00

Date of Receipt **04 / 08 / 2022**  
**Transaction ID : A2022-676807**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**C. Olson, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Director State Govt Affairs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1536.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871930**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	414.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 47 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Olson, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Director State Govt Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1728.00

Date of Receipt **05 / 06 / 2022**  
**Transaction ID : A2022-932568**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**B. Parta, Abigail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director State Government Affai  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1344.00

Date of Receipt **04 / 08 / 2022**  
**Transaction ID : A2022-676836**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**C. Parta, Abigail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director State Government Affai  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1536.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871960**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	576.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Parta, Abigail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director State Government Affai  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1728.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932467**  
 Amount of Each Receipt this Period  
 192.00  
 Memo Item

**B. Partridge, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President Investor Relatio  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676784**  
 Amount of Each Receipt this Period  
 80.00  
 Memo Item

**C. Partridge, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President Investor Relatio  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 640.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871909**  
 Amount of Each Receipt this Period  
 80.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	352.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Partridge, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President Investor Relatio  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 720.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932472**  
 Amount of Each Receipt this Period  
 80.00  
 Memo Item

**B. Patel, Dhrupad, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Project Management &  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676812**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Patel, Dhrupad, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Project Management & S  
 Receipt For:  Primary  General  Other (specify) Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871937**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	180.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Patel, Dhrupad, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Project Management & :  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 06 / 2022  
**Transaction ID : A2022-932570**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Perates, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Intellectual Property Associate Parale  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 04 / 08 / 2022  
**Transaction ID : A2022-676819**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Perates, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Intellectual Property Associate Parale  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 22 / 2022  
**Transaction ID : A2022-871940**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	110.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Perates, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Intellectual Property Associate Parale  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932566**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Schumaker, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Director Federal Governmen  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 729.19

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676848**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**C. Schumaker, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Director Federal Government  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871977**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	238.34
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 52 OF 70  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Schumaker, Matthew, , ,**

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Executive Director Federal Government
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
937.53

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2022

**Transaction ID : A2022-932517**

Amount of Each Receipt this Period  
104.17

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Shah, Pooja, , ,**

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Public Affairs Associate Director
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2022

**Transaction ID : A2022-676763**

Amount of Each Receipt this Period  
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Shah, Pooja, , ,**

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Public Affairs Associate Director
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2022

**Transaction ID : A2022-871896**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	204.17
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 53 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Shah, Pooja, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Public Affairs Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932494**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Shraye, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Assistant General Counsel Legal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676791**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Shraye, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Assistant General Counsel Legal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871912**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 54 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Shraye, Lisa, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Assistant General Counsel Legal
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2022

**Transaction ID : A2022-932508**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Smith, Arthur, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Director Patient Support
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2022

**Transaction ID : A2022-676781**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Smith, Arthur, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Director Patient Support
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2022

**Transaction ID : A2022-871899**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 70  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Smith, Arthur, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Director Patient Support
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2022

**Transaction ID : A2022-932487**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. Tandon, Suzanne, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Policy & Alliance Development Senior I
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2022

**Transaction ID : A2022-676793**

Amount of Each Receipt this Period  
30.00

Memo Item

**C. Tandon, Suzanne, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Policy & Alliance Development Senior D
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2022

**Transaction ID : A2022-871920**

Amount of Each Receipt this Period  
30.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	160.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 56 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Tandon, Suzanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Policy & Alliance Development Senior C  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932506**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Tatsis, Ourania, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive VP Chief Regulatory and Qu.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676785**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Tatsis, Ourania, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive VP Chief Regulatory and Qua  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871911**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 57 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Tatsis, Ourania, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive VP Chief Regulatory and Quality  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 450.00

Date of Receipt **05 / 06 / 2022**  
**Transaction ID : A2022-932500**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Tavolaro, Anthony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Trade & Distribution Operations  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 210.00

Date of Receipt **04 / 08 / 2022**  
**Transaction ID : A2022-676861**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Tavolaro, Anthony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Trade & Distribution Operations  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 240.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871991**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	110.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 58 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Tavoraro, Anthony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director Trade & Distribution O  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932526**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Thomas, Vance, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) SVP Pharmaceutical Sciences and Mar  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676758**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Thomas, Vance, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) SVP Pharmaceutical Sciences and Man  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871894**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	230.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 59 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Thomas, Vance, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) SVP Pharmaceutical Sciences and Mar
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2022

**Transaction ID : A2022-932497**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. Valentin, Karla, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Executive Assistant
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2022

**Transaction ID : A2022-676798**

Amount of Each Receipt this Period  
30.00

Memo Item

**C. Valentin, Karla, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Executive Assistant
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2022

**Transaction ID : A2022-871933**

Amount of Each Receipt this Period  
30.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	160.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 60 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Valentin, Karla, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Assistant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt **05 / 06 / 2022**  
**Transaction ID : A2022-932463**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Ventimiglia, Samantha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President U.S. Public Affa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1344.00

Date of Receipt **04 / 08 / 2022**  
**Transaction ID : A2022-676844**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**C. Ventimiglia, Samantha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President U.S. Public Affa  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1536.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871973**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	414.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 70  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Ventimiglia, Samantha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President U.S. Public Affa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1728.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932523**  
 Amount of Each Receipt this Period  
 192.00  
 Memo Item

**B. Wagner, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive VP Chief Financial Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676802**  
 Amount of Each Receipt this Period  
 75.00  
 Memo Item

**C. Wagner, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive VP Chief Financial Officer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871929**  
 Amount of Each Receipt this Period  
 75.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 342.00  
**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 62 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Wagner, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive VP Chief Financial Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **05 / 06 / 2022**  
**Transaction ID : A2022-932547**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. Wotring, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Policy & Alliance Development Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **04 / 08 / 2022**  
**Transaction ID : A2022-676850**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Wotring, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Policy & Alliance Development Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 22 / 2022**  
**Transaction ID : A2022-871979**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	135.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 63 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Wotring, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Policy & Alliance Development Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2022  
**Transaction ID : A2022-932515**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**B. Yohai, Sabrina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President Corporate Legal and Co  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2022  
**Transaction ID : A2022-676775**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Yohai, Sabrina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President Corporate Legal and Cor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2022  
**Transaction ID : A2022-871907**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)	PAGE 64 OF 70
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Yohai, Sabrina, , ,

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Vice President Corporate Legal and Co
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2022

**Transaction ID : A2022-932486**

Amount of Each Receipt this Period  
50.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<b>TOTAL</b> This Period (last page this line number only).....	10221.51



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Bank of America**

Mailing Address PO Box 27025

City Richmond State VA Zip Code 23261

Purpose of Disbursement Bank Service Charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2021  
 Primary  General  
 Other (specify) ▼ Not Applicable

Category/Type: **001**

Date of Disbursement: **04 / 15 / 2022**

FEC Identification Number: **C**

Transaction ID : **B818754**

Amount of Each Disbursement this Period: **59.61**

Memo Item

Full Name (Last, First, Middle Initial)  
**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify)

Category/Type

Date of Disbursement

FEC Identification Number: **C**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

FEC Identification Number: **C**

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<b>59.61</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>59.61</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Alamo PAC**

Full Name (Last, First, Middle Initial)

Mailing Address 919 Congress Ave Suite 1400

City Austin State TX Zip Code 78701

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify)  Not Applicable

State: District:

Date of Disbursement: 05 / 05 / 2022

FEC Identification Number: C00387464

Transaction ID: B817684

Amount of Each Disbursement this Period: 3000.00

Memo Item

**B. Anna Eshoo for Congress**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 636

City Annandale State VA Zip Code 22003

Purpose of Disbursement Contribution

Candidate Name Eshoo, Anna, , ,

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify)

State: CA District: 16

Date of Disbursement: 05 / 05 / 2022

FEC Identification Number: C00258475

Transaction ID: B817682

Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. Friends of John Thune**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 841

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement Contribution

Candidate Name Thune, John, , ,

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify)

State: SD District:

Date of Disbursement: 05 / 05 / 2022

FEC Identification Number: C00409581

Transaction ID: B817685

Amount of Each Disbursement this Period: 2500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6500.00

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Vertex Pharmaceuticals Incorporated Political Action Committee**

Full Name (Last, First, Middle Initial)

### A. Kurt Schrader for Congress

Mailing Address PO Box 3314

City  
Oregon City

State  
OR

Zip Code  
97045

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Schrader, Kurt, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: OR District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	2

FEC Identification Number

C00446906

**Transaction ID : B817681**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. McEachin for Congress

Mailing Address 80 M Street SE

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**McEachin, Donald, A, ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify)

State: VA District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	2

FEC Identification Number

C00610964

**Transaction ID : B817683**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. People for Patty Murray

Mailing Address 1602 Belle View Boulevard #510

City  
Alexandria

State  
VA

Zip Code  
22307

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Murray, Patty, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: WA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	2

FEC Identification Number

C00257642

**Transaction ID : B817686**

Amount of Each Disbursement this Period

1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3000.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Bucshon for Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 250

City Newburgh State IN Zip Code 47629

Purpose of Disbursement Contribution  
Candidate Name **Bucshon, Larry, D, ,**  
Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: IN District: 08

Date of Disbursement: 05 / 18 / 2022

FEC Identification Number: **C00468256**  
Transaction ID : **B818750**  
Amount of Each Disbursement this Period: 2500.00

Category/Type: 011

Memo Item

**B. Carper for Senate**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 2882

City Wilmington State DE Zip Code 19805

Purpose of Disbursement Contribution  
Candidate Name **Carper, Tom, , ,**  
Office Sought:  House  Senate  President  
Disbursement For: 2024  Primary  General  Other (specify) ▼  
State: DE District:

Date of Disbursement: 05 / 18 / 2022

FEC Identification Number: **C00349217**  
Transaction ID : **B818745**  
Amount of Each Disbursement this Period: 2000.00

Category/Type: 011

Memo Item

**C. Collins for Senator**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1096

City Bangor State ME Zip Code 04402

Purpose of Disbursement Contribution  
Candidate Name **Collins, Susan, M, ,**  
Office Sought:  House  Senate  President  
Disbursement For: 2026  Primary  General  Other (specify) ▼  
State: ME District:

Date of Disbursement: 05 / 18 / 2022

FEC Identification Number: **C00314575**  
Transaction ID : **B818748**  
Amount of Each Disbursement this Period: 3000.00

Category/Type: 011

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7500.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Drew Ferguson for Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 71067

City Newnan State GA Zip Code 30271

Purpose of Disbursement Contribution  
Candidate Name Ferguson, Drew, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: GA District: 03

Date of Disbursement: 05 / 18 / 2022

FEC Identification Number: C00607838  
Transaction ID : B818746  
Amount of Each Disbursement this Period: 2500.00

Category/Type: 011

Memo Item

**B. Lisa Blunt Rochester for Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address 415 New Jersey Ave SE #1

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution  
Candidate Name Blunt Rochester, Lisa, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: DE District:

Date of Disbursement: 05 / 18 / 2022

FEC Identification Number: C00590778  
Transaction ID : B818744  
Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

Memo Item

**C. Rodney Davis for Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 344

City Taylorville State IL Zip Code 62568

Purpose of Disbursement Contribution  
Candidate Name Davis, Rodney, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: IL District: 15

Date of Disbursement: 05 / 18 / 2022

FEC Identification Number: C00521948  
Transaction ID : B818749  
Amount of Each Disbursement this Period: 2500.00

Category/Type: 011

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6000.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

**A. Terri Sewell for Congress**

Full Name (Last, First, Middle Initial)  
Terri Sewell for Congress

Mailing Address 499 S Capitol St NW Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

Candidate Name Sewell, Terri, , ,

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: AL District: 07

Date of Disbursement 05 / 18 / 2022

FEC Identification Number C00458976  
Transaction ID : B818742

Amount of Each Disbursement this Period 1000.00

Memo Item

**B. Wenstrup for Congress**

Full Name (Last, First, Middle Initial)  
Wenstrup for Congress

Mailing Address PO Box 9551

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Contribution

Candidate Name Wenstrup, Brad, , ,

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: OH District: 02

Date of Disbursement 05 / 18 / 2022

FEC Identification Number C00497818  
Transaction ID : B818747

Amount of Each Disbursement this Period 2500.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	26500.00