



**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"/>		86004.41
(b) Cash on Hand at Beginning of Reporting Period.....	67758.16	
(c) Total Receipts (from Line 19) .....	29533.18	84327.01
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	97291.34	170331.42
7. Total Disbursements (from Line 31).....	31023.63	104063.71
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	66267.71	66267.71
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	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:  /  /

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	27438.19	57964.06
(ii) Unitemized .....	2094.99	21362.95
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	29533.18	79327.01
(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) .....	29533.18	79327.01
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)).....▶	29533.18	84327.01
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	29533.18	84327.01

**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 .....	23.63	563.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	23.63	563.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25500.00	98000.00
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).....	5500.00	5500.00
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)) ..	31023.63	104063.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31023.63	104063.71

**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) .....	29533.18	79327.01
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	29533.18	79327.01
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	23.63	563.71
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	23.63	563.71

**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 198
	<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 Ch  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2430.63

Date of Receipt **07 / 01 / 2022**  
**Transaction ID : 20220802212513-225**  
 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 Ch  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2430.63

Date of Receipt **07 / 15 / 2022**  
**Transaction ID : 20220802212513-337**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**C. 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 02210-1862  
 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 ▼ 2430.63

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-64**  
 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 7 OF 198
<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. 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 02210-1862
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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 Ch
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2430.63

Date of Receipt  

M M / D D / Y Y Y Y Y
08 / 12 / 2022

**Transaction ID : 2022081610176-58**

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 02210-1862
----------------	-------------	------------------------

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 Ch
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2430.63

Date of Receipt  

M M / D D / Y Y Y Y Y
08 / 26 / 2022

**Transaction ID : 2022083011216-50**

Amount of Each Receipt this Period  

192.00
--------

 Memo Item

**C. 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 02210-1862
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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 ▼  
2430.63

Date of Receipt  

M M / D D / Y Y Y Y Y
09 / 09 / 2022

**Transaction ID : 2022092713178-64**

Amount of Each Receipt this Period  

192.00
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 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 8 OF 198
	<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. 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 02210-1862  
 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 Ch  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2430.63

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-42**  
 Amount of Each Receipt this Period  
 192.00  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-226**  
 Amount of Each Receipt this Period  
 50.00  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-338**  
 Amount of Each Receipt this Period  
 50.00  
 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 11 OF 198
<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 Prope  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt **07 / 15 / 2022**  
**Transaction ID : 20220802212513-339**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Director, Intellectual Prope  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-7**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Director, Intellectual Prope  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-86**  
 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 12 OF 198
	<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. 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 ▼ 3648.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-229**  
 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 ▼ 3648.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-341**  
 Amount of Each Receipt this Period 192.00  
 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 02210-1862  
 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 ▼ 3648.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-35**  
 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 13 OF 198
	<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 02210-1862  
 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 ▼ 3648.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-34**  
 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 02210-1862  
 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 ▼ 3648.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : 2022083011216-29**  
 Amount of Each Receipt this Period 192.00  
 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 02210-1862  
 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 ▼ 3648.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-30**  
 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 14 OF 198
	<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 02210-1862  
 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 ▼ 3648.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-14**  
 Amount of Each Receipt this Period  
 192.00  
 Memo Item

**B. Attias, Philippe, , ,**  
 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, Internal Audit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-231**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**C. Attias, Philippe, , ,**  
 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, Internal Audit  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-343**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	232.00
<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 15 OF 198  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A. Attias, Philippe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Internal Audit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-85**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Attias, Philippe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Internal Audit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-83**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Attias, Philippe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Internal Audit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-81**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 60.00  
**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 16 OF 198
<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. Attias, Philippe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Internal Audit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-82**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**B. Attias, Philippe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Internal Audit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-60**  
 Amount of Each Receipt this Period  
 20.00  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-232**  
 Amount of Each Receipt this Period  
 50.00  
 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 17 OF 198
	<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. 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-344**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-31**  
 Amount of Each Receipt this Period 50.00  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-30**  
 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: PAGE 18 OF 198  
(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. 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-27**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-28**  
 Amount of Each Receipt this Period  
 50.00  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-9**  
 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 19 OF 198  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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, Intellectua  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-233**  
 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  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Assistant General Counsel, Intellectua  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-345**  
 Amount of Each Receipt this Period 30.00  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Assistant General Counsel, Intellectua  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-17**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 90.00  
**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 20 OF 198
<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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Assistant General Counsel, Intellectua  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-7**  
 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 Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt **07 / 01 / 2022**  
**Transaction ID : 20220802212513-234**  
 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  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Patient Advocacy Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt **07 / 15 / 2022**  
**Transaction ID : 20220802212513-346**  
 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 21 OF 198
	<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. 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Patient Advocacy Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-70**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Patient Advocacy Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-68**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Patient Advocacy Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt **08 / 26 / 2022**  
**Transaction ID : 2022083011216-60**  
 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 22 OF 198
	<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	

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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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Patient Advocacy Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-56**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Patient Advocacy Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-33**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**C. Barnes, Dawn Marie, , ,**  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-292**  
 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 23 OF 198
	<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. Barnes, Dawn Marie, , ,**  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-403**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Barnes, Dawn Marie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-106**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Barnes, Dawn Marie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-105**  
 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: PAGE 24 OF 198  
(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. Barnes, Dawn Marie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-103**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Barnes, Dawn Marie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-103**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Barnes, Dawn Marie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-101**  
 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: (check only one)	PAGE 25 OF 198
	<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 Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-235**  
 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 Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-347**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Barnes, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-99**  
 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 27 OF 198
	<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. Barnes, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-96**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Bennett, Marcy, , ,**  
 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) Privacy Operations Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-236**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**C. Bennett, Marcy, , ,**  
 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) Privacy Operations Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-348**  
 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 198  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Bennett, Marcy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Privacy Operations Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 202208117496-13**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**B. Bennett, Marcy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Privacy Operations Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-3**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**C. Bennett, Marcy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Privacy Operations Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-8**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 90.00  
**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 29 OF 198
	<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. Bennett, Marcy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Privacy Operations Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-16**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**B. Bennett, Marcy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Privacy Operations Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-76**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**C. Bleyl, 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) Senior Center Account Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-238**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	80.00
<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 198
	<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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Bleyl, Kristin, , ,

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 Center Account Manager
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-350**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Center Account Manager
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-104**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Center Account Manager
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-104**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<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 198
<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  
Bleyl, Kristin, , ,

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Center Account Manager
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2022

**Transaction ID : 2022083011216-101**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Center Account Manager
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

**Transaction ID : 2022092713178-101**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Center Account Manager
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2022

**Transaction ID : 2022092713216-102**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<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 198
	<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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-239**  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-351**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-4**  
 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 33 OF 198
<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 02210-1862
----------------	-------------	------------------------

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 ▼  
950.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08	/	12	/	2022

**Transaction ID : 2022081610176-1**

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 02210-1862
----------------	-------------	------------------------

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 ▼  
950.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08	/	26	/	2022

**Transaction ID : 2022083011216-20**

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 02210-1862
----------------	-------------	------------------------

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 ▼  
950.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09	/	09	/	2022

**Transaction ID : 2022092713178-22**

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 198
<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 02210-1862  
 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 ▼ 950.00

Date of Receipt 09 / 20 / 2022  
**Transaction ID : 2022092713216-1**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Brown, 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) State Government Affairs Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-240**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Brown, 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) State Government Affairs Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-352**  
 Amount of Each Receipt this Period 20.00  
 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 35 OF 198
	<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. Brown, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-80**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Brown, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-79**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Brown, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-77**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<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 198
	<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. Brown, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 380.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-77**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Brown, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 380.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-53**  
 Amount of Each Receipt this Period 20.00  
 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 ▼ 950.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-241**  
 Amount of Each Receipt this Period 50.00  
 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 198
	<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	<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 ▼ 950.00

Date of Receipt **07 / 15 / 2022**  
**Transaction ID : 20220802212513-353**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-36**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-35**  
 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 38 OF 198
	<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. 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-32**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-32**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-20**  
 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 39 OF 198
	<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. 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-242**  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-354**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-78**  
 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: PAGE 40 OF 198  
(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. 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 02210-1862
----------------	-------------	------------------------

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 ▼  
950.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2022

**Transaction ID : 2022081610176-77**

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 02210-1862
----------------	-------------	------------------------

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 ▼  
950.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

**Transaction ID : 2022083011216-73**

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 02210-1862
----------------	-------------	------------------------

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 ▼  
950.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

**Transaction ID : 2022092713178-72**

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 198
	<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	

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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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-51**  
 Amount of Each Receipt this Period  
 50.00  
 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, Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-244**  
 Amount of Each Receipt this Period  
 30.00  
 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, Marketing  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-356**  
 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 42 OF 198
<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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-16**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-16**  
 Amount of Each Receipt this Period 30.00  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt **08 / 26 / 2022**  
**Transaction ID : 2022083011216-19**  
 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 43 OF 198
	<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	

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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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-23**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-75**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**C. Cirincione, Brenda, , ,**  
 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, Clinical & Quantitativ  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-246**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	80.00
<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 44 OF 198
<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. Cirincione, Brenda, , ,**  
 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, Clinical & Quantitativ  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt **07 / 15 / 2022**  
**Transaction ID : 20220802212513-358**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Cirincione, Brenda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Clinical & Quantitativ  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-25**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Cirincione, Brenda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Clinical & Quantitativ  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-24**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<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 45 OF 198  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Cirincione, Brenda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Clinical & Quantitativ  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : 2022083011216-23**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Cirincione, Brenda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Clinical & Quantitativ  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-13**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Cirincione, Brenda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Clinical & Quantitativ  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-79**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 198
<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

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. 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
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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 ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2022

**Transaction ID : 20220802212513-247**

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 ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2022

**Transaction ID : 20220802212513-359**

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 02210-1862
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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 ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2022

**Transaction ID : 2022081117496-105**

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 47 OF 198
	<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. 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 02210-1862
----------------	-------------	------------------------

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 ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	12	/	2022

**Transaction ID : 2022081610176-107**

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 02210-1862
----------------	-------------	------------------------

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 ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2022

**Transaction ID : 2022083011216-105**

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 02210-1862
----------------	-------------	------------------------

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 ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

**Transaction ID : 2022092713178-102**

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 48 OF 198
<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. 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 02210-1862
----------------	-------------	------------------------

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 ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2022

**Transaction ID : 2022092713216-98**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. Donnelly, 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) Chief of Staff Senior Director
--	---

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
07	/	01	/	2022

**Transaction ID : 20220802212513-249**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. Donnelly, 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) Chief of Staff Senior Director
--	---

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
07	/	15	/	2022

**Transaction ID : 20220802212513-361**

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 49 OF 198
<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. Donnelly, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Chief of Staff Senior Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 202208117496-19**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Donnelly, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Chief of Staff Senior Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-20**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Donnelly, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Chief of Staff Senior Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-18**  
 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 50 OF 198
<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. Donnelly, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Chief of Staff Senior Director  
 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  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-18**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Donnelly, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Chief of Staff Senior Director  
 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  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-71**  
 Amount of Each Receipt this Period  
 50.00  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-251**  
 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 51 OF 198
	<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 ▼ 570.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-363**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-79**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-76**  
 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 52 OF 198
	<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. 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-76**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-73**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-56**  
 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 53 OF 198
	<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	<input type="checkbox"/> 17

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

**A. Ebert Long, 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 ▼ 950.00

Date of Receipt **07 / 01 / 2022**  
**Transaction ID : 20220802212513-252**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Ebert Long, 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 ▼ 950.00

Date of Receipt **07 / 15 / 2022**  
**Transaction ID : 20220802212513-364**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Ebert Long, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 950.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-11**  
 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 198
	<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	<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 Long, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 950.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-13**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Ebert Long, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 950.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : 2022083011216-10**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Ebert Long, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 950.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-9**  
 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: (check only one)	PAGE 55 OF 198
	<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	<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 Long, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 950.00

Date of Receipt **09 / 23 / 2022**  
**Transaction ID : 2022092713216-18**  
 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 ▼ 950.00

Date of Receipt **07 / 01 / 2022**  
**Transaction ID : 20220802212513-255**  
 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 Resources Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt **07 / 15 / 2022**  
**Transaction ID : 20220802212513-367**  
 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: PAGE 56 OF 198  
(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. 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 02210-1862  
 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 950.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-9**  
 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 02210-1862  
 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 950.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-9**  
 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 02210-1862  
 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 950.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : 2022083011216-1**  
 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: (check only one)	PAGE 57 OF 198
	<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. 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 02210-1862  
 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 950.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-11**  
 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 02210-1862  
 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 950.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-7**  
 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 Senior Manager  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 550.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-257**  
 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 58 OF 198
	<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. 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
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022

**Transaction ID : 20220802212513-369**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. 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 02210-1862
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022

**Transaction ID : 2022081117496-67**

Amount of Each Receipt this Period  
30.00

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 02210-1862
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022

**Transaction ID : 2022081610176-67**

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 59 OF 198
	<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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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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Policy & Alliance Development Senior M  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : 2022083011216-58**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Policy & Alliance Development Senior M  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-58**  
 Amount of Each Receipt this Period 30.00  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Policy & Alliance Development Senior M  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-50**  
 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 60 OF 198  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Garry, Thomas, , ,**  
 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 National Account Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-258**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Garry, Thomas, , ,**  
 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 National Account Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-370**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Garry, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Associate National Account Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-111**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 61 OF 198  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A. Garry, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Associate National Account Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-111**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Garry, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Associate National Account Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-108**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Garry, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Associate National Account Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-108**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 60.00  
**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 198
<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. Garry, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Associate National Account Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-109**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Grieco, Susan, , ,**  
 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, Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-259**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Grieco, Susan, , ,**  
 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, Finance  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-371**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<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 198
<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. Grieco, Susan, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	29	/	2022

**Transaction ID : 2022081117496-73**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	12	/	2022

**Transaction ID : 2022081610176-61**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2022

**Transaction ID : 2022083011216-72**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<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 198
<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. Grieco, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-71**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Grieco, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-31**  
 Amount of Each Receipt this Period 20.00  
 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 ▼ 570.00

Date of Receipt  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-260**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	70.00
<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 65 OF 198
<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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Harrington, Jenna, , ,

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 ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2022

**Transaction ID : 20220802212513-372**

Amount of Each Receipt this Period  
30.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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 ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2022

**Transaction ID : 2022081117496-65**

Amount of Each Receipt this Period  
30.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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 ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2022

**Transaction ID : 2022081610176-65**

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 66 OF 198
<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. 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 02210-1862  
 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 ▼ 570.00

Date of Receipt **08 / 26 / 2022**  
**Transaction ID : 2022083011216-66**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt **09 / 09 / 2022**  
**Transaction ID : 2022092713178-66**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt **09 / 23 / 2022**  
**Transaction ID : 2022092713216-29**  
 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 67 OF 198
	<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"/>	<input type="checkbox"/> 17

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

**A. Henry, Danyel, , ,**  
 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 Deve  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-262**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. Henry, Danyel, , ,**  
 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 Deve  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-374**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**C. Henry, Danyel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Policy & Alliance Deve  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-92**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 120.00  
**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 68 OF 198
<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. Henry, Danyel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Policy & Alliance Deve  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-92**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. Henry, Danyel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Policy & Alliance Deve  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : 2022083011216-89**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**C. Henry, Danyel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Policy & Alliance Deve  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-89**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	120.00
<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 69 OF 198
	<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. Henry, Danyel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Policy & Alliance Deve  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-87**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. Hill, Theophilus, , ,**  
 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 ▼ 570.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-263**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Hill, Theophilus, , ,**  
 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 ▼ 570.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-375**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<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 70 OF 198
	<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. Hill, Theophilus, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 202208117496-57**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**B. Hill, Theophilus, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-59**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**C. Hill, Theophilus, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-52**  
 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 71 OF 198
<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. 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-52**  
 Amount of Each Receipt this Period  
 30.00  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-37**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**C. Horgan, Kerry, , ,**  
 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, Clinical Monitoring  
 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  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-265**  
 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 72 OF 198
	<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	

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

**A. Horgan, Kerry, , ,**  
 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, Clinical Monitoring  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 15 / 2022**  
**Transaction ID : 20220802212513-377**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Horgan, Kerry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Clinical Monitoring  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-22**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Horgan, Kerry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Clinical Monitoring  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-19**  
 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 73 OF 198
<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. Horgan, Kerry, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Director, Clinical Monitoring
--	---

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
08	/	26	/	2022

**Transaction ID : 2022083011216-14**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Director, Clinical Monitoring
--	---

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
09	/	09	/	2022

**Transaction ID : 2022092713178-7**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Director, Clinical Monitoring
--	---

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
09	/	23	/	2022

**Transaction ID : 2022092713216-68**

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 74 OF 198
	<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. Ingram II, 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 ▼ 570.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-267**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Ingram II, 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 ▼ 570.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-379**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Ingram II, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 570.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-97**  
 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 75 OF 198
	<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. Ingram II, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 570.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-97**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Ingram II, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 570.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : 2022083011216-94**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Ingram II, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 570.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-94**  
 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 76 OF 198
	<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. Ingram II, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 570.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-92**  
 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 ▼ 950.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-268**  
 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 ▼ 950.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-380**  
 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 77 OF 198
	<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	

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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 02210-1862  
 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 ▼ 950.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-63**  
 Amount of Each Receipt this Period 50.00  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-56**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt **08 / 26 / 2022**  
**Transaction ID : 2022083011216-49**  
 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 78 OF 198
	<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. 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-62**  
 Amount of Each Receipt this Period 50.00  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-41**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Johnson, Daniel, , ,**  
 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, North America New Pro  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-270**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	120.00
<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 79 OF 198
	<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. Johnson, Daniel, , ,**  
 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, North America New Pro  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-382**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Johnson, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, North America New Prc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-26**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Johnson, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, North America New Pro  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-25**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<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 80 OF 198
	<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. Johnson, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, North America New Pro  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-22**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**B. Johnson, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, North America New Prc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-12**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**C. Johnson, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, North America New Pro  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-80**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<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 81 OF 198
	<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. 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-271**  
 Amount of Each Receipt this Period 30.00  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-383**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-72**  
 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 82 OF 198
	<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. 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-71**  
 Amount of Each Receipt this Period 30.00  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-62**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-61**  
 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 83 OF 198
<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. 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 02210-1862  
 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 ▼ 570.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-45**  
 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 ▼ 570.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-273**  
 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 ▼ 570.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-385**  
 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 84 OF 198
	<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. 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 02210-1862  
 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 ▼ 570.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-56**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-52**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : 2022083011216-53**  
 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 85 OF 198
	<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. 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-49**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-49**  
 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 Dev  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-275**  
 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 86 OF 198
	<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. 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 Dev  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-387**  
 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 1050 K St NW Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Policy & Alliance Dev  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-95**  
 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 1050 K St NW Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Policy & Alliance Dev  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-95**  
 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 87 OF 198
	<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. Keplinger, Courtney, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Policy & Alliance Dev  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : 2022083011216-93**  
 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 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Policy & Alliance Dev  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-92**  
 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 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Policy & Alliance Dev  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-89**  
 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 88 OF 198
	<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 ▼ 3648.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-276**  
 Amount of Each Receipt this Period 192.00  
 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 ▼ 3648.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-388**  
 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 02210-1862  
 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 ▼ 3648.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-20**  
 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 89 OF 198
	<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. 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 02210-1862  
 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 ▼ 3648.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-21**  
 Amount of Each Receipt this Period 192.00  
 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 02210-1862  
 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 ▼ 3648.00

Date of Receipt **08 / 26 / 2022**  
**Transaction ID : 2022083011216-17**  
 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 02210-1862  
 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 ▼ 3648.00

Date of Receipt **09 / 09 / 2022**  
**Transaction ID : 2022092713178-19**  
 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 90 OF 198
	<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. 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 02210-1862  
 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 ▼ 3648.00

Date of Receipt **09 / 23 / 2022**  
**Transaction ID : 2022092713216-72**  
 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 ▼ 570.00

Date of Receipt **07 / 01 / 2022**  
**Transaction ID : 20220802212513-277**  
 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 ▼ 570.00

Date of Receipt **07 / 15 / 2022**  
**Transaction ID : 20220802212513-389**  
 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 91 OF 198
	<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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-50**  
 Amount of Each Receipt this Period  
 30.00  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-47**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-46**  
 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 92 OF 198
	<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. 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-42**  
 Amount of Each Receipt this Period  
 30.00  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-11**  
 Amount of Each Receipt this Period  
 30.00  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-278**  
 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 93 OF 198
<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. 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 ▼ 950.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-390**  
 Amount of Each Receipt this Period 50.00  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-112**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-112**  
 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 94 OF 198
<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 02210-1862
----------------	-------------	------------------------

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 ▼  
950.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2022

**Transaction ID : 2022083011216-109**

Amount of Each Receipt this Period  
50.00

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 02210-1862
----------------	-------------	------------------------

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 ▼  
950.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2022

**Transaction ID : 2022092713178-109**

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 02210-1862
----------------	-------------	------------------------

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
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
950.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2022

**Transaction ID : 2022092713216-108**

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 95 OF 198
<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 ▼ 950.00

Date of Receipt **07 / 01 / 2022**  
**Transaction ID : 20220802212513-279**  
 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 ▼ 950.00

Date of Receipt **07 / 15 / 2022**  
**Transaction ID : 20220802212513-391**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-77**  
 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 96 OF 198
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	<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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-75**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-74**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-75**  
 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 97 OF 198
	<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	

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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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-55**  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-280**  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-392**  
 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 98 OF 198
<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 02210-1862
----------------	-------------	------------------------

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 ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	29	/	2022

**Transaction ID : 2022081117496-8**

Amount of Each Receipt this Period  

30.00
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 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 02210-1862
----------------	-------------	------------------------

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 ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	12	/	2022

**Transaction ID : 2022081610176-11**

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 02210-1862
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Director, Marketing
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2022

**Transaction ID : 2022083011216-4**

Amount of Each Receipt this Period  

30.00
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 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 99 OF 198
	<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	

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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 02210-1862  
 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 ▼ 570.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-10**  
 Amount of Each Receipt this Period 30.00  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-65**  
 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) Executive Director, Patient Support  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-281**  
 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 100 OF 198
	<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	

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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) Executive Director, Patient Support  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-393**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Director, Patient Support  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-34**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Director, Patient Support  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-32**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 90.00  
**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 101 OF 198
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
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<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. 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Director, Patient Support  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : 2022083011216-33**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Director, Patient Support  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-29**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Director, Patient Support  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-12**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 90.00  
**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 102 OF 198
	<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, Ju Ho, , ,**  
 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, Health Economics & O  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-264**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Lee, Ju Ho, , ,**  
 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, Health Economics & O  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-376**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Lee, Ju Ho, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Health Economics & O  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-66**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<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 103 OF 198
	<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"/>	<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  
**Lee, Ju Ho, , ,**

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Director, Health Economics & O
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		12		2022

**Transaction ID : 2022081610176-74**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Director, Health Economics & O
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		26		2022

**Transaction ID : 2022083011216-71**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Director, Health Economics & O
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		09		2022

**Transaction ID : 2022092713178-60**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<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 104 OF 198
<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, Ju Ho, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Health Economics & Ot  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-44**  
 Amount of Each Receipt this Period 20.00  
 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 ▼ 570.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-282**  
 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 ▼ 570.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-394**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<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 105 OF 198
	<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	<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. 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-68**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-72**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-63**  
 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 106 OF 198
	<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. 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-55**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-35**  
 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) Director, Patient Support Operations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-283**  
 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 107 OF 198
	<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	

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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) Director, Patient Support Operations
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2022

**Transaction ID : 20220802212513-395**

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 02210-1862
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2022

**Transaction ID : 2022081117496-61**

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 02210-1862
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2022

**Transaction ID : 2022081610176-66**

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 108 OF 198
	<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. 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Director, Patient Support Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt **08 / 26 / 2022**  
**Transaction ID : 2022083011216-65**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Director, Patient Support Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt **09 / 09 / 2022**  
**Transaction ID : 2022092713178-67**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Director, Patient Support Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt **09 / 23 / 2022**  
**Transaction ID : 2022092713216-38**  
 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 109 OF 198
	<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. Liu, Joy, , ,**  
 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 & General Couns  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-284**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Liu, Joy, , ,**  
 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 & General Couns  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-396**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Liu, Joy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President & General Couns  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-1**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<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 110 OF 198
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	<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	

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

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Vice President & General Couns
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2022

**Transaction ID : 2022081610176-6**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Vice President & General Couns
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

**Transaction ID : 2022083011216-3**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Vice President & General Couns
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

**Transaction ID : 2022092713178-3**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<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 111 OF 198
<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. Liu, Joy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President & General Couns  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-63**  
 Amount of Each Receipt this Period 20.00  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-287**  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-398**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	80.00
<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 112 OF 198
	<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. Lough, Jean, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 570.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-93**  
 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 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 570.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-93**  
 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 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 570.00

Date of Receipt **08 / 26 / 2022**  
**Transaction ID : 2022083011216-90**  
 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 113 OF 198
	<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	

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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 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 570.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-90**  
 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 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 570.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-88**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. 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 ▼ 510.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-289**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 90.00  
**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 114 OF 198
	<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. 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 ▼ 510.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-400**  
 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 02210-1862  
 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 ▼ 510.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-42**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. 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 02210-1862  
 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 ▼ 510.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-40**  
 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 115 OF 198  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. 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 02210-1862  
 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 ▼ 510.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : 2022083011216-39**  
 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 02210-1862  
 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 ▼ 510.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-39**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. 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 02210-1862  
 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 ▼ 510.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-17**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 90.00  
**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 116 OF 198
	<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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-290**  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-401**  
 Amount of Each Receipt this Period  
 50.00  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-49**  
 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: PAGE 117 OF 198  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-46**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-47**  
 Amount of Each Receipt this Period 50.00  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-43**  
 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: (check only one)	PAGE 118 OF 198
<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 02210-1862  
 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 ▼ 950.00

Date of Receipt **09 / 23 / 2022**  
**Transaction ID : 2022092713216-10**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Martin, Avery, , ,**  
 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 ▼ 380.00

Date of Receipt **07 / 01 / 2022**  
**Transaction ID : 20220802212513-293**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Martin, Avery, , ,**  
 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 ▼ 380.00

Date of Receipt **07 / 15 / 2022**  
**Transaction ID : 20220802212513-404**  
 Amount of Each Receipt this Period 20.00  
 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 119 OF 198
	<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	

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

**A. Martin, Avery, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-76**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Martin, Avery, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-70**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Martin, Avery, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-59**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<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 120 OF 198
<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. Martin, Avery, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 380.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-74**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Martin, Avery, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 380.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-52**  
 Amount of Each Receipt this Period 20.00  
 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 Dev  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-296**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	70.00
<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 121 OF 198
<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. 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 Dev  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-407**  
 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 1050 K St NW Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Policy & Alliance Dev  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-91**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. McGoohan, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Policy & Alliance Dev  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-91**  
 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 122 OF 198
<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. McGoohan, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Policy & Alliance Dev  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt **08 / 26 / 2022**  
**Transaction ID : 2022083011216-87**  
 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 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Policy & Alliance Dev  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt **09 / 09 / 2022**  
**Transaction ID : 2022092713178-87**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. McGoohan, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Policy & Alliance Dev  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt **09 / 23 / 2022**  
**Transaction ID : 2022092713216-94**  
 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 123 OF 198
	<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. 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-298**  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-409**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-54**  
 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 124 OF 198
	<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. 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-54**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-56**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-53**  
 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 125 OF 198
	<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	

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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 02210-1862
----------------	-------------	------------------------

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 ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2022

**Transaction ID : 2022092713216-48**

Amount of Each Receipt this Period  
30.00

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 ▼  
950.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2022

**Transaction ID : 20220802212513-299**

Amount of Each Receipt this Period  
50.00

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 ▼  
950.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2022

**Transaction ID : 20220802212513-410**

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 126 OF 198
<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. 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 02210-1862  
 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 ▼ 950.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-55**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-55**  
 Amount of Each Receipt this Period 50.00  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt **08 / 26 / 2022**  
**Transaction ID : 2022083011216-55**  
 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 127 OF 198
	<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. 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-54**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-47**  
 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 Develo  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-300**  
 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 128 OF 198
	<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. 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 Develo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-411**  
 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 316 Northern Ave # 318  
 City Boston State MA Zip Code 02210-2316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President, Pipeline Develo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-89**  
 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 316 Northern Ave # 318  
 City Boston State MA Zip Code 02210-2316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President, Pipeline Develo  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-89**  
 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 129 OF 198
	<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. Meininger, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 316 Northern Ave # 318  
 City Boston State MA Zip Code 02210-2316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President, Pipeline Develo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : 2022083011216-86**  
 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 316 Northern Ave # 318  
 City Boston State MA Zip Code 02210-2316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President, Pipeline Develo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-86**  
 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 316 Northern Ave # 318  
 City Boston State MA Zip Code 02210-2316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President, Pipeline Develo  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-86**  
 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 130 OF 198
	<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	

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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 ▼ 560.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-301**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. 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 ▼ 560.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-412**  
 Amount of Each Receipt this Period 30.00  
 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 02210-1862  
 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 ▼ 560.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-101**  
 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 131 OF 198
	<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	

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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 02210-1862  
 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 ▼ 560.00

Date of Receipt  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-101**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. 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 02210-1862  
 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 ▼ 560.00

Date of Receipt  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-98**  
 Amount of Each Receipt this Period 30.00  
 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 02210-1862  
 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 ▼ 560.00

Date of Receipt  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-98**  
 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 132 OF 198
	<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	

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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 02210-1862  
 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 ▼ 560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-106**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**B. Nathanson, 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) Patient Advocacy Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-303**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**C. Nathanson, 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) Patient Advocacy Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-414**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	70.00
<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 133 OF 198
	<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. Nathanson, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-69**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**B. Nathanson, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-73**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**C. Nathanson, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-64**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<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 134 OF 198
	<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. Nathanson, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-59**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Nathanson, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-32**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Negulescu, Paul, , ,**  
 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, Disease Area Ex  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-415**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	55.00
<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 135 OF 198
	<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. Negulescu, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3215 Merryfield Row  
 City San Diego State CA Zip Code 92121-1126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President, Disease Area Ex  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-87**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Negulescu, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3215 Merryfield Row  
 City San Diego State CA Zip Code 92121-1126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President, Disease Area Ex  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-87**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Negulescu, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3215 Merryfield Row  
 City San Diego State CA Zip Code 92121-1126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President, Disease Area Ex  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-84**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<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 136 OF 198
	<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	<input type="checkbox"/> 17

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

**A. Negulescu, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3215 Merryfield Row  
 City San Diego State CA Zip Code 92121-1126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President, Disease Area Ex  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-84**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Negulescu, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3215 Merryfield Row  
 City San Diego State CA Zip Code 92121-1126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President, Disease Area Ex  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-84**  
 Amount of Each Receipt this Period 15.00  
 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 ▼ 3648.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-305**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	222.00
<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 137 OF 198
	<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	

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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 ▼ 3648.00

Date of Receipt **07 / 15 / 2022**  
**Transaction ID : 20220802212513-416**  
 Amount of Each Receipt this Period 192.00  
 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 02210-1862  
 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 ▼ 3648.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-52**  
 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 02210-1862  
 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 ▼ 3648.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-51**  
 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 138 OF 198
	<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	<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 02210-1862  
 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 ▼ 3648.00

Date of Receipt **08 / 26 / 2022**  
**Transaction ID : 2022083011216-57**  
 Amount of Each Receipt this Period 192.00  
 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 02210-1862  
 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 ▼ 3648.00

Date of Receipt **09 / 09 / 2022**  
**Transaction ID : 2022092713178-51**  
 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 02210-1862  
 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 ▼ 3648.00

Date of Receipt **09 / 23 / 2022**  
**Transaction ID : 2022092713216-27**  
 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 139 OF 198
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
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<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. 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 Affa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3648.00

Date of Receipt **07 / 01 / 2022**  
**Transaction ID : 20220802212513-306**  
 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 Affa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3648.00

Date of Receipt **07 / 15 / 2022**  
**Transaction ID : 20220802212513-417**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, State Government Affa  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3648.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-81**  
 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 140 OF 198
	<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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, State Government Affa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3648.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-81**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, State Government Affa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3648.00

Date of Receipt **08 / 26 / 2022**  
**Transaction ID : 2022083011216-79**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, State Government Affa  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3648.00

Date of Receipt **09 / 09 / 2022**  
**Transaction ID : 2022092713178-78**  
 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 141 OF 198
	<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"/>	<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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, State Government Affa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3648.00

Date of Receipt **09 / 23 / 2022**  
**Transaction ID : 2022092713216-57**  
 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 Relati  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1520.00

Date of Receipt **07 / 01 / 2022**  
**Transaction ID : 20220802212513-307**  
 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 Relati  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1520.00

Date of Receipt **07 / 15 / 2022**  
**Transaction ID : 20220802212513-418**  
 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 142 OF 198
	<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. 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President, Investor Relati  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-27**  
 Amount of Each Receipt this Period  
 80.00  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President, Investor Relati  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-28**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President, Investor Relati  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-24**  
 Amount of Each Receipt this Period  
 80.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	240.00
<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 143 OF 198
<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. 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President, Investor Relati  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1520.00

Date of Receipt  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-25**  
 Amount of Each Receipt this Period 80.00  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President, Investor Relati  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1520.00

Date of Receipt  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-64**  
 Amount of Each Receipt this Period 80.00  
 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 &  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-308**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	210.00
<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 144 OF 198
	<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	

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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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-419**  
 Amount of Each Receipt this Period 50.00  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-53**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-53**  
 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 145 OF 198
	<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	

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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 02210-1862  
 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 ▼ 950.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : 2022083011216-54**  
 Amount of Each Receipt this Period 50.00  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-50**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-46**  
 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 146 OF 198
	<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. 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-310**  
 Amount of Each Receipt this Period 30.00  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-421**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-60**  
 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 147 OF 198
<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. 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-60**  
 Amount of Each Receipt this Period  
 30.00  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-51**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-65**  
 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 148 OF 198
	<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. 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-43**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**B. Prescott, Kelly, M, ,**  
 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, Payer Accounts & Fiel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-312**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**C. Prescott, Kelly, M, ,**  
 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, Payer Accounts & Fiel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-423**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.00
<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 149 OF 198
	<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. Prescott, Kelly, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Payer Accounts & Fiel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-103**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Prescott, Kelly, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Payer Accounts & Fiel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-102**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Prescott, Kelly, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Payer Accounts & Fiel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : 2022083011216-100**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<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 150 OF 198
<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. Prescott, Kelly, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Payer Accounts & Fiel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-99**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Prescott, Kelly, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Payer Accounts & Fiel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-97**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Rasmussen, Gregg, , ,**  
 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, National Accounts  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-313**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<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 151 OF 198
	<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. Rasmussen, Gregg, , ,**  
 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, National Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt **07 / 15 / 2022**  
**Transaction ID : 20220802212513-424**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Rasmussen, Gregg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, National Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-102**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Rasmussen, Gregg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, National Accounts  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-103**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<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 152 OF 198
<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. Rasmussen, Gregg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, National Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt **08 / 26 / 2022**  
**Transaction ID : 2022083011216-99**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Rasmussen, Gregg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, National Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt **09 / 09 / 2022**  
**Transaction ID : 2022092713178-100**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Rasmussen, Gregg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, National Accounts  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt **09 / 23 / 2022**  
**Transaction ID : 2022092713216-103**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<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 153 OF 198
	<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. 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 ▼ 1979.23

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-318**  
 Amount of Each Receipt this Period  
 104.17  
 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 Governmer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1979.23

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-429**  
 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 1050 K St NW Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 1979.23

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-94**  
 Amount of Each Receipt this Period  
 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	312.51
<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 154 OF 198
	<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. Schumaker, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1050 K St NW  
Ste 1125

City Washington State DC Zip Code 20001-4954

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 ▼ 1979.23

Date of Receipt **08 / 12 / 2022**

**Transaction ID : 2022081610176-94**

Amount of Each Receipt this Period 104.17

Memo Item

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

Mailing Address 1050 K St NW  
Ste 1125

City Washington State DC Zip Code 20001-4954

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Director, Federal Governmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1979.23

Date of Receipt **08 / 26 / 2022**

**Transaction ID : 2022083011216-92**

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 1050 K St NW  
Ste 1125

City Washington State DC Zip Code 20001-4954

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 ▼ 1979.23

Date of Receipt **09 / 09 / 2022**

**Transaction ID : 2022092713178-93**

Amount of Each Receipt this Period 104.17

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	312.51
<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 155 OF 198
	<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. Schumaker, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1050 K St NW  
Ste 1125

City Washington State DC Zip Code 20001-4954

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 ▼ 1979.23

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-91**

Amount of Each Receipt this Period 104.17

Memo Item

**B. 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 ▼ 950.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-319**

Amount of Each Receipt this Period 50.00

Memo Item

**C. 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 ▼ 950.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-430**

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 156 OF 198
<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. 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 02210-1862  
 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 ▼ 950.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-14**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. 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 02210-1862  
 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 ▼ 950.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-12**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. 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 02210-1862  
 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 ▼ 950.00

Date of Receipt **08 / 26 / 2022**  
**Transaction ID : 2022083011216-11**  
 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 157 OF 198
<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. 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-6**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-81**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Short, Paul, , ,**  
 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, Access Strategy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-321**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	120.00
<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 158 OF 198
	<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	

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

**A. Short, Paul, , ,**

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, Access Strategy
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2022

**Transaction ID : 20220802212513-432**

Amount of Each Receipt this Period  
20.00

Memo Item

**B. Short, Paul, , ,**

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Director, Access Strategy
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2022

**Transaction ID : 2022081117496-39**

Amount of Each Receipt this Period  
20.00

Memo Item

**C. Short, Paul, , ,**

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Director, Access Strategy
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2022

**Transaction ID : 2022081610176-38**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<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 159 OF 198
	<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. Short, Paul, , ,**

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Director, Access Strategy
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-37**

Amount of Each Receipt this Period  
20.00

Memo Item

**B. Short, Paul, , ,**

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Director, Access Strategy
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-37**

Amount of Each Receipt this Period  
20.00

Memo Item

**C. Short, Paul, , ,**

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Senior Director, Access Strategy
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-23**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<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 160 OF 198
	<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. Shroyer, 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 ▼ 950.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-322**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Shroyer, 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 ▼ 950.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-433**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Shroyer, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 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 ▼ 950.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-40**  
 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 161 OF 198
	<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	

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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  
Shroyer, Lisa, , ,

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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 ▼  
950.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2022

**Transaction ID : 2022081610176-37**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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 ▼  
950.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

**Transaction ID : 2022083011216-30**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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 ▼  
950.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2022

**Transaction ID : 2022092713178-31**

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 162 OF 198
<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. 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 02210-1862  
 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 ▼ 950.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-21**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Simard, Christopher, , ,**  
 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 Safety, Medica  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-323**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Simard, Christopher, , ,**  
 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 Safety, Medica  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-434**  
 Amount of Each Receipt this Period 20.00  
 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 163 OF 198
	<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. Simard, Christopher, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Vice President, Patient Safety, Medica
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2022

**Transaction ID : 2022081117496-29**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Vice President, Patient Safety, Medica
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2022

**Transaction ID : 2022081610176-27**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
----------------	-------------	------------------------

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Vice President, Patient Safety, Medica
--	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

**Transaction ID : 2022083011216-26**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<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 164 OF 198
	<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	

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

**A. Simard, Christopher, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Patient Safety, Medica  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-27**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**B. Simard, Christopher, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President, Patient Safety, Medica  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-67**  
 Amount of Each Receipt this Period  
 20.00  
 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 ▼ 1900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-324**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	140.00
<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 165 OF 198
<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 ▼ 1900.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-435**  
 Amount of Each Receipt this Period 100.00  
 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 02210-1862  
 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 ▼ 1900.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-18**  
 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 02210-1862  
 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 ▼ 1900.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-22**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<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 166 OF 198		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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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 02210-1862  
 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 ▼ 1900.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : 2022083011216-16**  
 Amount of Each Receipt this Period 100.00  
 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 02210-1862  
 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 ▼ 1900.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-21**  
 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 02210-1862  
 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 ▼ 1900.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-73**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<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 167 OF 198
	<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 ▼ 570.00

Date of Receipt 07 / 01 / 2022  
**Transaction ID : 20220802212513-326**  
 Amount of Each Receipt this Period 30.00  
 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 ▼ 570.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-437**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-38**  
 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 168 OF 198
	<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	

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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 02210-1862  
 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 ▼ 570.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-39**  
 Amount of Each Receipt this Period 30.00  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : 2022083011216-36**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-38**  
 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 169 OF 198
<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 02210-1862  
 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 ▼ 570.00

Date of Receipt **09 / 23 / 2022**  
**Transaction ID : 2022092713216-24**  
 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 ▼ 950.00

Date of Receipt **07 / 01 / 2022**  
**Transaction ID : 20220802212513-327**  
 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 Qu  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt **07 / 15 / 2022**  
**Transaction ID : 20220802212513-438**  
 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 170 OF 198
	<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	<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 02210-1862  
 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 ▼ 950.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-30**  
 Amount of Each Receipt this Period 50.00  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-26**  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt **08 / 26 / 2022**  
**Transaction ID : 2022083011216-28**  
 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 171 OF 198
<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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-2**  
 Amount of Each Receipt this Period  
 50.00  
 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 02210-1862  
 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 ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-8**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. 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  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-328**  
 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 172 OF 198
	<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. 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  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-439**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Trade & Distribution  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-108**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Trade & Distribution  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-106**  
 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 173 OF 198
	<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. 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Trade & Distribution  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-102**  
 Amount of Each Receipt this Period 30.00  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Trade & Distribution  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-105**  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Director, Trade & Distribution  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-99**  
 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 174 OF 198
	<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	<input type="checkbox"/> 17

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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 Ma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt **07 / 01 / 2022**  
**Transaction ID : 20220802212513-329**  
 Amount of Each Receipt this Period 100.00  
 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 Ma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt **07 / 15 / 2022**  
**Transaction ID : 20220802212513-440**  
 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 02210-1862  
 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 ▼ 1900.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-5**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<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 175 OF 198
	<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	

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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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) SVP, Pharmaceutical Sciences and Ma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-5**  
 Amount of Each Receipt this Period 100.00  
 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) SVP, Pharmaceutical Sciences and Ma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt **08 / 26 / 2022**  
**Transaction ID : 2022083011216-9**  
 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 02210-1862  
 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 ▼ 1900.00

Date of Receipt **09 / 09 / 2022**  
**Transaction ID : 2022092713178-1**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<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 176 OF 198
	<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. 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 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) SVP, Pharmaceutical Sciences and Ma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-83**  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-331**  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-442**  
 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 177 OF 198
<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. 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 02210-1862  
 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 ▼ 570.00

Date of Receipt **07 / 29 / 2022**  
**Transaction ID : 2022081117496-45**  
 Amount of Each Receipt this Period 30.00  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt **08 / 12 / 2022**  
**Transaction ID : 2022081610176-49**  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt **08 / 26 / 2022**  
**Transaction ID : 2022083011216-44**  
 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 178 OF 198
<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. 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-45**  
 Amount of Each Receipt this Period  
 30.00  
 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 02210-1862  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-5**  
 Amount of Each Receipt this Period  
 30.00  
 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 Aff  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3648.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-333**  
 Amount of Each Receipt this Period  
 192.00  
 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 179 OF 198
	<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. 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 Aff  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3648.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-444**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**B. Ventimiglia, Samantha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 Aff  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3648.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-90**  
 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 1050 K St NW Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 Aff  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3648.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-90**  
 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 180 OF 198
	<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. Ventimiglia, Samantha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 Aff  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3648.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : 2022083011216-88**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**B. Ventimiglia, Samantha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 Aff  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3648.00

Date of Receipt 09 / 09 / 2022  
**Transaction ID : 2022092713178-88**  
 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 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 Aff  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3648.00

Date of Receipt 09 / 23 / 2022  
**Transaction ID : 2022092713216-95**  
 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 181 OF 198
	<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. 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 ▼ 1425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-334**  
 Amount of Each Receipt this Period  
 75.00  
 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 ▼ 1425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-445**  
 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 02210-1862  
 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 ▼ 1425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-47**  
 Amount of Each Receipt this Period  
 75.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<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 182 OF 198
<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 02210-1862  
 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 ▼ 1425.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-50**  
 Amount of Each Receipt this Period  
 75.00  
 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 02210-1862  
 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 ▼ 1425.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-48**  
 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 02210-1862  
 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 ▼ 1425.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-48**  
 Amount of Each Receipt this Period  
 75.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<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 183 OF 198
	<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. 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 02210-1862  
 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 1425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-28**  
 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 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-335**  
 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 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : 20220802212513-446**  
 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 184 OF 198
	<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. Wotring, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2022  
**Transaction ID : 2022081117496-96**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**B. Wotring, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2022  
**Transaction ID : 2022081610176-96**  
 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 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : 2022083011216-91**  
 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 185 OF 198
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2022  
**Transaction ID : 2022092713178-91**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**B. Wotring, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 Ste 1125  
 City Washington State DC Zip Code 20001-4954  
 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 ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2022  
**Transaction ID : 2022092713216-90**  
 Amount of Each Receipt this Period  
 30.00  
 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 Co  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2022  
**Transaction ID : 20220802212513-336**  
 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 186 OF 198
	<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. 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 Cc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 07 / 15 / 2022  
**Transaction ID : 20220802212513-447**  
 Amount of Each Receipt this Period 50.00  
 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 02210-1862  
 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 Cc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 07 / 29 / 2022  
**Transaction ID : 2022081117496-10**  
 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 02210-1862  
 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 Cc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 08 / 12 / 2022  
**Transaction ID : 2022081610176-2**  
 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 187 OF 198
	<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	

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

**A. 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 02210-1862  
 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 Cc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt **08 / 26 / 2022**  
**Transaction ID : 2022083011216-5**  
 Amount of Each Receipt this Period 50.00  
 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 02210-1862  
 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 Cc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt **09 / 09 / 2022**  
**Transaction ID : 2022092713178-15**  
 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 02210-1862  
 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 Cc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt **09 / 23 / 2022**  
**Transaction ID : 2022092713216-74**  
 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).....	27438.19

# 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 1501 Pennsylvania Ave. NW

City  
Washington

State  
DC

Zip Code  
20006

Purpose of Disbursement  
Bank Fees

001
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2022

FEC Identification Number

C
Transaction ID : EDA271245E
Amount of Each Disbursement this Period
23.63

Memo Item

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement

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

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

Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

FEC Identification Number

C
Amount of Each Disbursement this Period

Memo Item

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

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

23.63
23.63

**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. Anna Eshoo For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	21	/	2022

Mailing Address 555 Capitol Mall  
Ste 400

City Sacramento State CA Zip Code 95814

FEC Identification Number

**C** C00258475

Purpose of Disbursement  
2022 General

**011**  
Category/  
Type

**Transaction ID : 1A43A503A3I**

Amount of Each Disbursement this Period

1000.00

Candidate Name

**Eshoo, Anna, G., ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

Memo Item

State: CA District: 16

Full Name (Last, First, Middle Initial)

**B. Common Values PAC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	15	/	2022

Mailing Address 901 N Washington St  
Ste 700

City Alexandria State VA Zip Code 22314

FEC Identification Number

**C** C00442368

Purpose of Disbursement  
2022 Contribution

**011**  
Category/  
Type

**Transaction ID : D9DE27E836I**

Amount of Each Disbursement this Period

2500.00

Candidate Name

**Common Values PAC**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) Contribution

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. Davis For Congress/Friends Of Davis**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	15	/	2022

Mailing Address 5956 W Race Ave

City Chicago State IL Zip Code 60644

FEC Identification Number

**C** C00172619

Purpose of Disbursement  
2022 General

**011**  
Category/  
Type

**Transaction ID : 37D4128F55I**

Amount of Each Disbursement this Period

3000.00

Candidate Name

**Davis, Danny, K., ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

Memo Item

State: IL District: 07

**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

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 (Last, First, Middle Initial)

**A. Families For James Lankford**

Mailing Address PO Box 1639

City  
Bethany

State  
OK

Zip Code  
73008-1639

Purpose of Disbursement  
2022 General

011

Category/  
Type

Candidate Name

**Lankford, James, Paul, ,**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2022

Primary  General  
 Other (specify) ▼

State: OK

District:

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2022

FEC Identification Number

C C00466482

**Transaction ID : BB5F59BDA:**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Forward Together PAC**

Mailing Address 1751 Potomac Greens Dr

City  
Alexandria

State  
VA

Zip Code  
22314

Purpose of Disbursement  
2022 Contribution

011

Category/  
Type

Candidate Name

**Forward Together PAC**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2022

Primary  General  
 Other (specify)

State:

District:

Contribution

Date of Disbursement

MM / DD / YYYY  
09 / 21 / 2022

FEC Identification Number

C C00412791

**Transaction ID : 44D8BA0C8B**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Katherine Clark For Congress**

Mailing Address PO Box 159

City  
Belmont

State  
MA

Zip Code  
02478-9998

Purpose of Disbursement  
2022 General

011

Category/  
Type

Candidate Name

**Clark, Katherine, M., ,**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2022

Primary  General  
 Other (specify) ▼

State: MA

District: 05

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2022

FEC Identification Number

C C00541888

**Transaction ID : 83942A947F:**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

9000.00

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)

Form for line numbers 21b-30b with checkboxes, where 23 is checked.

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

Form A: Maggie For NH. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, and Date of Disbursement.

Form B: Massachusetts Democratic State Committee. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, and Date of Disbursement.

Form C: Massachusetts Democratic State Committee. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, and Date of Disbursement.

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**

Full Name (Last, First, Middle Initial)

### A. The Bill Keating Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2022

Mailing Address 31 Hayward St  
Ste 2F

City Franklin State MA Zip Code 02038

Purpose of Disbursement  
2022 General

011
Category/ Type

FEC Identification Number

C	C00479063
---	-----------

Transaction ID : 1AC2486999C

Amount of Each Disbursement this Period

2500.00
---------

Memo Item

Candidate Name

**Keating, William, Richard, ,**

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼

State: MA District: 09

Full Name (Last, First, Middle Initial)

### B.

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

FEC Identification Number

C	
---	--

Amount of Each Disbursement this Period

--

Memo Item

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

### C.

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

FEC Identification Number

C	
---	--

Amount of Each Disbursement this Period

--

Memo Item

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

2500.00
---------

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

25500.00
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**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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. Andrew Fink for State Representative**

Mailing Address 5680 E Bacon

City  
Osseo

State  
MI

Zip Code  
49266

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	2	2

FEC Identification Number

C [REDACTED]

**Transaction ID : 2C7CE5A286**

Amount of Each Disbursement this Period

500.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Aric Nesbitt for State Senate**

Mailing Address PO Box 400

City  
Lawton

State  
MI

Zip Code  
49065

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	2	2

FEC Identification Number

C [REDACTED]

**Transaction ID : 8AF446D83EI**

Amount of Each Disbursement this Period

500.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. CMTE TO ELECT RICK OUTMAN FOR STATE SENATE**

Mailing Address 6481 N. Miles Road

City  
Six Lakes

State  
MI

Zip Code  
48886

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	2	2

FEC Identification Number

C [REDACTED]

**Transaction ID : 73964FBADE**

Amount of Each Disbursement this Period

500.00
--------

Memo Item

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

1500.00
---------

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

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**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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. Committee to Elect Christine Morse for State House**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		21		2022

Mailing Address 5408 Saddle Club Drive

FEC Identification Number

**C** [Redacted]

**Transaction ID : 21C246CC43**

Amount of Each Disbursement this Period

[Redacted] 250.00

City Kalamazoo State MI Zip Code 49009

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Category/Type **011**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**B. COMMITTEE TO ELECT JOSEPH TATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		21		2022

Mailing Address 192 Lenox Street

FEC Identification Number

**C** [Redacted]

**Transaction ID : 6AC4CB5A6F**

Amount of Each Disbursement this Period

[Redacted] 250.00

City Detroit State MI Zip Code 48215

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Category/Type **011**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Karen Whitsett for State Representative**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		21		2022

Mailing Address 11406 Littlefield Street

FEC Identification Number

**C** [Redacted]

**Transaction ID : 5F81B1FBA5**

Amount of Each Disbursement this Period

[Redacted] 250.00

City Detroit State MI Zip Code 48827

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Category/Type **011**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Memo Item

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

[Redacted] 750.00

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

[Redacted]

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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. COMMITTEE TO ELECT LAURIE POHUTSKY**

Mailing Address 37637 File Mile Rd #192

City  
Livonia

State  
MI

Zip Code  
48154

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 21 / 2022

FEC Identification Number

C  
Transaction ID : F8427E69BCI  
Amount of Each Disbursement this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. COMMITTEE TO ELECT MARK TISDEL**

Mailing Address PO Box 80146

City  
Rochester

State  
MI

Zip Code  
48308

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 21 / 2022

FEC Identification Number

C  
Transaction ID : DEF871C3DB  
Amount of Each Disbursement this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Rachel Hood**

Mailing Address PO Box 2405

City  
Grand Rapids

State  
MI

Zip Code  
49501

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 21 / 2022

FEC Identification Number

C  
Transaction ID : AA6D0FA4E  
Amount of Each Disbursement this Period  
250.00

Memo Item

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

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

750.00

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

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

**A. CTE WINNIE BRINKS FOR SENATE**

Full Name (Last, First, Middle Initial)

Mailing Address 2060 Osceola Dr SE

City Grand Rapids State MI Zip Code 49506

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 09 / 21 / 2022

FEC Identification Number C

Transaction ID : BA9C00B6B7

Amount of Each Disbursement this Period 250.00

Memo Item

**B. FRIENDS OF JOHN CHERRY**

Full Name (Last, First, Middle Initial)

Mailing Address 1025 Kensington Avenue

City Flint State MI Zip Code 48503

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 09 / 21 / 2022

FEC Identification Number C

Transaction ID : F1E1607514D

Amount of Each Disbursement this Period 250.00

Memo Item

**C. Friends of Ruth Johnson**

Full Name (Last, First, Middle Initial)

Mailing Address 106 West Allegan, Suite 200

City Lansing State MI Zip Code 48933

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 09 / 21 / 2022

FEC Identification Number C

Transaction ID : E05D272E6E

Amount of Each Disbursement this Period 250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 750.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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. JEFF IRWIN FOR STATE SENATE

Mailing Address PO Box 970581

City  
Ypsilanti

State  
MI

Zip Code  
48197

Purpose of Disbursement  
Nonfederal Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	21	/	2022

FEC Identification Number

**C** [Redacted]

**Transaction ID : 8D47507693C**

Amount of Each Disbursement this Period

[Redacted] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Matt Hall for State Representative

Mailing Address 5455 Gull Rd Suite D #147

City  
Kalamazoo

State  
MI

Zip Code  
49048

Purpose of Disbursement  
Nonfederal Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	21	/	2022

FEC Identification Number

**C** [Redacted]

**Transaction ID : AC0845355FI**

Amount of Each Disbursement this Period

[Redacted] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. MIKE MUELLER FOR STATE REPRESENTATIVE

Mailing Address 6127 Lobdell Rd

City  
Linden

State  
MI

Zip Code  
48451

Purpose of Disbursement  
Nonfederal Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	21	/	2022

FEC Identification Number

**C** [Redacted]

**Transaction ID : 245DC69922**

Amount of Each Disbursement this Period

[Redacted] 250.00

Memo Item

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

[Redacted] 1000.00

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

[Redacted]

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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. PAUL WOJNO FOR STATE SENATE**

Mailing Address 32025 Margaret Court

City  
Warren

State  
MI

Zip Code  
48093

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : 40D4E5E3EC

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. VanderWall Majority Fund**

Mailing Address 106 Allegan St Suite 200

City  
Lansing

State  
MI

Zip Code  
48933

Purpose of Disbursement  
Nonfederal Contribution

011

Category/  
Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : 4755B4E974A

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[REDACTED]

Category/  
Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [REDACTED]

Amount of Each Disbursement this Period

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Memo Item

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

7	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

5	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---