

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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="2014"/>	<input type="text" value="6607.74"/>	<input type="text" value="6607.74"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="15338.60"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="11935.00"/>	<input type="text" value="36290.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="27273.60"/>	<input type="text" value="42897.74"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="11587.58"/>	<input type="text" value="27211.72"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="15686.02"/>	<input type="text" value="15686.02"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Vertex Pharmaceuticals Incorporated Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10779.00	30250.00
(ii) Unitemized	1156.00	6040.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11935.00	36290.00
(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)	11935.00	36290.00
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	0.00
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))..... ▶	11935.00	36290.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	11935.00	36290.00

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	87.58	211.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	87.58	211.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11500.00	27000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	11587.58	27211.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11587.58	27211.72

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	11935.00	36290.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11935.00	36290.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	87.58	211.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	87.58	211.72

**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 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Stuart Arbuckle
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly Pl
 City Cambridge State MA Zip Code 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1920.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2014
Transaction ID : A2014-1108841
 Amount of Each Receipt this Period
 192.00

B. Stuart Arbuckle
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly Pl
 City Cambridge State MA Zip Code 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2112.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : A2014-1108806
 Amount of Each Receipt this Period
 192.00

C. Stuart Arbuckle
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly Pl
 City Cambridge State MA Zip Code 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2304.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : A2014-1149702
 Amount of Each Receipt this Period
 192.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI
Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule:
Transaction ID:

**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 38
	<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. Stuart Arbuckle
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly Pl
 City Cambridge State MA Zip Code 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2496.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : A2014-1343025
 Amount of Each Receipt this Period
 192.00

B. David Bean
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly
 City Cambridge State MA Zip Code 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager
 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
 05 / 16 / 2014
Transaction ID : A2014-1108846
 Amount of Each Receipt this Period
 50.00

C. David Bean
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly
 City Cambridge State MA Zip Code 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager
 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
 05 / 30 / 2014
Transaction ID : A2014-1108811
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	292.00
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 9 OF 38
(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

Full Name (Last, First, Middle Initial)
A. David Bean

Mailing Address 130 Waverly

City State Zip Code
 Cambridge MA 02139

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

Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager

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
 06 / 13 / 2014
Transaction ID : A2014-1149707

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. David Bean

Mailing Address 130 Waverly

City State Zip Code
 Cambridge MA 02139

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

Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : A2014-1343030

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. Virginia Carnahan

Mailing Address 130 Waverly

City State Zip Code
 Cambridge MA 02139

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

Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager

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
 05 / 16 / 2014
Transaction ID : A2014-1108847

Amount of Each Receipt this Period
 50.00

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 10 OF 38
(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. Virginia Carnahan
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly
 City Cambridge State MA Zip Code 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager
 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
 05 / 30 / 2014
Transaction ID : A2014-1108812
 Amount of Each Receipt this Period
 50.00

B. Virginia Carnahan
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly
 City Cambridge State MA Zip Code 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager
 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
 06 / 13 / 2014
Transaction ID : A2014-1149708
 Amount of Each Receipt this Period
 50.00

C. Virginia Carnahan
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly
 City Cambridge State MA Zip Code 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : A2014-1343031
 Amount of Each Receipt this Period
 50.00

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 11 OF 38
(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. Kilpatrick Carroll
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly
 City State Zip Code
 Cambridge MA 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : A2014-1108796
 Amount of Each Receipt this Period
 20.00

B. Kilpatrick Carroll
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly
 City State Zip Code
 Cambridge MA 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : A2014-1149692
 Amount of Each Receipt this Period
 20.00

C. Kilpatrick Carroll
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly
 City State Zip Code
 Cambridge MA 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : A2014-1343015
 Amount of Each Receipt this Period
 20.00

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 12 OF 38
(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

Full Name (Last, First, Middle Initial)
A. Jeffrey Chodakewitz

Mailing Address 130 Waverly St

City State Zip Code
 Cambridge MA 02139

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

Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : A2014-1343043

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. Thomas Connolly

Mailing Address 130 Waverly Pl

City State Zip Code
 Cambridge MA 02139

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

Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager

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
 05 / 16 / 2014
Transaction ID : A2014-1108843

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. Thomas Connolly

Mailing Address 130 Waverly Pl

City State Zip Code
 Cambridge MA 02139

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

Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager

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
 05 / 30 / 2014
Transaction ID : A2014-1108808

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

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 13 OF 38
	<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 Connolly
Full Name (Last, First, Middle Initial)

Mailing Address 130 Waverly Pl

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014

Transaction ID : A2014-1149704

Amount of Each Receipt this Period
50.00

B. Thomas Connolly
Full Name (Last, First, Middle Initial)

Mailing Address 130 Waverly Pl

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : A2014-1343027

Amount of Each Receipt this Period
50.00

C. Kevin Coughlin
Full Name (Last, First, Middle Initial)

Mailing Address 130 Waverly St

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : A2014-1108822

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **125.00**

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 14 OF 38
(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. Kevin Coughlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly St
 City State Zip Code
 Cambridge MA 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : A2014-1149718
 Amount of Each Receipt this Period
 250.00

B. Kevin Coughlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly St
 City State Zip Code
 Cambridge MA 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : A2014-1343041
 Amount of Each Receipt this Period
 25.00

C. Scott Fields
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly
 City State Zip Code
 Cambridge MA 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager
 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
 05 / 16 / 2014
Transaction ID : A2014-1108848
 Amount of Each Receipt this Period
 50.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 38
<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. Scott Fields
Full Name (Last, First, Middle Initial)
Mailing Address 130 Waverly
City Cambridge State MA Zip Code 02139
FEC ID number of contributing federal political committee. **C**
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager
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
05 / 30 / 2014
Transaction ID : A2014-1108813
Amount of Each Receipt this Period
50.00

B. Scott Fields
Full Name (Last, First, Middle Initial)
Mailing Address 130 Waverly
City Cambridge State MA Zip Code 02139
FEC ID number of contributing federal political committee. **C**
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager
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
06 / 13 / 2014
Transaction ID : A2014-1149709
Amount of Each Receipt this Period
50.00

C. Scott Fields
Full Name (Last, First, Middle Initial)
Mailing Address 130 Waverly
City Cambridge State MA Zip Code 02139
FEC ID number of contributing federal political committee. **C**
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014
Transaction ID : A2014-1343032
Amount of Each Receipt this Period
50.00

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 16 OF 38
	<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. Jefferson Henderson
Full Name (Last, First, Middle Initial)
Mailing Address 130 Waverly

City Cambridge	State MA	Zip Code 02139
-------------------	-------------	-------------------

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

Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager
---	-----------------------

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
05	/	16	/	2014

Transaction ID : A2014-1108833

Amount of Each Receipt this Period
50.00

B. Jefferson Henderson
Full Name (Last, First, Middle Initial)
Mailing Address 130 Waverly

City Cambridge	State MA	Zip Code 02139
-------------------	-------------	-------------------

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

Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager
---	-----------------------

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
05	/	30	/	2014

Transaction ID : A2014-1108798

Amount of Each Receipt this Period
50.00

C. Jefferson Henderson
Full Name (Last, First, Middle Initial)
Mailing Address 130 Waverly

City Cambridge	State MA	Zip Code 02139
-------------------	-------------	-------------------

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

Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager
---	-----------------------

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
06	/	13	/	2014

Transaction ID : A2014-1149694

Amount of Each Receipt this Period
50.00

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 17 OF 38
(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

Full Name (Last, First, Middle Initial)
A. Jefferson Henderson
 Mailing Address 130 Waverly
 City State Zip Code
 Cambridge MA 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : A2014-1343017
 Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. Patricia Hunter
 Mailing Address 130 Waverly
 City State Zip Code
 Cambridge MA 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager
 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
 05 / 16 / 2014
Transaction ID : A2014-1108850
 Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. Patricia Hunter
 Mailing Address 130 Waverly
 City State Zip Code
 Cambridge MA 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager
 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
 05 / 30 / 2014
Transaction ID : A2014-1108815
 Amount of Each Receipt this Period
 50.00

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 18 OF 38
(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

Full Name (Last, First, Middle Initial)
A. Patricia Hunter

Mailing Address 130 Waverly

City State Zip Code
 Cambridge MA 02139

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

Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager

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
 06 / 13 / 2014
Transaction ID : A2014-1149711

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. Patricia Hunter

Mailing Address 130 Waverly

City State Zip Code
 Cambridge MA 02139

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

Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : A2014-1343034

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. Dawn Kslmar

Mailing Address 130 Waverly

City State Zip Code
 Cambridge MA 02139

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

Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager

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
 05 / 16 / 2014
Transaction ID : A2014-1108851

Amount of Each Receipt this Period
 50.00

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 19 OF 38
	<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. Dawn Kslmar
Full Name (Last, First, Middle Initial)

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

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
05 / 30 / 2014

Transaction ID : A2014-1108816

Amount of Each Receipt this Period
50.00

B. Dawn Kslmar
Full Name (Last, First, Middle Initial)

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

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
06 / 13 / 2014

Transaction ID : A2014-1149712

Amount of Each Receipt this Period
50.00

C. Dawn Kslmar
Full Name (Last, First, Middle Initial)

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : A2014-1343035

Amount of Each Receipt this Period
50.00

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 20 OF 38
(check only one)

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

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

A. Jim Larsen
Full Name (Last, First, Middle Initial)
Mailing Address 130 Waverly
City Cambridge State MA Zip Code 02139
FEC ID number of contributing federal political committee. **C**
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
05 / 16 / 2014
Transaction ID : A2014-1108835
Amount of Each Receipt this Period
25.00

B. Jim Larsen
Full Name (Last, First, Middle Initial)
Mailing Address 130 Waverly
City Cambridge State MA Zip Code 02139
FEC ID number of contributing federal political committee. **C**
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **275.00**

Date of Receipt
MM / DD / YYYY
05 / 30 / 2014
Transaction ID : A2014-1108800
Amount of Each Receipt this Period
25.00

C. Jim Larsen
Full Name (Last, First, Middle Initial)
Mailing Address 130 Waverly
City Cambridge State MA Zip Code 02139
FEC ID number of contributing federal political committee. **C**
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt
MM / DD / YYYY
06 / 13 / 2014
Transaction ID : A2014-1149696
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... **75.00**
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 21 OF 38
(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. Jim Larsen
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly
 City State Zip Code
 Cambridge MA 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : A2014-1343019
 Amount of Each Receipt this Period
 25.00

B. Jean Lough
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly
 City State Zip Code
 Cambridge MA 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 208.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : A2014-1343020
 Amount of Each Receipt this Period
 16.00

C. Rachel Mack
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly
 City State Zip Code
 Cambridge MA 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2014
Transaction ID : A2014-1108837
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 66.00
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 22 OF 38
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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

Full Name (Last, First, Middle Initial)
A. Rachel Mack

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : A2014-1108802

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Rachel Mack

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014

Transaction ID : A2014-1149698

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Rachel Mack

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : A2014-1343021

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **75.00**

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 23 OF 38
(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

Full Name (Last, First, Middle Initial)
A. Michael Mattoon

Mailing Address 130 Waverly Pl

City State Zip Code
Cambridge MA 02139

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

Name of Employer Occupation
Vertex Pharmaceuticals Incorporated Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2014
Transaction ID : A2014-1108842

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
B. Michael Mattoon

Mailing Address 130 Waverly Pl

City State Zip Code
Cambridge MA 02139

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

Name of Employer Occupation
Vertex Pharmaceuticals Incorporated Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2014
Transaction ID : A2014-1108807

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
C. Michael Mattoon

Mailing Address 130 Waverly Pl

City State Zip Code
Cambridge MA 02139

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

Name of Employer Occupation
Vertex Pharmaceuticals Incorporated Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
MM / DD / YYYY
06 / 13 / 2014
Transaction ID : A2014-1149703

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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 24 OF 38
	<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. Michael Mattoon
Full Name (Last, First, Middle Initial)

Mailing Address 130 Waverly Pl

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **975.00**

Date of Receipt **06 / 27 / 2014**

Transaction ID : A2014-1343026

Amount of Each Receipt this Period **75.00**

B. Margaret McGlynn
Full Name (Last, First, Middle Initial)

Mailing Address 130 Waverly St

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **05 / 30 / 2014**

Transaction ID : A2014-1126592

Amount of Each Receipt this Period **1000.00**

C. Michael Partridge
Full Name (Last, First, Middle Initial)

Mailing Address 130 Waverly Pl

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **05 / 16 / 2014**

Transaction ID : A2014-1108840

Amount of Each Receipt this Period **40.00**

SUBTOTAL of Receipts This Page (optional)..... **1115.00**

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 25 OF 38
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. Michael Partridge

Mailing Address 130 Waverly Pl

City State Zip Code
Cambridge MA 02139

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

Name of Employer Occupation
Vertex Pharmaceuticals Incorporated Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2014
Transaction ID : A2014-1108805

Amount of Each Receipt this Period
40.00

Full Name (Last, First, Middle Initial)
B. Michael Partridge

Mailing Address 130 Waverly Pl

City State Zip Code
Cambridge MA 02139

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

Name of Employer Occupation
Vertex Pharmaceuticals Incorporated Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
MM / DD / YYYY
06 / 13 / 2014
Transaction ID : A2014-1149701

Amount of Each Receipt this Period
40.00

Full Name (Last, First, Middle Initial)
C. Michael Partridge

Mailing Address 130 Waverly Pl

City State Zip Code
Cambridge MA 02139

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

Name of Employer Occupation
Vertex Pharmaceuticals Incorporated Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt
MM / DD / YYYY
06 / 27 / 2014
Transaction ID : A2014-1343024

Amount of Each Receipt this Period
40.00

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: PAGE 26 OF 38
(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

Full Name (Last, First, Middle Initial)
A. Bruce I Sachs

Mailing Address 130 Waverly Pl

City State Zip Code
 Cambridge MA 02139

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

Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 05 / 22 / 2014
Transaction ID : A2014-1098677

Amount of Each Receipt this Period
 2500.00

Full Name (Last, First, Middle Initial)
B. Paul Silva

Mailing Address 130 Waverly

City State Zip Code
 Cambridge MA 02139

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

Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 05 / 16 / 2014
Transaction ID : A2014-1108852

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. Paul Silva

Mailing Address 130 Waverly

City State Zip Code
 Cambridge MA 02139

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

Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 05 / 30 / 2014
Transaction ID : A2014-1108817

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2600.00

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 27 OF 38
(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. Paul Silva
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly
 City State Zip Code
 Cambridge MA 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager
 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
 06 / 13 / 2014
Transaction ID : A2014-1149713
 Amount of Each Receipt this Period
 50.00

B. Paul Silva
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly
 City State Zip Code
 Cambridge MA 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : A2014-1343036
 Amount of Each Receipt this Period
 50.00

C. Arthur Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Waverly
 City State Zip Code
 Cambridge MA 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Manager
 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
 05 / 16 / 2014
Transaction ID : A2014-1108855
 Amount of Each Receipt this Period
 50.00

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 28 OF 38
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)
A. Arthur Smith

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

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
05 / 30 / 2014

Transaction ID : A2014-1108820

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Arthur Smith

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

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
06 / 13 / 2014

Transaction ID : A2014-1149716

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Arthur Smith

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014

Transaction ID : A2014-1343039

Amount of Each Receipt this Period
50.00

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 29 OF 38
	<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

Full Name (Last, First, Middle Initial) A. Ian Smith		Date of Receipt
Mailing Address 130 Waverly Pl		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cambridge	MA	02139
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A2014-1108829
Name of Employer	Occupation	Amount of Each Receipt this Period
Vertex Pharmaceuticals Incorporated	EVP and CFO	<input type="text" value="1500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1500.00"/>	

Full Name (Last, First, Middle Initial) B. Ian Smith		Date of Receipt
Mailing Address 130 Waverly Pl		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cambridge	MA	02139
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A2014-1108794
Name of Employer	Occupation	Amount of Each Receipt this Period
Vertex Pharmaceuticals Incorporated	EVP and CFO	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1650.00"/>	

Full Name (Last, First, Middle Initial) C. Ian Smith		Date of Receipt
Mailing Address 130 Waverly Pl		<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cambridge	MA	02139
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A2014-1149690
Name of Employer	Occupation	Amount of Each Receipt this Period
Vertex Pharmaceuticals Incorporated	EVP and CFO	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1800.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="450.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 30 OF 38
(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. Ian Smith
Full Name (Last, First, Middle Initial)
Mailing Address 130 Waverly Pl
City Cambridge State MA Zip Code 02139
FEC ID number of contributing federal political committee. **C**
Name of Employer Vertex Pharmaceuticals Incorporated Occupation EVP and CFO
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1950.00

Date of Receipt 06 / 27 / 2014
Transaction ID : A2014-1343013
Amount of Each Receipt this Period 150.00

B. Elaine Ullian
Full Name (Last, First, Middle Initial)
Mailing Address 130 Waverly Pl
City Cambridge State MA Zip Code 02139
FEC ID number of contributing federal political committee. **C**
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Boardmember
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2500.00

Date of Receipt 05 / 22 / 2014
Transaction ID : A2014-1098676
Amount of Each Receipt this Period 2500.00

C. Samantha Ventimiglia
Full Name (Last, First, Middle Initial)
Mailing Address 1201 Maryland Ave SW Ste 850
City Washington State DC Zip Code 20024
FEC ID number of contributing federal political committee. **C**
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr Director
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1500.00

Date of Receipt 05 / 16 / 2014
Transaction ID : A2014-1108830
Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional).....▶ 2800.00
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 31 OF 38
	<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. Samantha Ventimiglia
 Full Name (Last, First, Middle Initial)
 Mailing Address 1201 Maryland Ave SW
 Ste 850
 City Washington State DC Zip Code 20024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : A2014-1108795
 Amount of Each Receipt this Period
 150.00

B. Samantha Ventimiglia
 Full Name (Last, First, Middle Initial)
 Mailing Address 1201 Maryland Ave SW
 Ste 850
 City Washington State DC Zip Code 20024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : A2014-1149691
 Amount of Each Receipt this Period
 150.00

C. Samantha Ventimiglia
 Full Name (Last, First, Middle Initial)
 Mailing Address 1201 Maryland Ave SW
 Ste 850
 City Washington State DC Zip Code 20024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014
Transaction ID : A2014-1343014
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
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 32 OF 38
	<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

Full Name (Last, First, Middle Initial) A. Katherine Wilson			Date of Receipt
Mailing Address 130 Waverly St			<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City Cambridge	State MA	Zip Code 02139	Transaction ID : A2014-1108856
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00		
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	Aggregate Year-to-Date ▼ 225.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Katherine Wilson			Date of Receipt
Mailing Address 130 Waverly St			<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City Cambridge	State MA	Zip Code 02139	Transaction ID : A2014-1108821
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00		
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Katherine Wilson			Date of Receipt
Mailing Address 130 Waverly St			<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City Cambridge	State MA	Zip Code 02139	Transaction ID : A2014-1149717
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00		
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	Aggregate Year-to-Date ▼ 275.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 33 OF 38
(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. Katherine Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 130 Waverly St
City Cambridge State MA Zip Code 02139
FEC ID number of contributing federal political committee. **C**
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 27 / 2014
Transaction ID : A2014-1343040
Amount of Each Receipt this Period
25.00

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	25.00
TOTAL This Period (last page this line number only).....▶	10779.00

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address PO Box 27025

City Richmond State VA Zip Code 23261

Purpose of Disbursement
Bank Service Charge

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

/ /

Transaction ID : B500343

Amount of Each Disbursement this Period

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

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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"/> 24	<input type="checkbox"/> 25	<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. Fearless PAC

Mailing Address 1919 14th Street, Suite 707

City Boulder State CO Zip Code 80302

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	21	/	2014

Transaction ID : B499174

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Joe Kennedy for Congress

Mailing Address P.O. Box 590464

City Newton State MA Zip Code 02459

Purpose of Disbursement
Contribution

011

Candidate Name

Joseph P Kennedy III

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	19	/	2014

Transaction ID : B500123

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Richard E Neal for Congress Committee

Mailing Address 76 Magnolia Terrace

City Springfield State MA Zip Code 01108

Purpose of Disbursement
Contribution

011

Candidate Name

Richard E Neal

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	19	/	2014

Transaction ID : B500128

Amount of Each Disbursement this Period

1000.00

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

4000.00

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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Renee Ellmers for Congress

Mailing Address PO Box 99567

City Raleigh State NC Zip Code 27624

Purpose of Disbursement
Contribution

011

Candidate Name

Renee Ellmers

Category/
Type

Office Sought: House
 Senate
 President
State: NC District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2014

Transaction ID : B499176

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. People for Ben

Mailing Address PO Box 31129

City Santa Fe State NM Zip Code 87594

Purpose of Disbursement
Contribution

011

Candidate Name

Ben R Lujan

Category/
Type

Office Sought: House
 Senate
 President
State: NM District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2014

Transaction ID : B500124

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Citizens for Prosperity in America Today PAC

Mailing Address 228 S Washington St Ste 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2014

Transaction ID : B499173

Amount of Each Disbursement this Period

2000.00

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. Marino for Congress

Mailing Address PO Box 653

City Williamsport State PA Zip Code 17703

Purpose of Disbursement
Contribution

011

Candidate Name

Thomas Marino

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	4

Transaction ID : B499177

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. New Democrat Coalition PAC

Mailing Address 700 13th Street NW #600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

011

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	4

Transaction ID : B499178

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Badgerpac

Mailing Address P.O. Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement
Contribution

011

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	4

Transaction ID : B499175

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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"/> 24	<input type="checkbox"/> 25	<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. Common Values PAC

Mailing Address 901 N Washington St Suite 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 19 / 2014

Transaction ID : B500125

Amount of Each Disbursement this Period

500.00

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

500.00

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

11500.00