



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2013"/>	<input type="text" value="17838.46"/>	<input type="text" value="17838.46"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="23035.06"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="34532.00"/>	<input type="text" value="52841.00"/>
(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="57567.06"/>	<input type="text" value="70679.46"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="19815.56"/>	<input type="text" value="32927.96"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="37751.50"/>	<input type="text" value="37751.50"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Vertex Pharmaceuticals Incorporated Political Action Committee**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	29496.00	44658.00
(ii) Unitemized .....	2536.00	5683.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	32032.00	50341.00
(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) .....	32032.00	50341.00
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.....	2500.00	2500.00
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))..... ▶	34532.00	52841.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	34532.00	52841.00

**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 .....	115.56	227.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	115.56	227.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19700.00	32700.00
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)) ..	19815.56	32927.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19815.56	32927.96

**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) .....	32032.00	50341.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	32032.00	50341.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	115.56	227.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	115.56	227.96

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

Form/Schedule: F3XN  
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 7 OF 48
	<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. 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 ▼ **576.00**

Date of Receipt **04 / 19 / 2013**

**Transaction ID : A2013-787812**

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 ▼ **768.00**

Date of Receipt **05 / 03 / 2013**

**Transaction ID : A2013-829387**

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 ▼ **960.00**

Date of Receipt **05 / 17 / 2013**

**Transaction ID : A2013-2782084**

Amount of Each Receipt this Period **192.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>576.00</b>
<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 48
	<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) <b>A. Stuart Arbuckle</b>			Date of Receipt
Mailing Address 130 Waverly Pl			<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : A2013-2922625</b>
Cambridge	MA	02139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="192.00"/>
Name of Employer	Occupation		
Vertex Pharmaceuticals Incorporated	Manager		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1152.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Stuart Arbuckle</b>			Date of Receipt
Mailing Address 130 Waverly Pl			<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : A2013-3059266</b>
Cambridge	MA	02139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="192.00"/>
Name of Employer	Occupation		
Vertex Pharmaceuticals Incorporated	Manager		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1344.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Stuart Arbuckle</b>			Date of Receipt
Mailing Address 130 Waverly Pl			<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : A2013-3239439</b>
Cambridge	MA	02139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="192.00"/>
Name of Employer	Occupation		
Vertex Pharmaceuticals Incorporated	Manager		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1536.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="576.00"/>
<b>TOTAL</b> 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: (check only one)	PAGE 9 OF 48
	<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. 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 ▼ 1728.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 12 / 2013  
**Transaction ID : A2013-3339959**

Amount of Each Receipt this Period  
 192.00

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

Mailing Address 243 Old Pickard Road

City Concord State MA Zip Code 01742

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Member, Board of Directors

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 14 / 2013  
**Transaction ID : A2013-2780035**

Amount of Each Receipt this Period  
 5000.00

**C. Kilpatrick Carroll**  
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 ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2013  
**Transaction ID : A2013-2922609**

Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5212.00
<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 10 OF 48  
(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. Kilpatrick Carroll**  
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 ▼ 240.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 14 / 2013  
**Transaction ID : A2013-3059250**  
Amount of Each Receipt this Period  
20.00

**B. Kilpatrick Carroll**  
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 ▼ 260.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 28 / 2013  
**Transaction ID : A2013-3239424**  
Amount of Each Receipt this Period  
20.00

**C. Kilpatrick Carroll**  
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 ▼ 280.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 12 / 2013  
**Transaction ID : A2013-3339944**  
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 11 OF 48  
(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. 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 **300.00**

Date of Receipt  
**05 / 03 / 2013**  
**Transaction ID : A2013-829390**  
Amount of Each Receipt this Period  
**100.00**

**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 **400.00**

Date of Receipt  
**05 / 17 / 2013**  
**Transaction ID : A2013-2782087**  
Amount of Each Receipt this Period  
**100.00**

**C. 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 **500.00**

Date of Receipt  
**05 / 31 / 2013**  
**Transaction ID : A2013-2922628**  
Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **300.00**  
**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 12 OF 48
	<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 ▼ **600.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 14 / 2013**

**Transaction ID : A2013-3059269**

Amount of Each Receipt this Period  
**100.00**

**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 / 28 / 2013**

**Transaction ID : A2013-3239442**

Amount of Each Receipt this Period  
**100.00**

**C. 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 ▼ **800.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 12 / 2013**

**Transaction ID : A2013-3339962**

Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>300.00</b>
<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 48
<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. Brain Corrigan**  
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 ▼ 210.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 12 / 2013  
**Transaction ID : A2013-333945**  
Amount of Each Receipt this Period  
15.00

**B. Rebecca Dennig**  
Full Name (Last, First, Middle Initial)  
Mailing Address 130 Waverly PI  
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 / 03 / 2013  
**Transaction ID : A2013-829385**  
Amount of Each Receipt this Period  
25.00

**C. Rebecca Dennig**  
Full Name (Last, First, Middle Initial)  
Mailing Address 130 Waverly PI  
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  
M M M / D D D / Y Y Y Y Y Y  
05 / 17 / 2013  
**Transaction ID : A2013-2782082**  
Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 65.00  
**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 14 OF 48
	<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) <b>A. Rebecca Dennig</b>			Date of Receipt
Mailing Address 130 Waverly Pl			<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : A2013-2922623</b>
Cambridge	MA	02139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
Vertex Pharmaceuticals Incorporated	Manager		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Rebecca Dennig</b>			Date of Receipt
Mailing Address 130 Waverly Pl			<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : A2013-3059264</b>
Cambridge	MA	02139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
Vertex Pharmaceuticals Incorporated	Manager		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Rebecca Dennig</b>			Date of Receipt
Mailing Address 130 Waverly Pl			<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : A2013-3239437</b>
Cambridge	MA	02139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
Vertex Pharmaceuticals Incorporated	Manager		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="325.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
<b>TOTAL</b> 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: (check only one)	PAGE 15 OF 48
	<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. Rebecca Dennig**  
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 ▼ **350.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 12 / 2013**

**Transaction ID : A2013-3339957**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 130 Waverly Place

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 / 03 / 2013**

**Transaction ID : A2013-829384**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 130 Waverly Place

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  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 17 / 2013**

**Transaction ID : A2013-2782081**

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: (check only one)	PAGE 16 OF 48
	<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. Michael Glass**  
Full Name (Last, First, Middle Initial)

Mailing Address 130 Waverly Place

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 / 31 / 2013**

**Transaction ID : A2013-2922622**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 130 Waverly Place

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 / 14 / 2013**

**Transaction ID : A2013-3059263**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 130 Waverly Place

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 / 28 / 2013**

**Transaction ID : A2013-3239436**

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 17 OF 48  
(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. Michael Glass**

Mailing Address 130 Waverly Place

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 ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 12 / 2013  
**Transaction ID : A2013-3339956**

Amount of Each Receipt this Period  
 25.00

Full Name (Last, First, Middle Initial)  
**B. 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 ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 19 / 2013  
**Transaction ID : A2013-787798**

Amount of Each Receipt this Period  
 50.00

Full Name (Last, First, Middle Initial)  
**C. 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 ▼  
450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 03 / 2013  
**Transaction ID : A2013-829373**

Amount of Each Receipt this Period  
 50.00

**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: (check only one)	PAGE 18 OF 48
<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. 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	/	17	/	2013

**Transaction ID : A2013-2782070**

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	/	31	/	2013

**Transaction ID : A2013-2922611**

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	/	14	/	2013

**Transaction ID : A2013-3059252**

Amount of Each Receipt this Period  
50.00

<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 19 OF 48
	<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) <b>A. Jefferson Henderson</b>			Date of Receipt
Mailing Address 130 Waverly			<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : A2013-3239426</b>
Cambridge	MA	02139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
Vertex Pharmaceuticals Incorporated	Manager		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="650.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Jefferson Henderson</b>			Date of Receipt
Mailing Address 130 Waverly			<input type="text" value="07"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : A2013-3339946</b>
Cambridge	MA	02139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
Vertex Pharmaceuticals Incorporated	Manager		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="700.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Kenneth L Horton</b>			Date of Receipt
Mailing Address 44 Rae Ave			<input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : A2013-2776832</b>
Needham	VA	02492	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="2500.00"/>
Name of Employer	Occupation		
Vertex Pharmaceuticals Incorporated	Manger		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2500.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="2600.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 48
	<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. Terrence Kearney**  
Full Name (Last, First, Middle Initial)  
Mailing Address 411 Crescent Drive

City Lake Bluff	State IL	Zip Code 60044
--------------------	-------------	-------------------

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

Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Board Member
---	----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	04	/	2013

**Transaction ID : A2013-3229267**

Amount of Each Receipt this Period  
2500.00

**B. Ms. Lisa Kelly**  
Full Name (Last, First, Middle Initial)  
Mailing Address 40 Wyman Rd

City Lexington	State MA	Zip Code 02420
-------------------	-------------	-------------------

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

Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Senior VP
---	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	19	/	2013

**Transaction ID : A2013-787795**

Amount of Each Receipt this Period  
100.00

**C. Ms. Lisa Kelly**  
Full Name (Last, First, Middle Initial)  
Mailing Address 40 Wyman Rd

City Lexington	State MA	Zip Code 02420
-------------------	-------------	-------------------

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

Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Senior VP
---	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2013

**Transaction ID : A2013-829370**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2700.00
<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 48
<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. Ms. Lisa Kelly**  
Full Name (Last, First, Middle Initial)

Mailing Address 40 Wyman Rd

City Lexington State MA Zip Code 02420

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Senior VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
05 / 17 / 2013  
**Transaction ID : A2013-2782067**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 40 Wyman Rd

City Lexington State MA Zip Code 02420

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Senior VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
05 / 31 / 2013  
**Transaction ID : A2013-2922608**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 40 Wyman Rd

City Lexington State MA Zip Code 02420

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Senior VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
06 / 14 / 2013  
**Transaction ID : A2013-3059249**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00

**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 48
	<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. Ms. Lisa Kelly**  
Full Name (Last, First, Middle Initial)

Mailing Address 40 Wyman Rd

City Lexington State MA Zip Code 02420

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Senior VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 28 / 2013  
**Transaction ID : A2013-3239423**

Amount of Each Receipt this Period  
 100.00

**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 ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 03 / 2013  
**Transaction ID : A2013-829376**

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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 17 / 2013  
**Transaction ID : A2013-2782073**

Amount of Each Receipt this Period  
 25.00

**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 23 OF 48  
(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 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 / 31 / 2013  
**Transaction ID : A2013-2922614**  
 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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 14 / 2013  
**Transaction ID : A2013-3059255**  
 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 ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 28 / 2013  
**Transaction ID : A2013-3239429**  
 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: (check only one)	PAGE 24 OF 48
<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. 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 ▼ 350.00

Date of Receipt  
07 / 12 / 2013  
**Transaction ID : A2013-3339949**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 95 Greystone Ln

City Sudbury State MA Zip Code 01776

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 ▼ 2000.00

Date of Receipt  
06 / 19 / 2013  
**Transaction ID : A2013-3229264**

Amount of Each Receipt this Period  
2000.00

**C. Jean Lough**  
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 ▼ 208.00

Date of Receipt  
06 / 28 / 2013  
**Transaction ID : A2013-3239430**

Amount of Each Receipt this Period  
16.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2041.00

**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 48
	<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) <b>A. Jean Lough</b>		Date of Receipt
Mailing Address 130 Waverly		<input type="text" value="07"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City Cambridge	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : A2013-3339950</b>
Name of Employer Vertex Pharmaceuticals Incorporated		Amount of Each Receipt this Period
Occupation Manager		<input type="text" value="16.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="224.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Rachel Mack</b>		Date of Receipt
Mailing Address 130 Waverly		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City Cambridge	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : A2013-2922616</b>
Name of Employer Vertex Pharmaceuticals Incorporated		Amount of Each Receipt this Period
Occupation Manager		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="215.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Rachel Mack</b>		Date of Receipt
Mailing Address 130 Waverly		<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City Cambridge	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : A2013-3059257</b>
Name of Employer Vertex Pharmaceuticals Incorporated		Amount of Each Receipt this Period
Occupation Manager		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="240.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="66.00"/>
<b>TOTAL</b> 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: (check only one)	PAGE 26 OF 48
	<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. Rachel Mack**  
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 ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2013

**Transaction ID : A2013-3239431**

Amount of Each Receipt this Period  
25.00

**B. Rachel Mack**  
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 ▼  
290.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2013

**Transaction ID : A2013-3339951**

Amount of Each Receipt this Period  
25.00

**C. 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 ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	19	/	2013

**Transaction ID : A2013-787813**

Amount of Each Receipt this Period  
75.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<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 27 OF 48  
(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. 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 ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 03 / 2013  
**Transaction ID : A2013-829388**

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 ▼  
 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 17 / 2013  
**Transaction ID : A2013-2782085**

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 ▼  
 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2013  
**Transaction ID : A2013-2922626**

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 28 OF 48
	<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) <b>A. Michael Mattoon</b>			Date of Receipt
Mailing Address 130 Waverly Pl			<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : A2013-3059267</b>
Cambridge	MA	02139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="75.00"/>
Name of Employer	Occupation		
Vertex Pharmaceuticals Incorporated	Manager		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="525.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Michael Mattoon</b>			Date of Receipt
Mailing Address 130 Waverly Pl			<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : A2013-3239440</b>
Cambridge	MA	02139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="75.00"/>
Name of Employer	Occupation		
Vertex Pharmaceuticals Incorporated	Manager		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Michael Mattoon</b>			Date of Receipt
Mailing Address 130 Waverly Pl			<input type="text" value="07"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : A2013-3339960</b>
Cambridge	MA	02139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="75.00"/>
Name of Employer	Occupation		
Vertex Pharmaceuticals Incorporated	Manager		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="675.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="225.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 29 OF 48  
(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. Peter Mueller**

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 ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 14 / 2013  
**Transaction ID : A2013-3059280**

Amount of Each Receipt this Period  
 5000.00

Full Name (Last, First, Middle Initial)  
**B. Mark O'Rouke**

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 ▼  
 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 19 / 2013  
**Transaction ID : A2013-787808**

Amount of Each Receipt this Period  
 60.00

Full Name (Last, First, Middle Initial)  
**c. Mark O'Rouke**

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 ▼  
 540.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 03 / 2013  
**Transaction ID : A2013-829383**

Amount of Each Receipt this Period  
 60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5120.00

**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 30 OF 48
	<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) <b>A. Mark O'Rouke</b>		Date of Receipt MM / DD / YYYY 05 / 17 / 2013 <b>Transaction ID : A2013-2782080</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 600.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B. Mark O'Rouke</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2013 <b>Transaction ID : A2013-2922621</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 60.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	

Full Name (Last, First, Middle Initial) <b>C. Mark O'Rouke</b>		Date of Receipt MM / DD / YYYY 06 / 14 / 2013 <b>Transaction ID : A2013-3059262</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 60.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 48
	<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. Mark O'Rouke**  
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 ▼ **780.00**

Date of Receipt  
**06 / 28 / 2013**  
**Transaction ID : A2013-3239435**

Amount of Each Receipt this Period  
**60.00**

**B. Mark O'Rouke**  
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 ▼ **840.00**

Date of Receipt  
**07 / 12 / 2013**  
**Transaction ID : A2013-3339955**

Amount of Each Receipt this Period  
**60.00**

**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 ▼ **320.00**

Date of Receipt  
**04 / 19 / 2013**  
**Transaction ID : A2013-787811**

Amount of Each Receipt this Period  
**40.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **160.00**

**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 32 OF 48  
(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. 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 ▼  
360.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 05 / 03 / 2013  
**Transaction ID : A2013-829386**

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 ▼  
400.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 05 / 17 / 2013  
**Transaction ID : A2013-2782083**

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 ▼  
440.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 05 / 31 / 2013  
**Transaction ID : A2013-2922624**

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 33 OF 48  
(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. 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  
 M  M /  D  D /  Y  Y  Y  Y  
 06 / 14 / 2013  
**Transaction ID : A2013-3059265**

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 ▼  
520.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 06 / 28 / 2013  
**Transaction ID : A2013-3239438**

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 ▼  
560.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 07 / 12 / 2013  
**Transaction ID : A2013-3339958**

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: (check only one)	PAGE 34 OF 48
	<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. Kimberly Ronan**  
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 ▼ 800.00

Date of Receipt  
04 / 19 / 2013  
**Transaction ID : A2013-787807**  
Amount of Each Receipt this Period  
100.00

**B. Kimberly Ronan**  
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 ▼ 900.00

Date of Receipt  
05 / 03 / 2013  
**Transaction ID : A2013-829382**  
Amount of Each Receipt this Period  
100.00

**C. Kimberly Ronan**  
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 ▼ 1000.00

Date of Receipt  
05 / 17 / 2013  
**Transaction ID : A2013-2782079**  
Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00  
**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 35 OF 48
	<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. Kimberly Ronan**  
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 ▼ 1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2013  
**Transaction ID : A2013-2922620**

Amount of Each Receipt this Period  
 100.00

**B. Kimberly Ronan**  
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 ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 14 / 2013  
**Transaction ID : A2013-3059261**

Amount of Each Receipt this Period  
 100.00

**C. Michelle Rosen**  
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 VP Legal Affairs

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 / 31 / 2013  
**Transaction ID : A2013-3232916**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00

**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 36 OF 48  
(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 29 Wildwood Dr

City Carlisle      State MA      Zip Code 01741

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 ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 19 / 2013  
**Transaction ID : A2013-3229265**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 47 Little Pond Road

City Northborough      State MA      Zip Code 01532

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 ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 14 / 2013  
**Transaction ID : A2013-3059247**

Amount of Each Receipt this Period  
 150.00

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

Mailing Address 47 Little Pond Road

City Northborough      State MA      Zip Code 01532

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 ▼  
 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 28 / 2013  
**Transaction ID : A2013-3239421**

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: PAGE 37 OF 48  
(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 47 Little Pond Road  
City Northborough State MA Zip Code 01532  
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 **600.00**

Date of Receipt **07 / 12 / 2013**  
**Transaction ID : A2013-333942**  
Amount of Each Receipt this Period **150.00**

**B. Christina Stamoulis**  
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 **06 / 28 / 2013**  
**Transaction ID : A2013-3239445**  
Amount of Each Receipt this Period **100.00**

**C. Christina Stamoulis**  
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 **400.00**

Date of Receipt **07 / 12 / 2013**  
**Transaction ID : A2013-333965**  
Amount of Each Receipt this Period **100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **350.00**  
**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 38 OF 48
	<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. Ms. Elaine Ullian**  
Full Name (Last, First, Middle Initial)

Mailing Address 1140 Beacon St  
Apt 202

City Brookline State MA Zip Code 02446

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 / 14 / 2013  
**Transaction ID : A2013-2780465**

Amount of Each Receipt this Period  
2500.00

**B. Ms. 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 ▼  
1200.00

Date of Receipt  
04 / 19 / 2013  
**Transaction ID : A2013-787794**

Amount of Each Receipt this Period  
150.00

**c. Ms. 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 ▼  
1350.00

Date of Receipt  
05 / 03 / 2013  
**Transaction ID : A2013-829369**

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 39 OF 48
	<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. Ms. 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 / 17 / 2013  
**Transaction ID : A2013-2782066**

Amount of Each Receipt this Period  
150.00

**B. Ms. 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  
05 / 31 / 2013  
**Transaction ID : A2013-2922607**

Amount of Each Receipt this Period  
150.00

**C. Ms. 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  
06 / 14 / 2013  
**Transaction ID : A2013-3059248**

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: PAGE 40 OF 48  
(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. Ms. 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  
06 / 28 / 2013  
**Transaction ID : A2013-3239422**

Amount of Each Receipt this Period  
150.00

**B. Ms. 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 ▼  
2100.00

Date of Receipt  
07 / 12 / 2013  
**Transaction ID : A2013-3339943**

Amount of Each Receipt this Period  
150.00

**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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	29496.00



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

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

FOR LINE NUMBER: PAGE 41 OF 48  
(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. Scott Brown for US Senate Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 337 Summer Street  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C** C00467233  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : A2013-9702**  
 Amount of Each Receipt this Period  
 2500.00  
 Refund from Fed. Cmte  
 Original date of contribution: 6/28/2011

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2500.00

**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  
State: VA District:

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

/  /

**Transaction ID : B458568**

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  
State: District:

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  
State: District:

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. Mike Honda for Congress**

Mailing Address 123 E. San Carlos St. #531

City San Jose State CA Zip Code 95112

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mike Honda**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 17

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	1	3

**Transaction ID : B455526**

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

**B. Friends of John Barrow**

Mailing Address PO Box 8166

City Savannah State GA Zip Code 31412

Purpose of Disbursement  
Contribution

011

Candidate Name

**John Barrow**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: GA District: 12

Date of Disbursement

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

**Transaction ID : B451837**

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

**C. Friends of John Barrow**

Mailing Address PO Box 1001

City Augusta State GA Zip Code 30903

Purpose of Disbursement  
Contribution

011

Candidate Name

**John Barrow**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: GA District: 12

Date of Disbursement

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

**Transaction ID : B454227**

Amount of Each Disbursement this Period

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

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

1	5	0	0
---	---	---	---

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

1	5	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. Joe Kennedy for Congress**

Mailing Address P.O. Box 590464

City State Zip Code  
Newton MA 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	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	1	3

**Transaction ID : B454226**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. Together PAC Inc.**

Mailing Address 77 Summer St 10th Floor

City State Zip Code  
Boston MA 02108

Purpose of Disbursement  
Contribution

011

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: MA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	3

**Transaction ID : B456513**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. The Markey Committee**

Mailing Address PO Box 526

City State Zip Code  
Medford MA 02155

Purpose of Disbursement  
Contribution

011

Candidate Name

**Edward J Markey**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼  
Special General

State: MA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	3

**Transaction ID : B455528**

Amount of Each Disbursement this Period

2	6	0	0	0	0	0	0	0	0

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

6	1	0	0	0	0	0	0	0	0

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

6	1	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. The Markey Committee**

Mailing Address PO Box 526

City Medford State MA Zip Code 02155

Purpose of Disbursement Contribution

011

Candidate Name

**Edward J Markey**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: MA District:

Date of Disbursement

MM / DD / YYYY  
06 / 13 / 2013

Transaction ID : B455529

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

**B. Upton for All of Us**

Mailing Address P.O. Box 490

City St. Joseph State MI Zip Code 49085

Purpose of Disbursement Contribution

011

Candidate Name

**Frederick S Upton**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: MI District: 06

Date of Disbursement

MM / DD / YYYY  
06 / 05 / 2013

Transaction ID : B454221

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Next Century Fund**

Mailing Address 116 S Royal Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Contribution

011

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2013  Primary  General  Other (specify) ▼ Not Applicable

State: NC District:

Date of Disbursement

MM / DD / YYYY  
04 / 24 / 2013

Transaction ID : B451838

Amount of Each Disbursement this Period

2000.00

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

5100.00

**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. 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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NC District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	1	3

**Transaction ID : B455078**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. Friends of Kelly Ayotte**

Mailing Address PO Box 937

City Manchester State NH Zip Code 03105

Purpose of Disbursement  
Contribution

011

Candidate Name

**Kelly Ayotte**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	1	3

**Transaction ID : B457397**

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

**C. 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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NM District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	1	3

**Transaction ID : B455527**

Amount of Each Disbursement this Period

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

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

2	5	0	0	0	0	0	0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

2	5	0	0	0	0	0	0	0	0
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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. Citizens for Prosp. 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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	1	3

**Transaction ID : B451836**

Amount of Each Disbursement this Period

1000.00

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: PA District:

Full Name (Last, First, Middle Initial)

**B. Marino for Congress**

Mailing Address PO Box 653

City Williamsport State PA Zip Code 17703

Purpose of Disbursement  
Contribution

011

Candidate Name

**Thomas Marino**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	3

**Transaction ID : B454224**

Amount of Each Disbursement this Period

2500.00

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: PA District: 10

Full Name (Last, First, Middle Initial)

**C. Moderate Democrats PAC**

Mailing Address 303 Massachusetts Avenue NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

011

Candidate Name

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	1	3

**Transaction ID : B455076**

Amount of Each Disbursement this Period

1500.00

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: DC District:

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

5000.00

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

