

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Vertex Pharmaceuticals Incorporated Political Action Committee

ADDRESS (number and street) 1050 K Street NW, Suite 1125 Washington DC 20001 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00468660 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 Year-End Report (YE) (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12), Apr 20 (M4), Jul 20 (M7), Oct 20 (M10), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 07 / 16 / 2013 through 12 / 31 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Samantha Ventimiglia

Signature of Treasurer Samantha Ventimiglia [Electronically Filed] Date 01 / 20 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**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="37751.50"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="19280.00"/>	<input type="text" value="72121.00"/>
(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="57031.50"/>	<input type="text" value="89959.46"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="50423.76"/>	<input type="text" value="83351.72"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="6607.74"/>	<input type="text" value="6607.74"/>
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

FEC Form 3X (Rev. 06/2004)

Page 3

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).....	16916.00	61574.00
(ii) Unitemized .....	2364.00	8047.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	19280.00	69621.00
(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) .....	19280.00	69621.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	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))..... ▶	19280.00	72121.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	19280.00	72121.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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 .....	173.76	401.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	173.76	401.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	50250.00	82950.00
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)) ..	50423.76	83351.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	50423.76	83351.72

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	19280.00	69621.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	19280.00	69621.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	173.76	401.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	173.76	401.72

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Stuart Arbuckle**  
Full Name (Last, First, Middle Initial)

Mailing Address 130 Waverly Pl

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1920.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2013  
**Transaction ID : A2013-3557022**

Amount of Each Receipt this Period  
 192.00

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

Mailing Address 130 Waverly Pl

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2112.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 09 / 2013  
**Transaction ID : A2013-3504986**

Amount of Each Receipt this Period  
 192.00

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

Mailing Address 130 Waverly Pl

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2304.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 23 / 2013  
**Transaction ID : A2013-3699573**

Amount of Each Receipt this Period  
 192.00

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

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

Form/Schedule: SA11AI  
Transaction ID :

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

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 110
	<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 ▼ 2496.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2013  
**Transaction ID : A2013-3852807**

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 ▼ 2688.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2013  
**Transaction ID : A2013-3936102**

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 ▼ 2880.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2013  
**Transaction ID : A2013-4103965**

Amount of Each Receipt this Period  
 192.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 576.00

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



**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 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Stuart Arbuckle</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2013 <b>Transaction ID : A2013-4114234</b>
Mailing Address 130 Waverly Pl		Amount of Each Receipt this Period 192.00
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 ▼ 3072.00	

Full Name (Last, First, Middle Initial) <b>B. Stuart Arbuckle</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2013 <b>Transaction ID : A2013-4157944</b>
Mailing Address 130 Waverly Pl		Amount of Each Receipt this Period 192.00
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 ▼ 3264.00	

Full Name (Last, First, Middle Initial) <b>C. Stuart Arbuckle</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2013 <b>Transaction ID : A2013-4321105</b>
Mailing Address 130 Waverly Pl		Amount of Each Receipt this Period 192.00
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 ▼ 3456.00	

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

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

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

FOR LINE NUMBER: PAGE 10 OF 110  
(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. 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 ▼ 3648.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2013  
**Transaction ID : A2013-4382129**  
 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 ▼ 3840.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2013  
**Transaction ID : A2013-4393486**  
 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 ▼ 4032.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2013  
**Transaction ID : A2013-4528261**  
 Amount of Each Receipt this Period  
 192.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 110
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Quinton Artho</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2013 <b>Transaction ID : A2013-4157963</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 25.00
City Cambridge	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 225.00
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. David Bean</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 09 / 2013 <b>Transaction ID : A2013-3504993</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 50.00
City Cambridge	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. David Bean</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 23 / 2013 <b>Transaction ID : A2013-3699580</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 50.00
City Cambridge	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 300.00
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<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 12 OF 110  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 130 Waverly

City State Zip Code  
 Cambridge MA 02139

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

Name of Employer Occupation  
 Vertex Pharmaceuticals Incorporated Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2013  
**Transaction ID : A2013-3852813**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 130 Waverly

City State Zip Code  
 Cambridge MA 02139

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

Name of Employer Occupation  
 Vertex Pharmaceuticals Incorporated Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2013  
**Transaction ID : A2013-3936108**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 130 Waverly

City State Zip Code  
 Cambridge MA 02139

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

Name of Employer Occupation  
 Vertex Pharmaceuticals Incorporated Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2013  
**Transaction ID : A2013-4103971**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 18 / 2013  
**Transaction ID : A2013-4114240**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2013  
**Transaction ID : A2013-4157950**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 15 / 2013  
**Transaction ID : A2013-4321111**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 110  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

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

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2013  
**Transaction ID : A2013-4382135**  
 Amount of Each Receipt this Period  
 50.00

**B. David Bean**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 Waverly  
 City Cambridge State MA Zip Code 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2013  
**Transaction ID : A2013-4393492**  
 Amount of Each Receipt this Period  
 50.00

**C. David Bean**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 Waverly  
 City Cambridge State MA Zip Code 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2013  
**Transaction ID : A2013-4528267**  
 Amount of Each Receipt this Period  
 50.00

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

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

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

FOR LINE NUMBER: PAGE 15 OF 110  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

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

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 09 / 2013  
**Transaction ID : A2013-3504994**  
 Amount of Each Receipt this Period  
 50.00

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

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 23 / 2013  
**Transaction ID : A2013-3699581**  
 Amount of Each Receipt this Period  
 50.00

**C. Virginia Carnahan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 Waverly  
 City Cambridge State MA Zip Code 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 06 / 2013  
**Transaction ID : A2013-3852814**  
 Amount of Each Receipt this Period  
 50.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 110  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

**A. Virginia Carnahan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 Waverly  
 City Cambridge State MA Zip Code 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2013  
**Transaction ID : A2013-3936109**  
 Amount of Each Receipt this Period  
 50.00

**B. Virginia Carnahan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 Waverly  
 City Cambridge State MA Zip Code 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2013  
**Transaction ID : A2013-4103972**  
 Amount of Each Receipt this Period  
 50.00

**C. Virginia Carnahan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 Waverly  
 City Cambridge State MA Zip Code 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 18 / 2013  
**Transaction ID : A2013-4114241**  
 Amount of Each Receipt this Period  
 50.00

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



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

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

FOR LINE NUMBER: PAGE 17 OF 110  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

**A. Virginia Carnahan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 Waverly  
 City Cambridge State MA Zip Code 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2013  
**Transaction ID : A2013-4157951**  
 Amount of Each Receipt this Period  
 50.00

**B. Virginia Carnahan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 Waverly  
 City Cambridge State MA Zip Code 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 15 / 2013  
**Transaction ID : A2013-4321112**  
 Amount of Each Receipt this Period  
 50.00

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

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2013  
**Transaction ID : A2013-4382136**  
 Amount of Each Receipt this Period  
 50.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 110  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

**A. Virginia Carnahan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 Waverly  
 City Cambridge State MA Zip Code 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2013  
**Transaction ID : A2013-4393493**  
 Amount of Each Receipt this Period  
 50.00

**B. Virginia Carnahan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 Waverly  
 City Cambridge State MA Zip Code 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2013  
**Transaction ID : A2013-4528268**  
 Amount of Each Receipt this Period  
 50.00

**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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2013  
**Transaction ID : A2013-3557007**  
 Amount of Each Receipt this Period  
 20.00

**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 19 OF 110
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) <b>A. Kilpatrick Carroll</b>		Date of Receipt MM / DD / YYYY 08 / 09 / 2013 <b>Transaction ID : A2013-3504971</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 20.00
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 ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>B. Kilpatrick Carroll</b>		Date of Receipt MM / DD / YYYY 08 / 23 / 2013 <b>Transaction ID : A2013-3699558</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 20.00
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 ▼ 340.00	

Full Name (Last, First, Middle Initial) <b>C. Kilpatrick Carroll</b>		Date of Receipt MM / DD / YYYY 09 / 06 / 2013 <b>Transaction ID : A2013-3852792</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 20.00
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 ▼ 360.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 110
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

**A. 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 ▼ **380.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2013

**Transaction ID : A2013-3936087**

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 ▼ **400.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

**Transaction ID : A2013-4103950**

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 ▼ **420.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

**Transaction ID : A2013-4114219**

Amount of Each Receipt this Period  

20.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>60.00</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 21 OF 110
<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 ▼ **440.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2013

**Transaction ID : A2013-4157929**

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 ▼ **460.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

**Transaction ID : A2013-4321094**

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 ▼ **480.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2013

**Transaction ID : A2013-4382118**

Amount of Each Receipt this Period  

20.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>60.00</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 22 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. 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 ▼ 500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 13 / 2013  
**Transaction ID : A2013-4393475**  
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 ▼ 520.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 27 / 2013  
**Transaction ID : A2013-4528250**  
Amount of Each Receipt this Period  
20.00

**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 ▼ 900.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 26 / 2013  
**Transaction ID : A2013-3557025**  
Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 140.00  
**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 23 OF 110
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

**A. Thomas 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 ▼ 1000.00

Date of Receipt 08 / 09 / 2013  
**Transaction ID : A2013-3504989**

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 ▼ 1100.00

Date of Receipt 08 / 23 / 2013  
**Transaction ID : A2013-3699576**

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 ▼ 1200.00

Date of Receipt 09 / 06 / 2013  
**Transaction ID : A2013-3852810**

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 24 OF 110
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

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

**A. Thomas 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 ▼ 1300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2013  
**Transaction ID : A2013-3936105**

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 ▼ 1400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2013  
**Transaction ID : A2013-4103968**

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 ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 18 / 2013  
**Transaction ID : A2013-4114237**

Amount of Each Receipt this Period  
 100.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 110
	<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. 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 ▼ 1600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2013  
**Transaction ID : A2013-4157947**

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 ▼ 1700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 15 / 2013  
**Transaction ID : A2013-4321108**

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 ▼ 1800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2013  
**Transaction ID : A2013-4382132**

Amount of Each Receipt this Period  
 100.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 110
	<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 ▼ 1900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2013  
**Transaction ID : A2013-4393489**

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 ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2013  
**Transaction ID : A2013-4528264**

Amount of Each Receipt this Period  
 100.00

**C. 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 ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2013  
**Transaction ID : A2013-3557008**

Amount of Each Receipt this Period  
 15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 215.00

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

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

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

FOR LINE NUMBER: PAGE 27 OF 110  
(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. Brain Corrigan**

Mailing Address 130 Waverly

City State Zip Code  
Cambridge MA 02139

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

Name of Employer Occupation  
Vertex Pharmaceuticals Incorporated Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 08 / 09 / 2013  
**Transaction ID : A2013-3504972**

Amount of Each Receipt this Period  
15.00

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

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 ▼  
255.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 08 / 23 / 2013  
**Transaction ID : A2013-3699559**

Amount of Each Receipt this Period  
15.00

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

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 ▼  
270.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 09 / 06 / 2013  
**Transaction ID : A2013-3852793**

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 45.00

**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 110
	<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**

Full Name (Last, First, Middle Initial)  
**A. Brain Corrigan**

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 ▼ **285.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 20 / 2013**

**Transaction ID : A2013-3936088**

Amount of Each Receipt this Period  
**15.00**

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

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  
**10 / 04 / 2013**

**Transaction ID : A2013-4103951**

Amount of Each Receipt this Period  
**15.00**

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

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 ▼ **315.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 18 / 2013**

**Transaction ID : A2013-4114220**

Amount of Each Receipt this Period  
**15.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **45.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 110
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Brain Corrigan</b>		Date of Receipt 11 / 01 / 2013 <b>Transaction ID : A2013-4157930</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 15.00
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 ▼ 330.00	

Full Name (Last, First, Middle Initial) <b>B. Brain Corrigan</b>		Date of Receipt 11 / 15 / 2013 <b>Transaction ID : A2013-4321095</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 15.00
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 ▼ 345.00	

Full Name (Last, First, Middle Initial) <b>C. Brain Corrigan</b>		Date of Receipt 11 / 29 / 2013 <b>Transaction ID : A2013-4382119</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 15.00
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 ▼ 360.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. 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 ▼ 375.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 13 / 2013  
**Transaction ID : A2013-4393476**  
Amount of Each Receipt this Period  
15.00

**B. 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 ▼ 390.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 27 / 2013  
**Transaction ID : A2013-4528251**  
Amount of Each Receipt this Period  
15.00

**C. 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 ▼ 375.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 26 / 2013  
**Transaction ID : A2013-3557020**  
Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 55.00  
**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 31 OF 110  
(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. Rebecca Dennig**

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  
 08 / 09 / 2013  
**Transaction ID : A2013-3504984**

Amount of Each Receipt this Period  
 25.00

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

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 ▼  
 425.00

Date of Receipt  
 08 / 23 / 2013  
**Transaction ID : A2013-3699571**

Amount of Each Receipt this Period  
 25.00

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

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  
 09 / 06 / 2013  
**Transaction ID : A2013-3852805**

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 32 OF 110
	<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 ▼ 475.00

Date of Receipt  
09 / 20 / 2013  
**Transaction ID : A2013-3936100**  
Amount of Each Receipt this Period 25.00

**B. 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 ▼ 500.00

Date of Receipt  
10 / 04 / 2013  
**Transaction ID : A2013-4103963**  
Amount of Each Receipt this Period 25.00

**C. 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 ▼ 525.00

Date of Receipt  
10 / 18 / 2013  
**Transaction ID : A2013-4114232**  
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 33 OF 110
	<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. 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 ▼ 550.00

Date of Receipt  
11 / 01 / 2013  
**Transaction ID : A2013-4157942**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
08 / 09 / 2013  
**Transaction ID : A2013-3504995**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
08 / 23 / 2013  
**Transaction ID : A2013-3699582**

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 34 OF 110
	<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**

Full Name (Last, First, Middle Initial)  
**A. Scott Fields**

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  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 06 / 2013**

**Transaction ID : A2013-3852815**

Amount of Each Receipt this Period  
**50.00**

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

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  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 20 / 2013**

**Transaction ID : A2013-3936110**

Amount of Each Receipt this Period  
**50.00**

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

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 ▼ **450.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 04 / 2013**

**Transaction ID : A2013-4103973**

Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **150.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 110
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) <b>A. Scott Fields</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2013 <b>Transaction ID : A2013-4114242</b>
Mailing Address 130 Waverly			Amount of Each Receipt this Period 50.00
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 ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Scott Fields</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2013 <b>Transaction ID : A2013-4157952</b>
Mailing Address 130 Waverly			Amount of Each Receipt this Period 50.00
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 ▼ 550.00		

Full Name (Last, First, Middle Initial) <b>C. Scott Fields</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2013 <b>Transaction ID : A2013-4321113</b>
Mailing Address 130 Waverly			Amount of Each Receipt this Period 50.00
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		

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

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

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

FOR LINE NUMBER: PAGE 36 OF 110  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Full Name (Last, First, Middle Initial)  
**A. Scott Fields**

Mailing Address 130 Waverly

City State Zip Code  
 Cambridge MA 02139

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

Name of Employer Occupation  
 Vertex Pharmaceuticals Incorporated Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2013  
**Transaction ID : A2013-4382137**

Amount of Each Receipt this Period  
 50.00

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

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 ▼  
 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2013  
**Transaction ID : A2013-4393494**

Amount of Each Receipt this Period  
 50.00

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

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 ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2013  
**Transaction ID : A2013-4528269**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Michael 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 ▼ **375.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 26 / 2013**

**Transaction ID : A2013-3557019**

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 ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 09 / 2013**

**Transaction ID : A2013-3504983**

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 ▼ **425.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 23 / 2013**

**Transaction ID : A2013-3699570**

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 38 OF 110  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

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 ▼  
450.00

Date of Receipt  
 /  /   
 09 / 06 / 2013  
**Transaction ID : A2013-3852804**

Amount of Each Receipt this Period  
 25.00

Full Name (Last, First, Middle Initial)  
**B. 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 ▼  
475.00

Date of Receipt  
 /  /   
 09 / 20 / 2013  
**Transaction ID : A2013-3936099**

Amount of Each Receipt this Period  
 25.00

Full Name (Last, First, Middle Initial)  
**C. 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 ▼  
500.00

Date of Receipt  
 /  /   
 10 / 04 / 2013  
**Transaction ID : A2013-4103962**

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 39 OF 110  
(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 ▼  
525.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 18 / 2013  
**Transaction ID : A2013-4114231**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**B. 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 ▼  
550.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 11 / 01 / 2013  
**Transaction ID : A2013-4157941**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**C. 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 ▼  
575.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 11 / 15 / 2013  
**Transaction ID : A2013-4321103**

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 40 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) <b>A. Michael Glass</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 29 / 2013 <b>Transaction ID : A2013-4382127</b>
Mailing Address 130 Waverly Place			Amount of Each Receipt this Period 25.00
City Cambridge	State MA	Zip Code 02139	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 600.00
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. Michael Glass</b>			Date of Receipt M M / D D / Y Y Y Y 12 / 13 / 2013 <b>Transaction ID : A2013-4393484</b>
Mailing Address 130 Waverly Place			Amount of Each Receipt this Period 25.00
City Cambridge	State MA	Zip Code 02139	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 625.00
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 ▼		
		625.00	

Full Name (Last, First, Middle Initial) <b>C. Michael Glass</b>			Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2013 <b>Transaction ID : A2013-4528259</b>
Mailing Address 130 Waverly Place			Amount of Each Receipt this Period 75.00
City Cambridge	State MA	Zip Code 02139	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 650.00
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 ▼		
		650.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) <b>A. Jefferson Henderson</b>			Date of Receipt
Mailing Address 130 Waverly			<input type="text" value="07"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : A2013-3557009</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="750.00"/>		
<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="08"/> / <input type="text" value="09"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : A2013-3504973</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="800.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Jefferson Henderson</b>			Date of Receipt
Mailing Address 130 Waverly			<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : A2013-3699560</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="850.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
<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 42 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. 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 ▼ **900.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	06	/	2013

**Transaction ID : A2013-3852794**

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 ▼ **950.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2013

**Transaction ID : A2013-3936089**

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 ▼ **1000.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2013

**Transaction ID : A2013-4103952**

Amount of Each Receipt this Period  

50.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>150.00</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 43 OF 110
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

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

**A. 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 ▼  
1050.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2013

**Transaction ID : A2013-4114221**

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 ▼  
1100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2013

**Transaction ID : A2013-4157931**

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 ▼  
1150.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2013

**Transaction ID : A2013-4321096**

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 44 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. Jefferson Henderson**  
Full Name (Last, First, Middle Initial)

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2013  
**Transaction ID : A2013-4382120**

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 ▼ 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2013  
**Transaction ID : A2013-4393477**

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 ▼ 1300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2013  
**Transaction ID : A2013-4528252**

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 45 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. Ms. Danyel Henry**  
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 Gov't Affairs

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  
12 / 16 / 2013  
**Transaction ID : A2013-4551689**

Amount of Each Receipt this Period  
600.00

**B. Patricia Hunter**  
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  
08 / 09 / 2013  
**Transaction ID : A2013-3504997**

Amount of Each Receipt this Period  
50.00

**C. Patricia Hunter**  
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  
08 / 23 / 2013  
**Transaction ID : A2013-3699584**

Amount of Each Receipt this Period  
50.00

**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 46 OF 110  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Patricia Hunter**  
 Mailing Address 130 Waverly  
 City State Zip Code  
 Cambridge MA 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Vertex Pharmaceuticals Incorporated Manager  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2013  
**Transaction ID : A2013-3852817**  
 Amount of Each Receipt this Period  
 50.00

Full Name (Last, First, Middle Initial)  
**B. Patricia Hunter**  
 Mailing Address 130 Waverly  
 City State Zip Code  
 Cambridge MA 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Vertex Pharmaceuticals Incorporated Manager  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2013  
**Transaction ID : A2013-3936112**  
 Amount of Each Receipt this Period  
 50.00

Full Name (Last, First, Middle Initial)  
**C. Patricia Hunter**  
 Mailing Address 130 Waverly  
 City State Zip Code  
 Cambridge MA 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Vertex Pharmaceuticals Incorporated Manager  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2013  
**Transaction ID : A2013-4103975**  
 Amount of Each Receipt this Period  
 50.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) <b>A. Patricia Hunter</b>			Date of Receipt
Mailing Address 130 Waverly			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City Cambridge	State MA	Zip Code 02139	<b>Transaction ID : A2013-4114244</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period		<input type="text" value="50.00"/>
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Patricia Hunter</b>			Date of Receipt
Mailing Address 130 Waverly			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City Cambridge	State MA	Zip Code 02139	<b>Transaction ID : A2013-4157954</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period		<input type="text" value="50.00"/>
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="550.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Patricia Hunter</b>			Date of Receipt
Mailing Address 130 Waverly			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City Cambridge	State MA	Zip Code 02139	<b>Transaction ID : A2013-4321115</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period		<input type="text" value="50.00"/>
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
<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 48 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Patricia Hunter**  
Full Name (Last, First, Middle Initial)  
Mailing Address 130 Waverly

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2013

**Transaction ID : A2013-4382139**

Amount of Each Receipt this Period  

50.00
-------

**B. Patricia Hunter**  
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 ▼ **700.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2013

**Transaction ID : A2013-4393496**

Amount of Each Receipt this Period  

50.00
-------

**C. Patricia Hunter**  
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 ▼ **750.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

**Transaction ID : A2013-4528271**

Amount of Each Receipt this Period  

50.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>150.00</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 49 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial)  
**A. Craig Jerman**

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  
**10 / 18 / 2013**

**Transaction ID : A2013-4114223**

Amount of Each Receipt this Period  
**10.00**

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

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  
**11 / 01 / 2013**

**Transaction ID : A2013-4157933**

Amount of Each Receipt this Period  
**10.00**

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

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 ▼ **230.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 15 / 2013**

**Transaction ID : A2013-4321097**

Amount of Each Receipt this Period  
**10.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **30.00**

**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 50 OF 110
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) <b>A. Craig Jerman</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 29 / 2013 <b>Transaction ID : A2013-4382121</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 10.00
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 ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>B. Craig Jerman</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2013 <b>Transaction ID : A2013-4393478</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 10.00
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 ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Craig Jerman</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2013 <b>Transaction ID : A2013-4528253</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 10.00
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 ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<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 51 OF 110  
(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. Dawn Kslmar**

Mailing Address 130 Waverly

City State Zip Code  
 Cambridge MA 02139

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

Name of Employer Occupation  
 Vertex Pharmaceuticals Incorporated Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 09 / 2013  
**Transaction ID : A2013-3504998**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 130 Waverly

City State Zip Code  
 Cambridge MA 02139

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

Name of Employer Occupation  
 Vertex Pharmaceuticals Incorporated Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 23 / 2013  
**Transaction ID : A2013-3699585**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 130 Waverly

City State Zip Code  
 Cambridge MA 02139

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

Name of Employer Occupation  
 Vertex Pharmaceuticals Incorporated Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2013  
**Transaction ID : A2013-3852818**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 110
	<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. Dawn Kslmar</b>		Date of Receipt MM / DD / YYYY 09 / 20 / 2013 <b>Transaction ID : A2013-3936113</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 50.00
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 ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Dawn Kslmar</b>		Date of Receipt MM / DD / YYYY 10 / 04 / 2013 <b>Transaction ID : A2013-4103976</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 50.00
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 ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C. Dawn Kslmar</b>		Date of Receipt MM / DD / YYYY 10 / 18 / 2013 <b>Transaction ID : A2013-4114245</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 50.00
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 ▼ 500.00	

<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: PAGE 53 OF 110  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

**A. Dawn Kslmar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 Waverly  
 City Cambridge State MA Zip Code 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00  
 Date of Receipt 11 / 01 / 2013  
**Transaction ID : A2013-4157955**  
 Amount of Each Receipt this Period 50.00

**B. Dawn Kslmar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 Waverly  
 City Cambridge State MA Zip Code 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00  
 Date of Receipt 11 / 15 / 2013  
**Transaction ID : A2013-4321116**  
 Amount of Each Receipt this Period 50.00

**C. Dawn Kslmar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 Waverly  
 City Cambridge State MA Zip Code 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00  
 Date of Receipt 11 / 29 / 2013  
**Transaction ID : A2013-4382140**  
 Amount of Each Receipt this Period 50.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**12 / 13 / 2013**

**Transaction ID : A2013-4393497**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**12 / 27 / 2013**

**Transaction ID : A2013-4528272**

Amount of Each Receipt this Period  
**50.00**

**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 ▼ **375.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**07 / 26 / 2013**

**Transaction ID : A2013-3557012**

Amount of Each Receipt this Period  
**25.00**

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

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

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

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

FOR LINE NUMBER: PAGE 55 OF 110  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

**A. Jim Larsen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 Waverly  
 City State Zip Code  
 Cambridge MA 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Vertex Pharmaceuticals Incorporated Manager  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 09 / 2013  
**Transaction ID : A2013-3504976**  
 Amount of Each Receipt this Period  
 25.00

**B. Jim Larsen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 Waverly  
 City State Zip Code  
 Cambridge MA 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Vertex Pharmaceuticals Incorporated Manager  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 23 / 2013  
**Transaction ID : A2013-3699563**  
 Amount of Each Receipt this Period  
 25.00

**C. Jim Larsen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 Waverly  
 City State Zip Code  
 Cambridge MA 02139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Vertex Pharmaceuticals Incorporated Manager  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2013  
**Transaction ID : A2013-3852797**  
 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 56 OF 110
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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

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

Full Name (Last, First, Middle Initial) <b>A. Jim Larsen</b>		Date of Receipt MM / DD / YYYY 09 / 20 / 2013 <b>Transaction ID : A2013-3936092</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 25.00
City Cambridge	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 475.00	
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Jim Larsen</b>		Date of Receipt MM / DD / YYYY 10 / 04 / 2013 <b>Transaction ID : A2013-4103955</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 25.00
City Cambridge	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 500.00	
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Jim Larsen</b>		Date of Receipt MM / DD / YYYY 10 / 18 / 2013 <b>Transaction ID : A2013-4114224</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 25.00
City Cambridge	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 525.00	
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 110
	<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. Jim Larsen</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 01 / 2013 <b>Transaction ID : A2013-4157934</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 25.00
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 ▼ 550.00	

Full Name (Last, First, Middle Initial) <b>B. Jim Larsen</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2013 <b>Transaction ID : A2013-4321098</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 25.00
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 ▼ 575.00	

Full Name (Last, First, Middle Initial) <b>C. Jim Larsen</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 29 / 2013 <b>Transaction ID : A2013-4382122</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 25.00
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	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 58 OF 110
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Jim Larsen</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2013 <b>Transaction ID : A2013-4393479</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 25.00
City Cambridge	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. C	Name of Employer Vertex Pharmaceuticals Incorporated	
Occupation Manager		Aggregate Year-to-Date ▼ 625.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Jim Larsen</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2013 <b>Transaction ID : A2013-4528254</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 25.00
City Cambridge	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. C	Name of Employer Vertex Pharmaceuticals Incorporated	
Occupation Manager		Aggregate Year-to-Date ▼ 650.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Jean Lough</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 26 / 2013 <b>Transaction ID : A2013-3557013</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 16.00
City Cambridge	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. C	Name of Employer Vertex Pharmaceuticals Incorporated	
Occupation Manager		Aggregate Year-to-Date ▼ 240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	66.00
<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 59 OF 110  
(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. Jean Lough**  
 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 ▼  
 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 09 / 2013  
**Transaction ID : A2013-3504977**  
 Amount of Each Receipt this Period  
 16.00

Full Name (Last, First, Middle Initial)  
**B. Jean Lough**  
 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 ▼  
 272.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 23 / 2013  
**Transaction ID : A2013-3699564**  
 Amount of Each Receipt this Period  
 16.00

Full Name (Last, First, Middle Initial)  
**C. Jean Lough**  
 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 ▼  
 288.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2013  
**Transaction ID : A2013-3852798**  
 Amount of Each Receipt this Period  
 16.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 48.00  
**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 60 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)  
**A. Jean Lough**

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 ▼ **304.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 20 / 2013**

**Transaction ID : A2013-3936093**

Amount of Each Receipt this Period  
**16.00**

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

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 ▼ **320.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 04 / 2013**

**Transaction ID : A2013-4103956**

Amount of Each Receipt this Period  
**16.00**

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

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 ▼ **336.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 18 / 2013**

**Transaction ID : A2013-4114225**

Amount of Each Receipt this Period  
**16.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>48.00</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 61 OF 110
	<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 M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2013 <b>Transaction ID : A2013-4157935</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 16.00
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 ▼ 352.00	

Full Name (Last, First, Middle Initial) <b>B. Jean Lough</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2013 <b>Transaction ID : A2013-4321099</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 16.00
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 ▼ 368.00	

Full Name (Last, First, Middle Initial) <b>C. Jean Lough</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 29 / 2013 <b>Transaction ID : A2013-4382123</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 16.00
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 ▼ 384.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	48.00
<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 62 OF 110  
(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. Jean Lough**

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  
 12 / 13 / 2013  
**Transaction ID : A2013-4393480**

Amount of Each Receipt this Period  
 16.00

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

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 ▼  
 416.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2013  
**Transaction ID : A2013-4528255**

Amount of Each Receipt this Period  
 16.00

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

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 ▼  
 315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2013  
**Transaction ID : A2013-3557014**

Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 57.00

**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 63 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 09 / 2013**

**Transaction ID : A2013-3504978**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 23 / 2013**

**Transaction ID : A2013-3699565**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 06 / 2013**

**Transaction ID : A2013-3852799**

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 64 OF 110
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **415.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 20 / 2013**

**Transaction ID : A2013-3936094**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 04 / 2013**

**Transaction ID : A2013-4103957**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **465.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 18 / 2013**

**Transaction ID : A2013-4114226**

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 65 OF 110
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

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

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **490.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 01 / 2013**

**Transaction ID : A2013-4157936**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **515.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 15 / 2013**

**Transaction ID : A2013-4321100**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 29 / 2013**

**Transaction ID : A2013-4382124**

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 66 OF 110
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) <b>A. Rachel Mack</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 13 / 2013 <b>Transaction ID : A2013-4393481</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 25.00
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 ▼ 565.00	

Full Name (Last, First, Middle Initial) <b>B. Rachel Mack</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 27 / 2013 <b>Transaction ID : A2013-4528256</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 25.00
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 ▼ 590.00	

Full Name (Last, First, Middle Initial) <b>C. Michael Mattoon</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2013 <b>Transaction ID : A2013-3557023</b>
Mailing Address 130 Waverly Pl		Amount of Each Receipt this Period 75.00
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 ▼ 750.00	

<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: (check only one)	PAGE 67 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

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

Mailing Address 130 Waverly Pl

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt **08 / 09 / 2013**

**Transaction ID : A2013-3504987**

Amount of Each Receipt this Period **75.00**

**B. 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 ▼ **900.00**

Date of Receipt **08 / 23 / 2013**

**Transaction ID : A2013-3699574**

Amount of Each Receipt this Period **75.00**

**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 ▼ **975.00**

Date of Receipt **09 / 06 / 2013**

**Transaction ID : A2013-3852808**

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 68 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. 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 ▼ 1050.00

Date of Receipt  
09 / 20 / 2013  
**Transaction ID : A2013-3936103**

Amount of Each Receipt this Period  
75.00

**B. 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 ▼ 1125.00

Date of Receipt  
10 / 04 / 2013  
**Transaction ID : A2013-4103966**

Amount of Each Receipt this Period  
75.00

**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 ▼ 1200.00

Date of Receipt  
10 / 18 / 2013  
**Transaction ID : A2013-4114235**

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: PAGE 69 OF 110  
(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 ▼  
 1275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2013  
**Transaction ID : A2013-4157945**

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 ▼  
 1350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 15 / 2013  
**Transaction ID : A2013-4321106**

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 ▼  
 1425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2013  
**Transaction ID : A2013-4382130**

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 70 OF 110
	<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 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 ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2013  
**Transaction ID : A2013-4393487**

Amount of Each Receipt this Period  
 75.00

**B. 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 ▼ 1575.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2013  
**Transaction ID : A2013-4528262**

Amount of Each Receipt this Period  
 75.00

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

Mailing Address 130 Waverly St

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2013  
**Transaction ID : A2013-3866732**

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1150.00

**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 71 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Juli Mellard**  
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 ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 18 / 2013  
**Transaction ID : A2013-4114246**

Amount of Each Receipt this Period  
 25.00

**B. Juli Mellard**  
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 ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2013  
**Transaction ID : A2013-4157956**

Amount of Each Receipt this Period  
 25.00

**C. Mark O'Rourke**  
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  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2013  
**Transaction ID : A2013-3557018**

Amount of Each Receipt this Period  
 60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 110.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

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 ▼ **960.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 09 / 2013**

**Transaction ID : A2013-3504982**

Amount of Each Receipt this Period  
**60.00**

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

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 ▼ **1020.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 23 / 2013**

**Transaction ID : A2013-3699569**

Amount of Each Receipt this Period  
**60.00**

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

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 ▼ **1080.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 06 / 2013**

**Transaction ID : A2013-3852803**

Amount of Each Receipt this Period  
**60.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>180.00</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 73 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. 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 ▼ 1140.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2013  
**Transaction ID : A2013-3936098**

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 ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2013  
**Transaction ID : A2013-4103961**

Amount of Each Receipt this Period  
 60.00

**C. 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 ▼ 1260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 18 / 2013  
**Transaction ID : A2013-4114230**

Amount of Each Receipt this Period  
 60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 180.00

**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 74 OF 110
	<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 ▼ 1320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2013  
**Transaction ID : A2013-4157940**

Amount of Each Receipt this Period  
 60.00

**B. Michael Partridge**  
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 ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2013  
**Transaction ID : A2013-3557021**

Amount of Each Receipt this Period  
 40.00

**C. Michael Partridge**  
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 ▼ 640.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 09 / 2013  
**Transaction ID : A2013-3504985**

Amount of Each Receipt this Period  
 40.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 140.00

**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 75 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. Michael 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 ▼ **680.00**

Date of Receipt  
 /  /   
**Transaction ID : A2013-3699572**

Amount of Each Receipt this Period

**B. 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 ▼ **720.00**

Date of Receipt  
 /  /   
**Transaction ID : A2013-3852806**

Amount of Each Receipt this Period

**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 ▼ **760.00**

Date of Receipt  
 /  /   
**Transaction ID : A2013-3936101**

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="120.00"/>
<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 76 OF 110
	<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. 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 ▼ **800.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 04 / 2013**

**Transaction ID : A2013-4103964**

Amount of Each Receipt this Period  
**40.00**

**B. 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 ▼ **840.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 18 / 2013**

**Transaction ID : A2013-4114233**

Amount of Each Receipt this Period  
**40.00**

**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 ▼ **880.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 01 / 2013**

**Transaction ID : A2013-4157943**

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 77 OF 110  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

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 ▼  
 920.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 15 / 2013  
**Transaction ID : A2013-4321104**

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 ▼  
 960.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2013  
**Transaction ID : A2013-4382128**

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 ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2013  
**Transaction ID : A2013-4393485**

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 78 OF 110  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

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 ▼  
 1040.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2013  
**Transaction ID : A2013-4528260**

Amount of Each Receipt this Period  
 40.00

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

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 ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 09 / 2013  
**Transaction ID : A2013-3504981**

Amount of Each Receipt this Period  
 15.00

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

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 ▼  
 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 23 / 2013  
**Transaction ID : A2013-3699568**

Amount of Each Receipt this Period  
 15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70.00

**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 79 OF 110  
(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. Timothy Powell**

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 ▼  
 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2013  
**Transaction ID : A2013-3852802**

Amount of Each Receipt this Period  
 15.00

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

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 ▼  
 246.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2013  
**Transaction ID : A2013-3936097**

Amount of Each Receipt this Period  
 15.00

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

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 ▼  
 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2013  
**Transaction ID : A2013-4103960**

Amount of Each Receipt this Period  
 15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 45.00

**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 80 OF 110  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Full Name (Last, First, Middle Initial)  
**A. Timothy Powell**

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 ▼  
 276.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 18 / 2013  
**Transaction ID : A2013-4114229**

Amount of Each Receipt this Period  
 15.00

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

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 ▼  
 291.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2013  
**Transaction ID : A2013-4157939**

Amount of Each Receipt this Period  
 15.00

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

Mailing Address 130 Waverly

City State Zip Code  
 Cambridge MA 02139

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

Name of Employer Occupation  
 Vertex Pharmaceuticals Incorporated Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 09 / 2013  
**Transaction ID : A2013-3505000**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.00

**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 81 OF 110  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Paul Silva**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 Waverly  
 City 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  
 08 / 23 / 2013  
**Transaction ID : A2013-3699587**  
 Amount of Each Receipt this Period  
 50.00

**B. Paul Silva**  
 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  
 09 / 06 / 2013  
**Transaction ID : A2013-3852820**  
 Amount of Each Receipt this Period  
 50.00

**C. Paul Silva**  
 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  
 09 / 20 / 2013  
**Transaction ID : A2013-3936115**  
 Amount of Each Receipt this Period  
 50.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 110
	<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. Paul Silva**  
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 ▼ 450.00

Date of Receipt  
10 / 04 / 2013  
**Transaction ID : A2013-4103978**  
Amount of Each Receipt this Period  
50.00

**B. Paul Silva**  
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  
10 / 18 / 2013  
**Transaction ID : A2013-4114247**  
Amount of Each Receipt this Period  
50.00

**C. Paul Silva**  
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  
11 / 01 / 2013  
**Transaction ID : A2013-4157957**  
Amount of Each Receipt this Period  
50.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Paul Silva**  
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 / D D / Y Y Y Y Y  
11 / 15 / 2013  
**Transaction ID : A2013-4321117**  
Amount of Each Receipt this Period  
50.00

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 29 / 2013  
**Transaction ID : A2013-4382141**  
Amount of Each Receipt this Period  
50.00

**C. Paul Silva**  
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 ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 13 / 2013  
**Transaction ID : A2013-4393498**  
Amount of Each Receipt this Period  
50.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 110
	<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. Paul Silva**  
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 ▼ **750.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 27 / 2013**

**Transaction ID : A2013-4528273**

Amount of Each Receipt this Period  
**50.00**

**B. Arthur Smith**  
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  
**12 / 13 / 2013**

**Transaction ID : A2013-4393502**

Amount of Each Receipt this Period  
**50.00**

**C. Arthur Smith**  
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  
**12 / 27 / 2013**

**Transaction ID : A2013-4528277**

Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **150.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 85 OF 110
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) <b>A. Ian Smith</b>		Date of Receipt MM / DD / YYYY 07 / 26 / 2013 <b>Transaction ID : A2013-3557005</b>
Mailing Address 47 Little Pond Road		Amount of Each Receipt this Period 150.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00

Full Name (Last, First, Middle Initial) <b>B. Ian Smith</b>		Date of Receipt MM / DD / YYYY 08 / 09 / 2013 <b>Transaction ID : A2013-3504969</b>
Mailing Address 47 Little Pond Road		Amount of Each Receipt this Period 150.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00

Full Name (Last, First, Middle Initial) <b>C. Ian Smith</b>		Date of Receipt MM / DD / YYYY 08 / 23 / 2013 <b>Transaction ID : A2013-3699556</b>
Mailing Address 47 Little Pond Road		Amount of Each Receipt this Period 150.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 110
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. 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 ▼ 1200.00

Date of Receipt  
 09 / 06 / 2013  
**Transaction ID : A2013-3852790**  
 Amount of Each Receipt this Period  
 150.00

**B. 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 ▼ 1350.00

Date of Receipt  
 09 / 20 / 2013  
**Transaction ID : A2013-3936085**  
 Amount of Each Receipt this Period  
 150.00

**C. 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 ▼ 1500.00

Date of Receipt  
 10 / 04 / 2013  
**Transaction ID : A2013-4103948**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. 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 ▼ 1650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 18 / 2013  
**Transaction ID : A2013-4114217**

Amount of Each Receipt this Period  
 150.00

**B. 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 ▼ 1800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2013  
**Transaction ID : A2013-4157927**

Amount of Each Receipt this Period  
 150.00

**C. 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 ▼ 1950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 15 / 2013  
**Transaction ID : A2013-4321092**

Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. 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 ▼ 2100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2013  
**Transaction ID : A2013-4382116**

Amount of Each Receipt this Period  
 150.00

**B. 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 ▼ 2250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2013  
**Transaction ID : A2013-4393473**

Amount of Each Receipt this Period  
 150.00

**C. 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 ▼ 2400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2013  
**Transaction ID : A2013-4528248**

Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 110
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. 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 ▼ 500.00

Date of Receipt  
07 / 26 / 2013  
**Transaction ID : A2013-3557028**

Amount of Each Receipt this Period  
100.00

**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 ▼ 600.00

Date of Receipt  
08 / 09 / 2013  
**Transaction ID : A2013-3504992**

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 ▼ 700.00

Date of Receipt  
08 / 23 / 2013  
**Transaction ID : A2013-3699579**

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 90 OF 110
	<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 ▼  
2250.00

Date of Receipt  
07 / 26 / 2013  
**Transaction ID : A2013-3557006**

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 ▼  
2400.00

Date of Receipt  
08 / 09 / 2013  
**Transaction ID : A2013-3504970**

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 ▼  
2550.00

Date of Receipt  
08 / 23 / 2013  
**Transaction ID : A2013-3699557**

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 110
	<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 ▼  
2700.00

Date of Receipt  
09 / 06 / 2013  
**Transaction ID : A2013-3852791**

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 ▼  
2850.00

Date of Receipt  
09 / 20 / 2013  
**Transaction ID : A2013-3936086**

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 ▼  
3000.00

Date of Receipt  
10 / 04 / 2013  
**Transaction ID : A2013-4103949**

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 110
	<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 ▼  
3150.00

Date of Receipt  
10 / 18 / 2013  
**Transaction ID : A2013-4114218**

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 ▼  
3300.00

Date of Receipt  
11 / 01 / 2013  
**Transaction ID : A2013-4157928**

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 ▼  
3450.00

Date of Receipt  
11 / 15 / 2013  
**Transaction ID : A2013-4321093**

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 110
	<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 ▼ 3600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2013  
**Transaction ID : A2013-4382117**  
 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 ▼ 3750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2013  
**Transaction ID : A2013-4393474**  
 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 ▼ 3900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2013  
**Transaction ID : A2013-4528249**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 110
	<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. Jimmy Wang</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2013 <b>Transaction ID : A2013-4157958</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 20.00
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 ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>B. Jimmy Wang</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2013 <b>Transaction ID : A2013-4321118</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 20.00
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 ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>C. Jimmy Wang</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 29 / 2013 <b>Transaction ID : A2013-4382142</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 20.00
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 ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 95 OF 110  
(check only one)

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

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

Full Name (Last, First, Middle Initial)  
**A. Jimmy Wang**

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  
 12 / 13 / 2013  
**Transaction ID : A2013-4393499**

Amount of Each Receipt this Period  
20.00

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

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  
 12 / 27 / 2013  
**Transaction ID : A2013-4528274**

Amount of Each Receipt this Period  
20.00

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

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<b>TOTAL</b> This Period (last page this line number only).....▶	16916.00

**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

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 16 / 2013

**Transaction ID : B470420**

Amount of Each Disbursement this Period

48.42

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address PO Box 27025

City Richmond State VA Zip Code 23261

Purpose of Disbursement  
Bank Service Charge

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 15 / 2013

**Transaction ID : B474412**

Amount of Each Disbursement this Period

36.19

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Mailing Address PO Box 27025

City Richmond State VA Zip Code 23261

Purpose of Disbursement  
Bank Service Charge

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 16 / 2013

**Transaction ID : B475442**

Amount of Each Disbursement this Period

27.92

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

112.53

**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 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

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2013

Transaction ID : B480982

Amount of Each Disbursement this Period

19.54

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address PO Box 27025

City Richmond State VA Zip Code 23261

Purpose of Disbursement  
Bank Service Charge

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 15 / 2013

Transaction ID : B482723

Amount of Each Disbursement this Period

19.98

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Mailing Address PO Box 27025

City Richmond State VA Zip Code 23261

Purpose of Disbursement  
Bank Service Charge

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 16 / 2013

Transaction ID : B484780

Amount of Each Disbursement this Period

21.71

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

61.23

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

173.76

**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. Mark Pryor for US Senate**

Mailing Address PO Box 2720

City Little Rock State AR Zip Code 72203

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mark Pryor**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AR District:

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2013

**Transaction ID : B475436**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. JOE PAC**

Mailing Address PO BOX 984

City Willows State CA Zip Code 95988

Purpose of Disbursement  
Contribution

011

Candidate Name

Office Sought:  House  
 Senate  
 President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 16 / 2013

**Transaction ID : B457398**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Scott Peters for Congress**

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement  
Contribution

011

Candidate Name

**Scott Peters**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 52

Date of Disbursement

MM / DD / YYYY  
08 / 30 / 2013

**Transaction ID : B472834**

Amount of Each Disbursement this Period

1000.00

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

4000.00

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

**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. Susan Davis for Congress**

Mailing Address PO Box 84049

City San Diego State CA Zip Code 92138

Purpose of Disbursement  
Contribution

011

Candidate Name

**Susan Davis**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 53

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 19 / 2013

**Transaction ID : B474413**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Anna Eshoo for Congress**

Mailing Address 555 Capitol Mall Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
Contribution

011

Candidate Name

**Anna Eshoo**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 18

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2013

**Transaction ID : B475437**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Bilirakis for Congress**

Mailing Address PO Box 606

City Tarpon Springs State FL Zip Code 34688

Purpose of Disbursement  
Contribution

011

Candidate Name

**Gus Bilirakis**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: FL District: 12

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 19 / 2013

**Transaction ID : B474420**

Amount of Each Disbursement this Period

2000.00

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

4000.00

**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. Bilirakis for Congress**

Mailing Address PO Box 606

City Tarpon Springs State FL Zip Code 34688

Purpose of Disbursement Contribution

011

Candidate Name

**Gus Bilirakis**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: FL District: 12

Date of Disbursement

MM / DD / YYYY  
12 / 06 / 2013

**Transaction ID : B484626**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Georgians for Isakson**

Mailing Address Post Office Box 250116

City Atlanta State GA Zip Code 30325

Purpose of Disbursement Contribution

011

Candidate Name

**Johnny Isakson**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: GA District:

Date of Disbursement

MM / DD / YYYY  
08 / 30 / 2013

**Transaction ID : B472809**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Guthrie for Congress**

Mailing Address PO Box 9639

City Bowling Green State KY Zip Code 42102

Purpose of Disbursement Contribution

011

Candidate Name

**Brett Guthrie**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: KY District: 02

Date of Disbursement

MM / DD / YYYY  
11 / 15 / 2013

**Transaction ID : B480796**

Amount of Each Disbursement this Period

2000.00

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

3250.00

**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. Bill Cassidy for US Senate**

Mailing Address PO Box 80505

City State Zip Code  
Baton Rouge LA 70898

Purpose of Disbursement  
Contribution

011

Candidate Name

**William Cassidy**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: LA District:

Date of Disbursement

MM / DD / YYYY  
10 / 10 / 2013

**Transaction ID : B474415**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. 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

MM / DD / YYYY  
11 / 15 / 2013

**Transaction ID : B480793**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Katherine Clark for Congress**

Mailing Address PO Box 361

City State Zip Code  
Malden MA 02148

Purpose of Disbursement  
Contribution

011

Candidate Name

**Katherine Clark**

Category/  
Type

Office Sought:  House  
 Senate  
 President

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

State: MA District: 05

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2013

**Transaction ID : B482811**

Amount of Each Disbursement this Period

500.00

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

4000.00

**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. Katherine Clark for Congress**

Mailing Address PO Box 361

City Malden State MA Zip Code 02148

Purpose of Disbursement  
Contribution

011

Candidate Name

**Katherine Clark**

Category/  
Type

Office Sought:  House  
 Senate  
 President

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

State: MA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	09	/	2013

**Transaction ID : B484628**

Amount of Each Disbursement this Period

500.00
--------

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

M M M	/	D D D	/	Y Y Y Y Y
08	/	30	/	2013

**Transaction ID : B472806**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C. Ann Wagner for Congress**

Mailing Address P.O. Box 50

City Ballwin State MO Zip Code 63022

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ann Wagner**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MO District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	15	/	2013

**Transaction ID : B480797**

Amount of Each Disbursement this Period

500.00
--------

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

3500.00
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vertex Pharmaceuticals Incorporated Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Hagan for US Senate Inc.**

Mailing Address PO Box 29103

City Greensboro State NC Zip Code 27455

Purpose of Disbursement  
Contribution

011

Candidate Name

**Kay R Hagan**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2013			

**Transaction ID : B482810**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Pallone for Congress**

Mailing Address PO Box 3176

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Contribution

011

Candidate Name

**Frank Pallone Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NJ District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2013			

**Transaction ID : B474416**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Paul Tonko for Congress**

Mailing Address 911 Central Avenue PO Box 221

City Albany State NY Zip Code 12206

Purpose of Disbursement  
Contribution

011

Candidate Name

**Paul Tonko**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 20

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			19			2013			

**Transaction ID : B474422**

Amount of Each Disbursement this Period

500.00
--------

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

2500.00
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vertex Pharmaceuticals Incorporated Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Crowley for Congress**

Mailing Address 84-56 Grand Avenue

City Elmhurst State NY Zip Code 11373

Purpose of Disbursement Contribution

011

Candidate Name

**Joseph Crowley**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: NY District: 14

Date of Disbursement

MM / DD / YYYY  
10 / 09 / 2013

**Transaction ID : B480798**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Portman for Senate Committee**

Mailing Address 9856 Archer Lane

City Dublin State OH Zip Code 43017

Purpose of Disbursement Contribution

011

Candidate Name

**Rob Portman**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: OH District:

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2013

**Transaction ID : B482813**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. New Pioneers PAC**

Mailing Address 228 S Washington St Ste 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Contribution

011

Candidate Name

Category/Type

Office Sought:  House  Senate  President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 05 / 2013

**Transaction ID : B480794**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vertex Pharmaceuticals Incorporated Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kurt Schrader for Congress**

Mailing Address PO Box 3314

City Oregon City State OR Zip Code 97045

Purpose of Disbursement  
Contribution

011

Candidate Name

**Kurt Schrader**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OR District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2013			

**Transaction ID : B480791**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. Wyden for Senate**

Mailing Address 232 NE 9th Avenue

City Portland State OR Zip Code 97232

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ron Wyden**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OR District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			17			2013			

**Transaction ID : B482814**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Friends of Joe Pitts**

Mailing Address PO Box 775

City Unionville State PA Zip Code 19375

Purpose of Disbursement  
Contribution

011

Candidate Name

**Joseph R Pitts**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: PA District: 16

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2013			

**Transaction ID : B475438**

Amount of Each Disbursement this Period

1500.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

4500.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vertex Pharmaceuticals Incorporated Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Marino for Congress**

Mailing Address PO Box 653

City Williamsport State PA Zip Code 17703

Purpose of Disbursement  
Contribution

011

Candidate Name

**Thomas Marino**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: PA District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2013			

**Transaction ID : B480790**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. Charlie Dent for Congress**

Mailing Address PO Box 442

City Allentown State PA Zip Code 18105

Purpose of Disbursement  
Contribution

011

Candidate Name

**Charlie Dent**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: PA District: 15

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			06			2013			

**Transaction ID : B484627**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. Bob Casey for Senate Inc.**

Mailing Address PO Box 58746

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement  
Contribution

011

Candidate Name

**Bob Casey Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: PA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2013			

**Transaction ID : B484625**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

4000.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vertex Pharmaceuticals Incorporated Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Making A Responsible Stand For Households In Ameri**

Mailing Address P.O. Box 3241

City State Zip Code  
Brentwood TN 37024

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2013			

**Transaction ID : B480795**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. VINEPAC (Victory in November Election PAC)**

Mailing Address 700 13th Street NW Suite 600

City State Zip Code  
Washington DC 20005

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			18			2013			

**Transaction ID : B474417**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. New Democrat Coalition PAC**

Mailing Address 700 13th Street NW #600

City State Zip Code  
Washington DC 20005

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2013			

**Transaction ID : B480792**

Amount of Each Disbursement this Period

2500.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

6000.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vertex Pharmaceuticals Incorporated Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Matheson for Congress**

Mailing Address P O Box 521048

City State Zip Code  
Salt Lake City UT 84152

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Jim Matheson**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: UT District: 04

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2013

**Transaction ID : B457399**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Matheson for Congress**

Mailing Address P O Box 521048

City State Zip Code  
Salt Lake City UT 84152

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Jim Matheson**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: UT District: 04

Date of Disbursement

MM / DD / YYYY  
08 / 30 / 2013

**Transaction ID : B472825**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. ORRINPAC**

Mailing Address PO BOX 3986

City State Zip Code  
Washington DC 20027

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

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

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 20 / 2013

**Transaction ID : B482812**

Amount of Each Disbursement this Period

1000.00

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

3500.00

**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. Barrasso Scott Victory Fund**

Mailing Address 901 N. Washington St. Suite 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	3

**Transaction ID : B472829**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

1000.00

Full Name (Last, First, Middle Initial)

**B. Kind for Congress Committee**

Mailing Address 205 5th Avenue South

City La Crosse State WI Zip Code 54601

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WI District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	1	3

**Transaction ID : B474414**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

2500.00

Full Name (Last, First, Middle Initial)

**C. Common Values PAC**

Mailing Address 901 N Washington St Suite 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	3

**Transaction ID : B472827**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

2500.00

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

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

6	0	0	0	0	0	0	0	0	0

6000.00


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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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. Enzi for US Senate**

Mailing Address PO Box 2775

City Cody State WY Zip Code 82414

Purpose of Disbursement  
Contribution

Category/  
Type

Candidate Name

**Michael B Enzi**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2013

**Transaction ID : B474423**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

2000.00
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50250.00
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