

**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="2014"/> | <input type="text" value="6607.74"/> | <input type="text" value="6607.74"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="6607.74"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="7930.00"/> | <input type="text" value="7930.00"/> |
| (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="14537.74"/> | <input type="text" value="14537.74"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="11082.89"/> | <input type="text" value="11082.89"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="3454.85"/> | <input type="text" value="3454.85"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Vertex Pharmaceuticals Incorporated Political Action Committee

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

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 3750.00 | 3750.00 |
| (ii) Unitemized | 4180.00 | 4180.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 7930.00 | 7930.00 |
| (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) | 7930.00 | 7930.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 7930.00 | 7930.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 7930.00 | 7930.00 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 82.89 | 82.89 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 82.89 | 82.89 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 11000.00 | 11000.00 |
| 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)) .. | 11082.89 | 11082.89 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 11082.89 | 11082.89 |

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) | 7930.00 | 7930.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 7930.00 | 7930.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 82.89 | 82.89 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 82.89 | 82.89 |

**SCHEDULE A (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 23 |
| | <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 ▼ **384.00**

Date of Receipt **01 / 24 / 2014**

Transaction ID : A2014-66518

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 ▼ **576.00**

Date of Receipt **02 / 07 / 2014**

Transaction ID : A2014-316470

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 ▼ **768.00**

Date of Receipt **02 / 21 / 2014**

Transaction ID : A2014-316438

Amount of Each Receipt this Period **192.00**

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

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

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

Form/Schedule: SA11AI
Transaction ID :

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

Form/Schedule:
Transaction ID:

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 23 |
| | <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 ▼ 960.00

Date of Receipt 03 / 07 / 2014
Transaction ID : A2014-490951

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 ▼ 1152.00

Date of Receipt 03 / 21 / 2014
Transaction ID : A2014-503434

Amount of Each Receipt this Period 192.00

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 ▼ 250.00

Date of Receipt 03 / 07 / 2014
Transaction ID : A2014-490956

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 434.00

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 23 |
| <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. 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 ▼ 300.00

Date of Receipt 03 / 21 / 2014
Transaction ID : A2014-503439

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 ▼ 250.00

Date of Receipt 03 / 07 / 2014
Transaction ID : A2014-490957

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 ▼ 300.00

Date of Receipt 03 / 21 / 2014
Transaction ID : A2014-503440

Amount of Each Receipt this Period 50.00

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

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

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

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

FOR LINE NUMBER: PAGE 10 OF 23
(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. Thomas Connolly
 Full Name (Last, First, Middle Initial)
 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 ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : A2014-316441
 Amount of Each Receipt this Period
 50.00

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

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2014
Transaction ID : A2014-490953
 Amount of Each Receipt this Period
 50.00

C. Thomas Connolly
 Full Name (Last, First, Middle Initial)
 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 ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2014
Transaction ID : A2014-503436
 Amount of Each Receipt this Period
 50.00

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

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

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

FOR LINE NUMBER: PAGE 11 OF 23
(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. 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 ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2014
Transaction ID : A2014-490958
 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 ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2014
Transaction ID : A2014-503441
 Amount of Each Receipt this Period
 50.00

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

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2014
Transaction ID : A2014-490942
 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 12 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2014
Transaction ID : A2014-503425
 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 ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2014
Transaction ID : A2014-490960
 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 ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2014
Transaction ID : A2014-503443
 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 13 OF 23
(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
 03 / 07 / 2014
Transaction ID : A2014-490961

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
 03 / 21 / 2014
Transaction ID : A2014-503444

Amount of Each Receipt this Period
 50.00

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 ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : A2014-316471

Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

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 23
(check only one)

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

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

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

Mailing Address 130 Waverly Pl

City Cambridge 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
02 / 21 / 2014

Transaction ID : A2014-316439

Amount of Each Receipt this Period
75.00

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

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
03 / 07 / 2014

Transaction ID : A2014-490952

Amount of Each Receipt this Period
75.00

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

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 ▼ **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 21 / 2014

Transaction ID : A2014-503435

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 15 OF 23
(check only one)

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

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

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

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 ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 21 / 2014

Transaction ID : A2014-503433

Amount of Each Receipt this Period
40.00

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

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
03 / 07 / 2014

Transaction ID : A2014-490962

Amount of Each Receipt this Period
50.00

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

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
03 / 21 / 2014

Transaction ID : A2014-503445

Amount of Each Receipt this Period
50.00

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: PAGE 16 OF 23
(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. Arthur Smith

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
 03 / 07 / 2014
Transaction ID : A2014-490966

Amount of Each Receipt this Period
50.00

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

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
 03 / 21 / 2014
Transaction ID : A2014-503449

Amount of Each Receipt this Period
50.00

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

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 EVP and CFO

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
 01 / 24 / 2014
Transaction ID : A2014-66505

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

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 23
(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. Ian 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 EVP and CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : A2014-316457
 Amount of Each Receipt this Period
 150.00

B. Ian 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 EVP and CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : A2014-316425
 Amount of Each Receipt this Period
 150.00

C. Ian 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 EVP and CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 07 / 2014
Transaction ID : A2014-490938
 Amount of Each Receipt this Period
 150.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 23
(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. Ian Smith

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 EVP and CFO

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
 03 / 21 / 2014
Transaction ID : A2014-503421

Amount of Each Receipt this Period
 150.00

Full Name (Last, First, Middle Initial)
B. Ms. Samantha Ventimiglia

Mailing Address 1201 Maryland Ave SW
 Ste 850

City State Zip Code
 Washington DC 20024

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

Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Sr Director

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
 01 / 24 / 2014
Transaction ID : A2014-66506

Amount of Each Receipt this Period
 150.00

Full Name (Last, First, Middle Initial)
C. Ms. Samantha Ventimiglia

Mailing Address 1201 Maryland Ave SW
 Ste 850

City State Zip Code
 Washington DC 20024

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

Name of Employer Occupation
 Vertex Pharmaceuticals Incorporated Sr Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : A2014-316458

Amount of Each Receipt this Period
 150.00

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 OF 23
(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. Ms. Samantha Ventimiglia

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 ▼ **600.00**

Date of Receipt
02 / 21 / 2014
Transaction ID : A2014-316426

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
B. Ms. Samantha Ventimiglia

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 ▼ **750.00**

Date of Receipt
03 / 07 / 2014
Transaction ID : A2014-490939

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C. Ms. Samantha Ventimiglia

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 ▼ **900.00**

Date of Receipt
03 / 21 / 2014
Transaction ID : A2014-503422

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).....▶ | 3750.00 |

**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. 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 |
| 03 | / | 10 | / | 2014 |

Transaction ID : B488915

Amount of Each Disbursement this Period

| |
|---------|
| 2000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. 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

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | / | 18 | / | 2014 |

Transaction ID : B488910

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. The Markey Committee

Mailing Address PO Box 526

City Medford State MA Zip Code 02155

Purpose of Disbursement Contribution

011

Candidate Name

Edward J Markey

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MA District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 01 | / | 20 | / | 2014 |

Transaction ID : B487563

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

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

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

| |
|---------|
| 4000.00 |
|---------|

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

Full Name (Last, First, Middle Initial)

A. The Markey Committee

Mailing Address PO Box 526

City Medford State MA Zip Code 02155

Purpose of Disbursement Contribution

011

Candidate Name

Edward J Markey

Category/Type

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: MA District:

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2014

Transaction ID : B493040

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Collins for Senator

Mailing Address PO Box 1096

City Bangor State ME Zip Code 04402

Purpose of Disbursement Contribution

011

Candidate Name

Susan M Collins

Category/Type

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: ME District:

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2014

Transaction ID : B488913

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. 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

MM / DD / YYYY
03 / 26 / 2014

Transaction ID : B493038

Amount of Each Disbursement this Period

1500.00

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. Pallone for Congress

Mailing Address PO Box 3176 .

City State Zip Code
Long Branch NJ 07740

Purpose of Disbursement
Contribution

011

Candidate Name

Frank Pallone Jr.

Category/
Type

Office Sought: House
 Senate
 President
State: NJ District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 19 / 2014

Transaction ID : B493265

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Dan Maffei

Mailing Address PO Box 230

City State Zip Code
Syracuse NY 13201

Purpose of Disbursement
Contribution

011

Candidate Name

Dan Maffei

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 24

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 26 / 2014

Transaction ID : B493037

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Alexander for Senate 2014 Inc

Mailing Address 228 S Washington Street Suite 115

City State Zip Code
Alexandria VA 22314

Purpose of Disbursement
Contribution

011

Candidate Name

Lamar Alexander

Category/
Type

Office Sought: House
 Senate
 President
State: TN District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 18 / 2014

Transaction ID : B488909

Amount of Each Disbursement this Period

1000.00

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

2500.00

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. Michael Burgess for Congress

Mailing Address PO Box 2334

City Denton State TX Zip Code 76202

Purpose of Disbursement
Contribution

011

Candidate Name

Michael C. Burgess

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District: 26

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 18 | / | 2014 |

Transaction ID : B488911

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

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

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| |
|--|

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

| | | | | |
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| 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)..... ▶

| |
|---------|
| 1000.00 |
|---------|

| |
|----------|
| 11000.00 |
|----------|