

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) [X] NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2) Mar 20 (M3) Apr 20 (M4) May 20 (M5) Jun 20 (M6) Jul 20 (M7) Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) [X] Runoff (12R) Convention (12C) Special (12S) Election on 11 / 06 / 2018 in the State of WA (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on / / in the State of

5. Covering Period 10 / 01 / 2018 through 10 / 17 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ventimiglia, Samantha, , , Type or Print Name of Treasurer

Signature of Treasurer Ventimiglia, Samantha, , , [Electronically Filed] Date 10 / 24 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Vertex Pharmaceuticals Incorporated Political Action Committee**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		29841.41
(b) Cash on Hand at Beginning of Reporting Period.....	32131.78	
(c) Total Receipts (from Line 19) .....	3264.72	99228.30
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	35396.50	129069.71
7. Total Disbursements (from Line 31).....	19250.00	112923.21
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	16146.50	16146.50
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**  
  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Vertex Pharmaceuticals Incorporated Political Action Committee**

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

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3050.36	78598.32
(ii) Unitemized .....	214.36	20629.98
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3264.72	99228.30
(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) .....	3264.72	99228.30
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)).....▶	3264.72	99228.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3264.72	99228.30

**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 .....	0.00	173.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	173.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17500.00	106500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	1750.00	6250.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	19250.00	112923.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19250.00	112923.21

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	3264.72	99228.30
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3264.72	99228.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	173.21
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	173.21

**SCHEDULE A (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 42
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

**A. Altshuler, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive VP Global Research and Ch  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 379.89

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316518**  
 Amount of Each Receipt this Period 18.09  
 Memo Item

**B. Arbuckle, Stuart, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive VP Chief Commercial Offic  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4032.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316519**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**C. Argiras, Ashley, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Associate Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316520**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	240.09
<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 7 OF 42  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Vice President Internal Audit
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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		12		2018

**Transaction ID : A2018-2316522**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Director
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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
10		12		2018

**Transaction ID : A2018-2316523**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 11010 Torreyana Rd

City San Diego	State CA	Zip Code 92121-1103
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼  
525.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

**Transaction ID : A2018-2316524**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	95.00
<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 8 OF 42  
(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. Barnes, Lauren, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President Managed Markets  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 589.89

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 12 / 2018  
**Transaction ID : A2018-2316525**  
 Amount of Each Receipt this Period  
 28.09  
 Memo Item

**B. Barnes, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 City Washington State DC Zip Code 20001-4417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 12 / 2018  
**Transaction ID : A2018-2316526**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Bean, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Senior Vice President and Chief Inf  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 12 / 2018  
**Transaction ID : A2018-2316528**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 128.09  
**TOTAL** This Period (last page this line number only).....▶



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

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

FOR LINE NUMBER: PAGE 9 OF 42  
(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Behaeghel, Jean-Remy, , ,**

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Sr. Director
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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
10	/	12	/	2018

**Transaction ID : A2018-2316529**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Associate Director
--	---

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	/	12	/	2018

**Transaction ID : A2018-2316530**

Amount of Each Receipt this Period  
10.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Sr. Therapeutic Specialist
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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	/	12	/	2018

**Transaction ID : A2018-2316533**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 42
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Booth, Kathryn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316534**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Burgoyne, Lauren, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316536**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Carlino, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Area Sales Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316537**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**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 11 OF 42  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Vice President
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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		12		2018

**Transaction ID : A2018-2316538**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Director
--	---

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		12		2018

**Transaction ID : A2018-2316539**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Sr. Director
--	---

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		12		2018

**Transaction ID : A2018-2316540**

Amount of Each Receipt this Period  
10.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 42  
(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. Castiglione, Brenda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 609.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316541**  
 Amount of Each Receipt this Period 29.00  
 Memo Item

**B. Chodakewitz, Jeffrey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive VP GMDA & Chief Medical C  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316542**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Coelho, Frank, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316543**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 159.00  
**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 42
	<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. Crawford, Ryan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Therapeutic Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316544**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Crouch, Kristin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Associate Director MSL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316545**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Edwards, Mathew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316547**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50.00  
**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 42  
(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. Flynn, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316549**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Flynn, Kerry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President and Chief IP Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316550**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Frenkel-Rorden, Lindsey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Sr. Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316551**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**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: (check only one)	PAGE 15 OF 42
<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. Gandek, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President  
 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 / 12 / 2018  
**Transaction ID : A2018-2316552**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Garry, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Therapeutic Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2018  
**Transaction ID : A2018-2316554**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Goldbeck, Donna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Area Sales Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2018  
**Transaction ID : A2018-2316555**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 16 OF 42  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Therapeutic Specialist
--	---

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	/	12	/	2018

**Transaction ID : A2018-2316556**

Amount of Each Receipt this Period  
10.00

Memo Item

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

Mailing Address 50 Northern Ave

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

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Therapeutic Specialist
--	---

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	/	12	/	2018

**Transaction ID : A2018-2316557**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 50 Northern Ave

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

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Therapeutic Specialist
--	---

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	/	12	/	2018

**Transaction ID : A2018-2316559**

Amount of Each Receipt this Period  
10.00

Memo Item

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



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 42
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Harrington, Jenna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316560**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Hebert, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Sr. Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316561**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Henry, Danyel, , Ms.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 City Washington State DC Zip Code 20001-4417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Sr. Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316562**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 18 OF 42  
(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. Herrick, Katherine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316563**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Hurter, Patricia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Sr. Vice President CMC & Preclinica  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316566**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Jacquis, Michelle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Associate Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316568**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**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: PAGE 19 OF 42  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

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

Mailing Address 50 Northern Ave

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

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Executive Director Guidance & Patie
--	--

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		12		2018

**Transaction ID : A2018-2316569**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 50 Northern Ave

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

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Associate Director
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
630.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

**Transaction ID : A2018-2316463**

Amount of Each Receipt this Period  
30.00

Memo Item

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

Mailing Address 50 Northern Ave

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

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Director
--	---

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		12		2018

**Transaction ID : A2018-2316464**

Amount of Each Receipt this Period  
10.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 42
<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. Keally, Nicolle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Sr. Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316465**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

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

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316466**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Kuzmission, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Sr. Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316467**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 60.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 42
	<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. Larsen, Jim, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11010 Torreyana Rd

City San Diego	State CA	Zip Code 92121-1103
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
525.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

**Transaction ID : A2018-2316468**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 50 Northern Ave

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

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Director
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
588.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

**Transaction ID : A2018-2316469**

Amount of Each Receipt this Period  
30.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston	State MA	Zip Code 02210-1862
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Sr. Research Scientist
--	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
525.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

**Transaction ID : A2018-2316470**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	80.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 42
<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. Liu, Joy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316471**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Long, Deborah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316546**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Lough, Jean, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 City Washington State DC Zip Code 20001-4417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Executive Assistant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316473**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	80.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 42
	<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. MacNaught, Eustacia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316475**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Markland, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316477**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Mattoon, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 City Washington State DC Zip Code 20001-4417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1575.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316479**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 42
	<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. McGoochan, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 City Washington State DC Zip Code 20001-4417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 620.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316482**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Meeks, Tracey, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316484**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Meltzer, Noel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Sr. MSL  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316485**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

FOR LINE NUMBER: PAGE 25 OF 42  
(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. Minson, Ryan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316486**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Nadig, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Harbor St  
 City Boston State MA Zip Code 02210-2359  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316488**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Negulescu, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11010 Torreyana Rd  
 City San Diego State CA Zip Code 92121-1103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Sr. Vice President San Diego Resear  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316489**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**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 26 OF 42
<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. Olson, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Sr. Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4032.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316490**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**B. Parta, Abigail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 589.89

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316491**  
 Amount of Each Receipt this Period 28.09  
 Memo Item

**C. Partridge, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Sr. Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316492**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	270.09
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 42
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Partridge, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1360.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316493**  
 Amount of Each Receipt this Period 80.00  
 Memo Item

**B. Patel, Dhruvad, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316494**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Pedraza, Roberto, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) National Account Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316495**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 28 OF 42  
(check only one)

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

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

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

Mailing Address 50 Northern Ave

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

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Director
--	---

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	/	12	/	2018

**Transaction ID : A2018-2316496**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 50 Northern Ave

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

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Scientist II
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
525.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2018

**Transaction ID : A2018-2316497**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. Prescott, Kelly, M, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

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

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Director
--	---

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	/	12	/	2018

**Transaction ID : A2018-2316498**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	95.00
<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 29 OF 42
<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. Radomski, Rachel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 City Washington State DC Zip Code 20001-4417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Associate Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316499**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Rasmussen, Gregg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316500**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Rojas, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Sr. Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 379.89

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316501**  
 Amount of Each Receipt this Period 18.09  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	68.09
<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 42
<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. Savage, Morgan, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Northern Ave

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

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Sr. Director
--	---

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	/	12	/	2018

**Transaction ID : A2018-2316502**

Amount of Each Receipt this Period  
10.00

Memo Item

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

Mailing Address 50 Northern Ave

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

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Sr. 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	/	12	/	2018

**Transaction ID : A2018-2316503**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 50 Northern Ave

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

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) National Account 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	/	12	/	2018

**Transaction ID : A2018-2316505**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<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 31 OF 42  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated Political Action Committee**

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

Mailing Address 50 Northern Ave

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

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Sr. Vice President
--	---

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	/	12	/	2018

**Transaction ID : A2018-2316506**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 50 Northern Ave

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

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Director
--	---

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
10	/	12	/	2018

**Transaction ID : A2018-2316507**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 50 Northern Ave

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

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

Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated	Occupation (for Individual) Executive VP Chief Operating Office
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
3150.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2018

**Transaction ID : A2018-2316508**

Amount of Each Receipt this Period  
150.00

Memo Item

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

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

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

FOR LINE NUMBER: PAGE 32 OF 42  
(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. Starratt, Millicent, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Director  
 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 / 12 / 2018  
**Transaction ID : A2018-2316509**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Tandon, Suzanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Sr. Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2018  
**Transaction ID : A2018-2316510**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Tinmouth, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President  
 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 / 12 / 2018  
**Transaction ID : A2018-2316511**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

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



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

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

FOR LINE NUMBER: PAGE 33 OF 42  
(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. Townsend, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Sr. Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316512**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Vandervest, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210-1862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Sr. Therapeutic Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316513**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Ventimiglia, Samantha, , Ms.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 K St NW  
 City Washington State DC Zip Code 20001-4417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3150.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : A2018-2316514**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 170.00  
**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 34 OF 42  
(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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Yohai, Sabrina, , ,**

Mailing Address **50 Northern Ave**

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

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

Name of Employer (for Individual) **Vertex Pharmaceuticals Incorporated**    Occupation (for Individual) **Vice President**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  
**10 / 12 / 2018**

**Transaction ID : A2018-2316516**

Amount of Each Receipt this Period  
**50.00**

Memo Item

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

Mailing Address

City    State    Zip Code

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

Name of Employer (for Individual)    Occupation (for Individual)

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City    State    Zip Code

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

Name of Employer (for Individual)    Occupation (for Individual)

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>50.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>3050.36</b>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vertex Pharmaceuticals Incorporated Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Alamo PAC**

Mailing Address 919 Congress Ave  
Suite 1400

City Austin State TX Zip Code 78701

Purpose of Disbursement Contribution

011  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  
 Primary  General  
 Other (specify)  Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2018

FEC Identification Number

C00387464

**Transaction ID : B707306**

Amount of Each Disbursement this Period

2000.00

Memo Item

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  
Category/  
Type

Candidate Name

**Eshoo, Anna, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: CA District: 18

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2018

FEC Identification Number

C00258475

**Transaction ID : B707278**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Bera for Congress**

Mailing Address PO Box 582496

City Elk Grove State CA Zip Code 95758

Purpose of Disbursement Contribution

011  
Category/  
Type

Candidate Name

**Bera, Amerish, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: CA District: 07

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2018

FEC Identification Number

C00461061

**Transaction ID : B707280**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

4000.00

**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"/> 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**

**A. Bill Cassidy for US Senate**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 80505

City Baton Rouge State LA Zip Code 70898

Purpose of Disbursement Contribution  
Candidate Name Cassidy, William, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: LA District:

Date of Disbursement 10 / 03 / 2018

FEC Identification Number C00543983  
Transaction ID : B707305  
Amount of Each Disbursement this Period 1000.00  
 Memo Item

**B. Bill Flores for Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 6207

City Bryan State TX Zip Code 77805

Purpose of Disbursement Contribution  
Candidate Name Flores, Bill, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: TX District: 17

Date of Disbursement 10 / 03 / 2018

FEC Identification Number C00472241  
Transaction ID : B707302  
Amount of Each Disbursement this Period 1000.00  
 Memo Item

**C. Carper for Senate**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 2882

City Wilmington State DE Zip Code 19805

Purpose of Disbursement Contribution  
Candidate Name Carper, Tom, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: DE District:

Date of Disbursement 10 / 03 / 2018

FEC Identification Number C00349217  
Transaction ID : B707277  
Amount of Each Disbursement this Period 1000.00  
 Memo Item

**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"/> 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. Idaho Conservative Growth Fund**

Mailing Address 701 8th St. NW  
Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C** C00544270

**Transaction ID : B707307**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. M-PAC**

Mailing Address 119 1st Ave S  
Ste 320

City Seattle State WA Zip Code 98104

Purpose of Disbursement Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C** C00365270

**Transaction ID : B707276**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Mike Kelly for Congress**

Mailing Address PO Box 476

City Lyndora State PA Zip Code 16045

Purpose of Disbursement Contribution

**011**  
Category/  
Type

Candidate Name  
**Kelly, George J. (Mike), , ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: PA District: 16

Date of Disbursement

/  /

FEC Identification Number

**C** C00474189

**Transaction ID : B707304**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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. Robin Kelly for Congress**

Mailing Address PO Box 6953

City Chicago State IL Zip Code 60680

Purpose of Disbursement Contribution

Category/Type

Candidate Name  
**Kelly, Robin, , ,**

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

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B707281**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Scott Peters for Congress**

Mailing Address PO Box 22074

City San Diego State CA Zip Code 92192

Purpose of Disbursement Contribution

Category/Type

Candidate Name  
**Peters, Scott, , ,**

Office Sought:  House  Senate  President  
State: CA District: 52

Disbursement For: 2018  
 Primary  General  Other (specify)

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B707279**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. The Hawkeye PAC**

Mailing Address PO Box 156

City Des Moines State IA Zip Code 50301

Purpose of Disbursement Contribution

Category/Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  Other (specify) ▼  
Not Applicable

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B707300**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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**

**A. Thom Tillis Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 97396

City Raleigh State NC Zip Code 27624

Purpose of Disbursement Contribution  
Candidate Name Tillis, Thom, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: NC District:

Date of Disbursement 10 / 03 / 2018

FEC Identification Number C00545772  
Transaction ID : B707282  
Amount of Each Disbursement this Period 1000.00  
 Memo Item

**B. Walters for Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address 9070 Irvine Center Drive #150

City Irvine State CA Zip Code 92618

Purpose of Disbursement Contribution  
Candidate Name Walters, Mimi, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: CA District: 45

Date of Disbursement 10 / 03 / 2018

FEC Identification Number C00546853  
Transaction ID : B707285  
Amount of Each Disbursement this Period 1000.00  
 Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

FEC Identification Number C  
Amount of Each Disbursement this Period  
 Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	17500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vertex Pharmaceuticals Incorporated Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Friends of Jim Ananich Senate**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2018

Mailing Address 932 Maxine Street

FEC Identification Number

C
---

**Transaction ID : B707299**

Amount of Each Disbursement this Period

250.00
--------

Memo Item

City Flint State MI Zip Code 48503

Purpose of Disbursement  
G-2018 State Senate 27 MI

011
Category/ Type

Candidate Name

**Ananich, Jim, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: MI District: 27

Full Name (Last, First, Middle Initial)

**B. Cmte to Elect John Bizon State Representative**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2018

Mailing Address 5420 A Beckley Rd.  
#349

FEC Identification Number

C
---

**Transaction ID : B707288**

Amount of Each Disbursement this Period

300.00
--------

Memo Item

City Battle Creek State MI Zip Code 49015

Purpose of Disbursement  
G-2018 State House 62 MI

011
Category/ Type

Candidate Name

**Bizon, John, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: MI District: 62

Full Name (Last, First, Middle Initial)

**C. CTE Winnie Brinks for Senate**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2018

Mailing Address 2060 Osceola Dr SE

FEC Identification Number

C
---

**Transaction ID : B707296**

Amount of Each Disbursement this Period

200.00
--------

Memo Item

City Grand Rapids State MI Zip Code 49506

Purpose of Disbursement  
G-2018 State Senate 29 MI

011
Category/ Type

Candidate Name

**Brinks, Winnie, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: MI District: 29

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

750.00
--------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vertex Pharmaceuticals Incorporated Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Laura Cox for State Senate**

Mailing Address PO Box 531392

City  
Livonia

State  
MI

Zip Code  
48153

Purpose of Disbursement  
G-2018 State Senate 07 MI

011

Category/  
Type

Candidate Name  
**Cox, Laura, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: MI District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2018

FEC Identification Number

C [REDACTED]

**Transaction ID : B707298**

Amount of Each Disbursement this Period

[REDACTED] 300.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Committee to Elect David LaGrand**

Mailing Address 1551 Kalamazoo Ave SE

City  
Grand Rapids

State  
MI

Zip Code  
49507

Purpose of Disbursement  
G-2018 State Senate 75 MI

011

Category/  
Type

Candidate Name  
**LaGrand, David, M, ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: MI District: 75

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2018

FEC Identification Number

C [REDACTED]

**Transaction ID : B707297**

Amount of Each Disbursement this Period

[REDACTED] 200.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Dr. Hank Vaupel for State Rep Cmte**

Mailing Address 2187 Fowlerville Road

City  
Fowlerville

State  
MI

Zip Code  
48836

Purpose of Disbursement  
G-2018 State House 47 MI

011

Category/  
Type

Candidate Name  
**Vaupel, Hank, , , MD**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: MI District: 47

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2018

FEC Identification Number

C [REDACTED]

**Transaction ID : B707290**

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

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

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

[REDACTED] 750.00

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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. Committee to Elect Michael Webber for State Rep**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 70461

City Rochester Hills State MI Zip Code 48309

Purpose of Disbursement  
G-2018 State House 45 MI

Candidate Name  
**Webber, Michael, J, ,**

Office Sought:  House  Senate  President  
State: MI District: 45

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 03 / 2018

FEC Identification Number  
C [ ]  
**Transaction ID : B707294**

Amount of Each Disbursement this Period  
[ ] 250.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

FEC Identification Number  
C [ ]

Amount of Each Disbursement this Period  
[ ]

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

FEC Identification Number  
C [ ]

Amount of Each Disbursement this Period  
[ ]

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 1750.00