

# 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

Check if different than previously reported. (ACC)

Washington DC 20001

2. **FEC IDENTIFICATION NUMBER** ▼ C00468660 **CITY** ▲ **STATE** ▲ **ZIP CODE** ▲

3. IS THIS REPORT  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)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on M M / D D / Y Y Y Y Y Y in the State of  

(d) 30-Day **POST-Election** Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period 01 / 01 / 2016 through 03 / 31 / 2016

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

Type or Print Name of Treasurer Samantha Ventimiglia

Signature of Treasurer Samantha Ventimiglia *[Electronically Filed]* Date 04 / 15 / 2016

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Vertex Pharmaceuticals Incorporated Political Action Committee**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="1318.60"/>	<input type="text" value="1318.60"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1318.60"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="40099.49"/>	<input type="text" value="40099.49"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="41418.09"/>	<input type="text" value="41418.09"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="15149.19"/>	<input type="text" value="15149.19"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="26268.90"/>	<input type="text" value="26268.90"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Vertex Pharmaceuticals Incorporated Political Action Committee**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	30940.00	30940.00
(ii) Unitemized .....	9159.49	9159.49
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	40099.49	40099.49
(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) .....	40099.49	40099.49
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))..... ▶	40099.49	40099.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	40099.49	40099.49

**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 .....	149.19	149.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	149.19	149.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	15000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	15149.19	15149.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15149.19	15149.19

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	40099.49	40099.49
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	40099.49	40099.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	149.19	149.19
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	149.19	149.19

**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 35
<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. Stuart Arbuckle**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Executive VP & Chief Commercial Off  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 384.00

Date of Receipt 01 / 22 / 2016  
**Transaction ID : A2016-132199**  
Amount of Each Receipt this Period 192.00  
 Memo Item

**B. Stuart Arbuckle**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Executive VP & Chief Commercial Off  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 576.00

Date of Receipt 02 / 05 / 2016  
**Transaction ID : A2016-69267**  
Amount of Each Receipt this Period 192.00  
 Memo Item

**C. Stuart Arbuckle**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Executive VP & Chief Commercial Off  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 768.00

Date of Receipt 02 / 19 / 2016  
**Transaction ID : A2016-274029**  
Amount of Each Receipt this Period 192.00  
 Memo Item

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

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

Form/Schedule: SA11AI  
Transaction ID :

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

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Stuart Arbuckle**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Executive VP & Chief Commercial Off  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 960.00

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301877**  
Amount of Each Receipt this Period 192.00  
 Memo Item

**B. Stuart Arbuckle**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Executive VP & Chief Commercial Off  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1152.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-452749**  
Amount of Each Receipt this Period 192.00  
 Memo Item

**C. David Bean**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr. Vice President Finance and CIO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301881**  
Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 434.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr. Vice President Finance and CIO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-452753**

Amount of Each Receipt this Period 50.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 12 / 2016  
**Transaction ID : A2016-273933**

Amount of Each Receipt this Period 5000.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President Chief of Staff

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301882**

Amount of Each Receipt this Period 50.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5100.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 35  
(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. Virginia Carnahan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President Chief of Staff  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 300.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-452754**  
Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Jeffrey Chodakewitz**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Executive Vice President GMDA & Chi  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 300.00

Date of Receipt 02 / 05 / 2016  
**Transaction ID : A2016-69277**  
Amount of Each Receipt this Period 100.00  
 Memo Item

**c. Jeffrey Chodakewitz**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Executive Vice President GMDA & Chi  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 400.00

Date of Receipt 02 / 19 / 2016  
**Transaction ID : A2016-274036**  
Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 250.00  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 35
<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. Jeffrey Chodakewitz**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Executive Vice President GMDA & Chi  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301892**  
Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Jeffrey Chodakewitz**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Executive Vice President GMDA & Chi  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-452764**  
Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Scott Fields**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301883**  
Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<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 12 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Scott Fields**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 300.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-452755**  
Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Kerry Flynn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President and Chief IP Counsel  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301896**  
Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Kerry Flynn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President and Chief IP Counsel  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 300.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-452768**  
Amount of Each Receipt this Period 50.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 35
<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. Richard Frees**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Regional Account Manager  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 300.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-452815**  
Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Ms. Danyel Henry**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr. Director  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 240.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-452762**  
Amount of Each Receipt this Period 40.00  
 Memo Item

**C. Patricia Hurter**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr. Vice President CMC & Preclinica  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301885**  
Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 190.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 35
<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. Patricia Hurter**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr. Vice President CMC & Preclinica  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 18 / 2016**  
**Transaction ID : A2016-452757**  
Amount of Each Receipt this Period **50.00**  
 Memo Item

**B. Michelle Jacquis**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Associate Director  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 04 / 2016**  
**Transaction ID : A2016-301904**  
Amount of Each Receipt this Period **50.00**  
 Memo Item

**C. Michelle Jacquis**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Associate Director  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 18 / 2016**  
**Transaction ID : A2016-452775**  
Amount of Each Receipt this Period **50.00**  
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 15 OF 35  
(check only one)

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

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

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

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 04 / 2016**

**Transaction ID : A2016-301886**

Amount of Each Receipt this Period  
**50.00**

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2016**

**Transaction ID : A2016-452758**

Amount of Each Receipt this Period  
**50.00**

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Board Member

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 02 / 2016**

**Transaction ID : A2016-640838**

Amount of Each Receipt this Period  
**5000.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **5100.00**

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

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

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

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

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

**A. Jeffrey Leiden**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation President CEO and Chairman  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000.00**

Date of Receipt **02 / 12 / 2016**  
**Transaction ID : A2016-273932**  
 Amount of Each Receipt this Period **5000.00**  
 Memo Item

**B. Eustacia MacNaught**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 04 / 2016**  
**Transaction ID : A2016-301924**  
 Amount of Each Receipt this Period **50.00**  
 Memo Item

**C. Eustacia MacNaught**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 18 / 2016**  
**Transaction ID : A2016-452796**  
 Amount of Each Receipt this Period **50.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>5100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

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

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

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 05 / 2016  
**Transaction ID : A2016-69302**

Amount of Each Receipt this Period 75.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 19 / 2016  
**Transaction ID : A2016-274030**

Amount of Each Receipt this Period 75.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301878**

Amount of Each Receipt this Period 75.00

Memo Item

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 35
<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. Michael Mattoon**  
Full Name (Last, First, Middle Initial)

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
03 / 18 / 2016  
**Transaction ID : A2016-452750**

Amount of Each Receipt this Period  
75.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
02 / 24 / 2016  
**Transaction ID : A2016-475693**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Associate Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 04 / 2016  
**Transaction ID : A2016-301903**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2625.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)  
**A. Tracey A Meeks**

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Associate Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2016**

**Transaction ID : A2016-452774**

Amount of Each Receipt this Period  
**50.00**

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 04 / 2016**

**Transaction ID : A2016-301925**

Amount of Each Receipt this Period  
**50.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**c. David Nadig**

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2016**

**Transaction ID : A2016-452797**

Amount of Each Receipt this Period  
**50.00**

Memo Item

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

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

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

FOR LINE NUMBER: PAGE 20 OF 35  
(check only one)

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

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

Full Name (Last, First, Middle Initial)  
**A. Richard Olson**

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr. Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **02 / 05 / 2016**

**Transaction ID : A2016-69309**

Amount of Each Receipt this Period **150.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Richard Olson**

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr. Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **02 / 19 / 2016**

**Transaction ID : A2016-274041**

Amount of Each Receipt this Period **150.00**

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr. Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **03 / 04 / 2016**

**Transaction ID : A2016-301874**

Amount of Each Receipt this Period **150.00**

Memo Item

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

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

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

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

FOR LINE NUMBER: PAGE 21 OF 35  
(check only one)

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

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

Full Name (Last, First, Middle Initial)  
**A. Richard Olson**

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr. Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2016**

**Transaction ID : A2016-452746**

Amount of Each Receipt this Period  
**150.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Gary Palladino**

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr. Vice President Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 05 / 2016**

**Transaction ID : A2016-69310**

Amount of Each Receipt this Period  
**100.00**

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr. Vice President Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 19 / 2016**

**Transaction ID : A2016-274003**

Amount of Each Receipt this Period  
**100.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **350.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Gary Palladino**  
Full Name (Last, First, Middle Initial)

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr. Vice President Human Resources

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301906**

Amount of Each Receipt this Period 100.00

Memo Item

**B. Gary Palladino**  
Full Name (Last, First, Middle Initial)

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr. Vice President Human Resources

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-452777**

Amount of Each Receipt this Period 100.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-452747**

Amount of Each Receipt this Period 40.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	240.00
<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 23 OF 35  
(check only one)

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

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

Full Name (Last, First, Middle Initial)  
**A. Paul Pereira**

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Associate Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 04 / 2016**

**Transaction ID : A2016-301902**

Amount of Each Receipt this Period  
**50.00**

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Associate Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2016**

**Transaction ID : A2016-452773**

Amount of Each Receipt this Period  
**50.00**

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 24 / 2016**

**Transaction ID : A2016-475694**

Amount of Each Receipt this Period  
**2500.00**

Memo Item

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 35
<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. Paul Silva**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr. Vice President  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 04 / 2016**  
**Transaction ID : A2016-301887**  
Amount of Each Receipt this Period **50.00**  
 Memo Item

**B. Paul Silva**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr. Vice President  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 18 / 2016**  
**Transaction ID : A2016-452759**  
Amount of Each Receipt this Period **50.00**  
 Memo Item

**C. Arthur Smith**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Associate Director  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **300.00**

Date of Receipt **02 / 19 / 2016**  
**Transaction ID : A2016-274004**  
Amount of Each Receipt this Period **100.00**  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **200.00**  
**TOTAL** This Period (last page this line number only).....



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 35
<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. Arthur Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Associate Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301889**

Amount of Each Receipt this Period 100.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Associate Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-452761**

Amount of Each Receipt this Period 100.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Executive VP & CFO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 22 / 2016  
**Transaction ID : A2016-132193**

Amount of Each Receipt this Period 150.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 350.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Executive VP & CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 05 / 2016

**Transaction ID : A2016-69321**

Amount of Each Receipt this Period  
 150.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Executive VP & CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2016

**Transaction ID : A2016-273987**

Amount of Each Receipt this Period  
 150.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Executive VP & CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2016

**Transaction ID : A2016-301866**

Amount of Each Receipt this Period  
 150.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Executive VP & CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-452738**

Amount of Each Receipt this Period  
 150.00

Memo Item

**B. Brian Tinmouth**  
Full Name (Last, First, Middle Initial)

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : A2016-301937**

Amount of Each Receipt this Period  
 50.00

Memo Item

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

Mailing Address 50 Northern Ave

City Boston State MA Zip Code 02210

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2016  
**Transaction ID : A2016-452809**

Amount of Each Receipt this Period  
 50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<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 28 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Ms. Elaine Ullian**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Boardmember  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000.00**

Date of Receipt **03 / 14 / 2016**  
**Transaction ID : A2016-461554**  
 Amount of Each Receipt this Period **5000.00**  
 Memo Item

**B. Ms. Samantha Ventimiglia**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt **01 / 22 / 2016**  
**Transaction ID : A2016-132196**  
 Amount of Each Receipt this Period **150.00**  
 Memo Item

**c. Ms. Samantha Ventimiglia**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 Northern Ave  
 City Boston State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **450.00**

Date of Receipt **02 / 05 / 2016**  
**Transaction ID : A2016-69324**  
 Amount of Each Receipt this Period **150.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>5300.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 29 OF 35  
(check only one)

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

**A. Ms. Samantha Ventimiglia**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 19 / 2016  
**Transaction ID : A2016-274013**  
Amount of Each Receipt this Period 150.00  
 Memo Item

**B. Ms. Samantha Ventimiglia**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 04 / 2016  
**Transaction ID : A2016-301867**  
Amount of Each Receipt this Period 150.00  
 Memo Item

**C. Ms. Samantha Ventimiglia**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 Northern Ave  
City Boston State MA Zip Code 02210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 900.00

Date of Receipt 03 / 18 / 2016  
**Transaction ID : A2016-452739**  
Amount of Each Receipt this Period 150.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	30940.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vertex Pharmaceuticals Incorporated Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Scott Peters for Congress**

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement Contribution

011

Category/Type

Candidate Name  
**Scott Peters**

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 16 / 2016

Transaction ID : B597895

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Committee To Re-elect Linda Sanchez**

Mailing Address 410 1st St SE Suite 310

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

011

Category/Type

Candidate Name  
**Linda Sanchez**

Office Sought:  House  Senate  President  
State: CA District: 38

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : B578356

Amount of Each Disbursement this Period

-1000.00

Memo Item

Voided: Original check dated 05/20/15

Full Name (Last, First, Middle Initial)

**C. Blue Hen PAC**

Mailing Address P.O. Box 15293

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

011

Category/Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

MM / DD / YYYY  
02 / 18 / 2016

Transaction ID : B595369

Amount of Each Disbursement this Period

1000.00

Memo Item

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

1000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vertex Pharmaceuticals Incorporated Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Blue Hen PAC**

Mailing Address P.O. Box 15293

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2016

**Transaction ID : B584573**

Amount of Each Disbursement this Period

-1000.00

Memo Item

Voided: Original check dated 09/17/15

Full Name (Last, First, Middle Initial)

**B. Loeb sack for Congress**

Mailing Address P.O. Box 3013

City Iowa City State IA Zip Code 52244

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Dave Loeb sack**

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IA District: 02

Date of Disbursement

MM / DD / YYYY  
03 / 02 / 2016

**Transaction ID : B598886**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Donnelly For Indiana**

Mailing Address 1050 17th St NW  
Ste 590

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Joseph Donnelly**

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IN District: 02

Date of Disbursement

MM / DD / YYYY  
02 / 18 / 2016

**Transaction ID : B595370**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

1000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Donnelly for Indiana**

Mailing Address 1050 17th St NW  
Ste 590

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Contribution

011

Candidate Name

**Joseph S Donnelly**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: IN District:

Date of Disbursement

MM / DD / YYYY  
03 / 16 / 2016

**Transaction ID : B597893**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Donnelly for Indiana**

Mailing Address 1050 17th St NW  
Ste 590

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Contribution

011

Candidate Name

**Joseph S Donnelly**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: IN District:

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2016

**Transaction ID : B586582**

Amount of Each Disbursement this Period

-1000.00

Memo Item

Voided: Original check dated 10/22/15

Full Name (Last, First, Middle Initial)

**C. Bill Cassidy for US Senate**

Mailing Address PO Box 80505

City Baton Rouge State LA Zip Code 70898

Purpose of Disbursement  
Contribution

011

Candidate Name

**William Cassidy**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: LA District:

Date of Disbursement

MM / DD / YYYY  
03 / 16 / 2016

**Transaction ID : B597891**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

2500.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vertex Pharmaceuticals Incorporated Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Educate and Innovate PAC**

Mailing Address 700 13th Street NW  
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 18 / 2016

Transaction ID : B595373

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. The Bill Keating Committee**

Mailing Address PO Box 3065

City Buzzards Bay State MA Zip Code 02532

Purpose of Disbursement  
Contribution

011

Candidate Name

**William R Keating**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MA District: 09

Date of Disbursement

MM / DD / YYYY  
02 / 18 / 2016

Transaction ID : B595368

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Joe Kennedy for Congress**

Mailing Address P.O. Box 590464

City Newton State MA Zip Code 02459

Purpose of Disbursement  
Contribution

011

Candidate Name

**Joseph P Kennedy III**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MA District: 04

Date of Disbursement

MM / DD / YYYY  
03 / 16 / 2016

Transaction ID : B597897

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vertex Pharmaceuticals Incorporated Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Shore PAC**

Mailing Address P.O. Box 3157

City State Zip Code  
Long Branch NJ 07740

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2016

**Transaction ID : B595371**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Portman for Senate Committee**

Mailing Address 9856 Archer Lane

City State Zip Code  
Dublin OH 43017

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rob Portman**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OH District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : B597898**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Wyden for Senate**

Mailing Address 232 NE 9th Avenue

City State Zip Code  
Portland OR 97232

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ron Wyden**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OR District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 16 / 2016

**Transaction ID : B597892**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vertex Pharmaceuticals Incorporated Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Gene Green Congressional Campaign**

Mailing Address PO Box 16128

City Houston State TX Zip Code 77222

Purpose of Disbursement  
Contribution

011

Candidate Name

**Raymond Gene Green**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: TX District: 29

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2016

**Transaction ID : B595372**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Kind for Congress Committee**

Mailing Address 3061 Edgewater Ln

City La Crosse State WI Zip Code 54603

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ron J Kind**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WI District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : B589918**

Amount of Each Disbursement this Period

-1000.00

Memo Item

Voided: Original check dated 12/07/15

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

1500.00

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

15000.00