

# 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 PAC

ADDRESS (number and street) 1201 Maryland Avenue SW Suite 850

Check if different than previously reported. (ACC) Washington DC 20024

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

C C00468660

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 04 / 30 / 2013 in the State of MA

- (d) 30-Day POST-Election Report for the:
- General (30G)  Runoff (30R)  Special (30S)

Election on / / in the State of

5. Covering Period 01 / 01 / 2013 through 04 / 10 / 2013

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

Type or Print Name of Treasurer Samantha Ventimiglia

Signature of Treasurer Samantha Ventimiglia [Electronically Filed] Date 04 / 17 / 2013

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 PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="17838.46"/>	<input type="text" value="17838.46"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="17838.46"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="18309.00"/>	<input type="text" value="18309.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="36147.46"/>	<input type="text" value="36147.46"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="13112.40"/>	<input type="text" value="13112.40"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="23035.06"/>	<input type="text" value="23035.06"/>
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 PAC**

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).....	15162.00	15162.00
(ii) Unitemized .....	3147.00	3147.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	18309.00	18309.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	18309.00	18309.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	18309.00	18309.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	18309.00	18309.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	112.40	112.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	112.40	112.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13000.00	13000.00
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)) ..	13112.40	13112.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13112.40	13112.40

**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) .....	18309.00	18309.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	18309.00	18309.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	112.40	112.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	112.40	112.40

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

Form/Schedule: F3XN  
Transaction ID :

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

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 20
	<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 PAC**

Full Name (Last, First, Middle Initial) <b>A. Stuart Arbuckle</b>		Date of Receipt MM / DD / YYYY 04 / 05 / 2013 <b>Transaction ID : A2013-572254</b>
Mailing Address 130 Waverly Pl		Amount of Each Receipt this Period 192.00
City Cambridge	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 384.00	
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Jefferson Henderson</b>		Date of Receipt MM / DD / YYYY 03 / 08 / 2013 <b>Transaction ID : A2013-257803</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 50.00
City Cambridge	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 250.00	
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Jefferson Henderson</b>		Date of Receipt MM / DD / YYYY 03 / 22 / 2013 <b>Transaction ID : A2013-517527</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 50.00
City Cambridge	State MA	Zip Code 02139
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 300.00	
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	292.00
<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 8 OF 20
<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 PAC**

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

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 05 / 2013  
**Transaction ID : A2013-572240**  
 Amount of Each Receipt this Period  
 50.00

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

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 08 / 2013  
**Transaction ID : A2013-257806**  
 Amount of Each Receipt this Period  
 50.00

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

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 22 / 2013  
**Transaction ID : A2013-517530**  
 Amount of Each Receipt this Period  
 50.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 20
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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 PAC**

**A. Ms. Lisa Kelly**  
Full Name (Last, First, Middle Initial)  
Mailing Address 40 Wyman Rd  
City Lexington State MA Zip Code 02420  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Senior VP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2013  
**Transaction ID : A2013-124536**  
Amount of Each Receipt this Period  
100.00

**B. Ms. Lisa Kelly**  
Full Name (Last, First, Middle Initial)  
Mailing Address 40 Wyman Rd  
City Lexington State MA Zip Code 02420  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Senior VP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 22 / 2013  
**Transaction ID : A2013-216621**  
Amount of Each Receipt this Period  
100.00

**C. Ms. Lisa Kelly**  
Full Name (Last, First, Middle Initial)  
Mailing Address 40 Wyman Rd  
City Lexington State MA Zip Code 02420  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Senior VP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 08 / 2013  
**Transaction ID : A2013-257800**  
Amount of Each Receipt this Period  
100.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 20
<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 PAC**

**A. Ms. Lisa Kelly**  
Full Name (Last, First, Middle Initial)  
Mailing Address 40 Wyman Rd  
City Lexington State MA Zip Code 02420  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Senior VP  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **600.00**

Date of Receipt **03 / 22 / 2013**  
**Transaction ID : A2013-517524**  
Amount of Each Receipt this Period **100.00**

**B. Ms. Lisa Kelly**  
Full Name (Last, First, Middle Initial)  
Mailing Address 40 Wyman Rd  
City Lexington State MA Zip Code 02420  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Senior VP  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **700.00**

Date of Receipt **04 / 05 / 2013**  
**Transaction ID : A2013-572237**  
Amount of Each Receipt this Period **100.00**

**C. Jeff Leiden**  
Full Name (Last, First, Middle Initial)  
Mailing Address 196 Beach Road  
City Glencoe State IL Zip Code 60022  
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 **03 / 26 / 2013**  
**Transaction ID : A2013-525224**  
Amount of Each Receipt this Period **5000.00**

**SUBTOTAL** of Receipts This Page (optional)..... **5200.00**  
**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 20  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated PAC**

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

Mailing Address 130 Waverly

City State Zip Code  
Cambridge MA 02139

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

Name of Employer Occupation  
Vertex Pharmaceuticals Incorporated Manger

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 02 / 22 / 2013  
**Transaction ID : A2013-216635**

Amount of Each Receipt this Period  
60.00

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

Mailing Address 130 Waverly

City State Zip Code  
Cambridge MA 02139

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

Name of Employer Occupation  
Vertex Pharmaceuticals Incorporated Manger

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 03 / 08 / 2013  
**Transaction ID : A2013-257814**

Amount of Each Receipt this Period  
60.00

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

Mailing Address 130 Waverly

City State Zip Code  
Cambridge MA 02139

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

Name of Employer Occupation  
Vertex Pharmaceuticals Incorporated Manger

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 03 / 22 / 2013  
**Transaction ID : A2013-517538**

Amount of Each Receipt this Period  
60.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 20
	<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 PAC**

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

Mailing Address 130 Waverly

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manger

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  
 04 / 05 / 2013

**Transaction ID : A2013-572250**

Amount of Each Receipt this Period  
 60.00

**B. Ms. Megan Pace**  
Full Name (Last, First, Middle Initial)

Mailing Address 33 Milford St #3

City Boston State MA Zip Code 02118

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 ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2013

**Transaction ID : A2013-525223**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 130 Waverly Pl

City Cambridge State MA Zip Code 02139

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 22 / 2013

**Transaction ID : A2013-517541**

Amount of Each Receipt this Period  
 40.00

**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 13 OF 20
<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 PAC**

**A. Michael Partridge**  
Full Name (Last, First, Middle Initial)  
Mailing Address 130 Waverly Pl  
City Cambridge State MA Zip Code 02139  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Manager  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **280.00**

Date of Receipt **04 / 05 / 2013**  
**Transaction ID : A2013-572253**  
Amount of Each Receipt this Period **40.00**

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

Date of Receipt **02 / 08 / 2013**  
**Transaction ID : A2013-124549**  
Amount of Each Receipt this Period **100.00**

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

Date of Receipt **02 / 22 / 2013**  
**Transaction ID : A2013-216634**  
Amount of Each Receipt this Period **100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **240.00**  
**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 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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NAME OF COMMITTEE (In Full)  
**Vertex Pharmaceuticals Incorporated PAC**

Full Name (Last, First, Middle Initial) <b>A. Kimberly Ronan</b>		Date of Receipt 03 / 08 / 2013 <b>Transaction ID : A2013-257813</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 100.00
City Cambridge	State MA	
Zip Code 02139		Aggregate Year-to-Date ▼ 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Kimberly Ronan</b>		Date of Receipt 03 / 22 / 2013 <b>Transaction ID : A2013-517537</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 100.00
City Cambridge	State MA	
Zip Code 02139		Aggregate Year-to-Date ▼ 600.00
FEC ID number of contributing federal political committee. C		
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Kimberly Ronan</b>		Date of Receipt 04 / 05 / 2013 <b>Transaction ID : A2013-572249</b>
Mailing Address 130 Waverly		Amount of Each Receipt this Period 100.00
City Cambridge	State MA	
Zip Code 02139		Aggregate Year-to-Date ▼ 700.00
FEC ID number of contributing federal political committee. C		
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 20
	<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 PAC**

**A. Amit Sachdev**  
Full Name (Last, First, Middle Initial)

Mailing Address 5218 Loughboro Road NW

City Washington State DC Zip Code 20016

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Attorney

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  
 02 / 20 / 2013  
**Transaction ID : A2013-215053**

Amount of Each Receipt this Period  
 5000.00

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

Mailing Address 1201 Maryland Ave SW Ste 850

City Washington State DC Zip Code 20024

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 25 / 2013  
**Transaction ID : A2013-34937**

Amount of Each Receipt this Period  
 150.00

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

Mailing Address 1201 Maryland Ave SW Ste 850

City Washington State DC Zip Code 20024

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

Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2013  
**Transaction ID : A2013-124535**

Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5300.00
<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 16 OF 20
	<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 PAC**

Full Name (Last, First, Middle Initial) <b>A. Ms. Samantha Ventimiglia</b>		Date of Receipt
Mailing Address 1201 Maryland Ave SW Ste 850		<input type="text" value="02"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City Washington State DC Zip Code 20024		<b>Transaction ID : A2013-216620</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Sr Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Ms. Samantha Ventimiglia</b>		Date of Receipt
Mailing Address 1201 Maryland Ave SW Ste 850		<input type="text" value="03"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City Washington State DC Zip Code 20024		<b>Transaction ID : A2013-257799</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Sr Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="750.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Ms. Samantha Ventimiglia</b>		Date of Receipt
Mailing Address 1201 Maryland Ave SW Ste 850		<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City Washington State DC Zip Code 20024		<b>Transaction ID : A2013-517523</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer Vertex Pharmaceuticals Incorporated	Occupation Sr Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="900.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="450.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>



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

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

FOR LINE NUMBER: PAGE 17 OF 20  
(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 PAC**

**A. Ms. Samantha Ventimiglia**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1201 Maryland Ave SW  
Ste 850  
City Washington State DC Zip Code 20024  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vertex Pharmaceuticals Incorporated Occupation Sr Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1050.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 05 / 2013  
**Transaction ID : A2013-572236**  
Amount of Each Receipt this Period  
150.00

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	15162.00

**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 PAC**

Full Name (Last, First, Middle Initial)

**A. Bennet for Colorado**

Mailing Address PO Box 3078

City State Zip Code  
Denver CO 80201

Purpose of Disbursement  
Contribution

011

Candidate Name

**Michael Bennet**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CO District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 21 / 2013

**Transaction ID : B449741**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Committee To Re-Elect Henry Hank Johnson**

Mailing Address 4262 Clausell Court Suite A

City State Zip Code  
Decatur GA 30035

Purpose of Disbursement  
Contribution

011

Candidate Name

**Hank Johnson**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: GA District: 04

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2013

**Transaction ID : B448661**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Scalise for Congress**

Mailing Address PO Box 23219

City State Zip Code  
Jefferson LA 70183

Purpose of Disbursement  
Contribution

011

Candidate Name

**Steve Scalise**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: LA District: 01

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2013

**Transaction ID : B449727**

Amount of Each Disbursement this Period

1000.00

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

3500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vertex Pharmaceuticals Incorporated PAC**

Full Name (Last, First, Middle Initial)

**A. Stephen Lynch for Senate**

Mailing Address 105 Farragut Road

City South Boston State MA Zip Code 02127

Purpose of Disbursement  
Contribution

011

Candidate Name

**Stephen Lynch**

Category/  
Type

Office Sought:  House  
 Senate  
 President

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

State: MA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2013

**Transaction ID : B448664**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. The Markey Committee**

Mailing Address PO Box 526

City Medford State MA Zip Code 02155

Purpose of Disbursement  
Contribution

011

Candidate Name

**Edward J Markey**

Category/  
Type

Office Sought:  House  
 Senate  
 President

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

State: MA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		20		2013

**Transaction ID : B449740**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C. Alexander for Senate 2014 Inc**

Mailing Address 228 S Washington Street Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Contribution

011

Candidate Name

**Lamar Alexander**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TN District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		13		2013

**Transaction ID : B448662**

Amount of Each Disbursement this Period

2500.00
---------

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

7500.00
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Vertex Pharmaceuticals Incorporated PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of John Barrasso**

Mailing Address PO Box 52008

City Casper State WY Zip Code 82605

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**John Barrasso**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: WY District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2013

**Transaction ID : B448663**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

2000.00

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

13000.00