

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Vertex Pharmaceuticals Incorporated Political Action Committee

ADDRESS (number and street)

1050 K Street, NW

Suite 1125

Washington

DC

20001

Check if different
than previously
reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00468660

3. IS THIS
REPORTNEW
(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 M /

D D D /

Y 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 M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

11

D D D /

26

Y Y Y Y Y Y Y

2024

through

M M M /

12

D D D /

31

Y Y Y Y Y Y Y

2024

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

Ventimiglia, Samantha, , ,

Signature of Treasurer

Ventimiglia, Samantha, , ,

Date

M M M /

01

D D D /

10

Y Y Y Y Y Y Y

2025

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Vertex Pharmaceuticals Incorporated Political Action Committee

Report Covering the Period:

From:

M M / D D / Y Y Y Y
11 26 2024

To:

M M / D D / Y Y Y Y
12 31 2024

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2024		178155.90
(b) Cash on Hand at Beginning of Reporting Period.....	165590.28	
(c) Total Receipts (from Line 19)	45397.61	175265.32
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	210987.89	353421.22
7. Total Disbursements (from Line 31)	9000.00	151433.33
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	201987.89	201987.89
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Vertex Pharmaceuticals Incorporated Political Action Committee

Report Covering the Period:

From:

M M / D D / Y Y Y Y
11 26 2024

To:

M M / D D / Y Y Y Y
12 31 2024**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).....

45250.34

150602.70

(ii) Unitemized

147.27

23662.62

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

45397.61

174265.32

(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)

45397.61

174265.32

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

1000.00

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))

45397.61

175265.32

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

45397.61

175265.32

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	433.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	433.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9000.00	149000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	2000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	9000.00	151433.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9000.00	151433.33

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	45397.61	174265.32
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	45397.61	174265.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	433.33
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	433.33

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Alex, Byron, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Medical Affairs Medical Director

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
12 / 19 / 2024**Transaction ID : 32E9BBE4659A41449509**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

B. Altshuler, David, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive VP, Global Research and Ch

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-51**

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

C. Altshuler, David, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive VP, Global Research and Chi

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-74**

Amount of Each Receipt this Period

192.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2884.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Altshuler, David, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive VP, Global Research and Ch

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-16**

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

B. Arbuckle, Stuart, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Vice President and Chief Op

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-3**

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

C. Arbuckle, Stuart, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Vice President and Chief Ope

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 20241216111111-62**

Amount of Each Receipt this Period

192.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Arbuckle, Stuart, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Vice President and Chief Op

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-83**

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

B. Arterton, Jamison, , ,

Mailing Address 3215 Merryfield Row

City
San DiegoState
CAZip Code
92121-1126FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Project Management & Strategic Opera

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-87**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Arterton, Jamison, , ,

Mailing Address 3215 Merryfield Row

City
San DiegoState
CAZip Code
92121-1126FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Project Management & Strategic Operat

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-87**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

212.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Arterton, Jamison, , ,

Mailing Address 3215 Merryfield Row

City
San DiegoState
CAZip Code
92121-1126FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Project Management & Strategic Opera

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-87**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Attias, Philippe, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-64**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Attias, Philippe, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-33**

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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FOR LINE NUMBER: PAGE 10 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Attias, Philippe, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-33**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Auster, Martha, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-76**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Auster, Martha, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-29**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Auster, Martha, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-32**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Baker, Maryellen, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-28**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Baker, Maryellen, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-37**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Baker, Maryellen, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-58**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Barnes, Dawn Marie, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-18**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Barnes, Dawn Marie, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-42**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

130.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Barnes, Dawn Marie, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-51**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Barry, Brian, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-9**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Barry, Brian, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-22**

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Barry, Brian, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-46**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Bennett, Marcy, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Privacy Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-22**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Bennett, Marcy, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Privacy Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-52**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Bennett, Marcy, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Privacy Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-73**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Bhandari, Aman, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Data Strategy & Soluti

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-75**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Bhandari, Aman, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Data Strategy & Soluti

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-20**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Bhandari, Aman, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Data Strategy & Soluti

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-27**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Biller, Jonathan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Vice President and Chief Leg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-46**

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

C. Biller, Jonathan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Vice President and Chief Leg

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-69**

Amount of Each Receipt this Period

192.30

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

394.60

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Biller, Jonathan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Vice President and Chief Leg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-2**

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

B. Bleyl, Kristin, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Center Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-109**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Bleyl, Kristin, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Center Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-112**

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

232.30

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 18 OF 121
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Bleyl, Kristin, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Center Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-111**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Booth, Erin, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Payer Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-115**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Booth, Erin, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Payer Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-108**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Booth, Erin, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Payer Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-110**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Brown, Scott, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-39**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Brown, Scott, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-5**

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Brown, Scott, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-66**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Bruckner, Amy, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Technical Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-83**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Bruckner, Amy, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Technical Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-50**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Bruckner, Amy, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Technical Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024

Transaction ID : 2025010894511-45

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Brunsvold, Elizabeth, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024

Transaction ID : 2024120593310-35

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Brunsvold, Elizabeth, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024

Transaction ID : 2024121611111-9

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Brunsvold, Elizabeth, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-63**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Burgoyne, Lauren, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Specialty Pharmacy Ac

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-108**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Burgoyne, Lauren, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Specialty Pharmacy Ac

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-110**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Burgoyne, Lauren, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Specialty Pharmacy Ac

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024

Transaction ID : 2025010894511-115

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Carney, Lloyd, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
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
12 / 05 / 2024

Transaction ID : BEB15F0198044E9C82E5

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

C. Carroll, Kilpatrick, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Commercial

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024

Transaction ID : 2024120593310-21

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

5040.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Carroll, Kilpatrick, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Commercial

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-53**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Carroll, Kilpatrick, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Commercial

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-69**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Carter, Rachel, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-63**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 25 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Carter, Rachel, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-34**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Carter, Rachel, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-34**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Chiarello, Lauren, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-100**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Chiarello, Lauren, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2024 Transaction ID : 2024121611111-101	
Mailing Address 1050 K St NW Ste 1125			Amount of Each Receipt this Period 30.00	
City Washington	State DC	Zip Code 20001-4954	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated		Occupation (for Individual) Policy & Alliance Development Director		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 780.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Chiarello, Lauren, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2024 Transaction ID : 2025010894511-95	
Mailing Address 1050 K St NW Ste 1125			Amount of Each Receipt this Period 30.00	
City Washington	State DC	Zip Code 20001-4954	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated		Occupation (for Individual) Policy & Alliance Development Director		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 780.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Cooper, Dwayne, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 29 / 2024 Transaction ID : 2024120593310-119	
Mailing Address 50 Northern Ave			Amount of Each Receipt this Period 30.00	
City Boston	State MA	Zip Code 02210-1862	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Vertex Pharmaceuticals Incorporated		Occupation (for Individual) Associate Director, Sales - Pain		
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 630.00		
SUBTOTAL of Receipts This Page (optional).....			90.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Cooper, Dwayne, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Associate Director, Sales - Pain

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-117**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Cooper, Dwayne, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Associate Director, Sales - Pain

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-117**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Cornwell, Hannah, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Federal Government Affairs Associate C

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-102**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 28 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Cornwell, Hannah, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Federal Government Affairs Associate I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-104**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Cornwell, Hannah, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Federal Government Affairs Associate I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-92**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. D'souza, Sarah, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
External Communications Senior Directo

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-6**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. D'souza, Sarah, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
External Communications Senior Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 202412161111-17**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. D'souza, Sarah, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
External Communications Senior Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-49**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Devlin, Nina, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President and Chief Commu

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-30**

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 RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 121

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Devlin, Nina, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President and Chief Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-14**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Devlin, Nina, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President and Chief Comm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-54**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Donnelly, Amy, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Patient and Site E

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-66**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Donnelly, Amy, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Patient and Site E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 202412161111-27**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Donnelly, Amy, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Patient and Site E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-7**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Dorer, James, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Assistant General Counsel, Legal

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-70**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Dorer, James, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Assistant General Counsel, Legal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-4**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Dorer, James, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Assistant General Counsel, Legal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-6**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Dunn, Marissa, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-88**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Dunn, Marissa, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-88**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Dunn, Marissa, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-89**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Edwards, Mathew, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-29**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Edwards, Mathew, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-64**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Edwards, Mathew, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-19**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Fiedler, Krista, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-40**

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Fiedler, Krista, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-68**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Fiedler, Krista, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-20**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Franklin, Stephanie, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President and Chief Human

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-80**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Franklin, Stephanie, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President and Chief Human Resources Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-30**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Franklin, Stephanie, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President and Chief Human Resources Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-29**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Garcia, Julia, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-24**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Garcia, Julia, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Senior M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-38**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Garcia, Julia, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Senior M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-59**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Garry, Thomas, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Payer Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-113**

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Garry, Thomas, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Payer Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-107**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Garry, Thomas, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Payer Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-107**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Grieco, Susan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-10**

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Grieco, Susan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-7**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Grieco, Susan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-62**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Grillot, Anne-Laure, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, External Innovatio

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-45**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Grillot, Anne-Laure, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, External Innovatio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-32**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Grillot, Anne-Laure, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, External Innovatio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-70**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Haider, Arshad, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
External Innovation Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-41**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 41 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Haider, Arshad, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
External Innovation Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-67**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Haider, Arshad, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
External Innovation Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-10**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Harrington, Jenna, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Commercial

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-53**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 42 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Harrington, Jenna, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Commercial

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-80**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Harrington, Jenna, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Commercial

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-1**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Harris, Thelma, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-2**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 43 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Harris, Thelma, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-49**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Harris, Thelma, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-67**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Henry, Danyel, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Policy & Alliance Deve

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-92**

Amount of Each Receipt this Period

40.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Henry, Danyel, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Policy & Alliance Deve

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-98**

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. Henry, Danyel, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Policy & Alliance Deve

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-106**

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. Horgan, Kerry, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Clinical Monitorin

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-71**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Horgan, Kerry, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Clinical Monitorin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-16**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Horgan, Kerry, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Clinical Monitorin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-36**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Horstkotte, Kate, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, Patient Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-55**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Horstkotte, Kate, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, Patient Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-77**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Horstkotte, Kate, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, Patient Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-13**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Ingram II, James, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-97**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Ingram II, James, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-89**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Ingram II, James, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-103**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Jacquis, Michelle, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-52**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Jacquis, Michelle, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-81**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Jacquis, Michelle, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-15**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Jensen, Katharine, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Corporate Responsi

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-5**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 121

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Jensen, Katharine, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Corporate Responsi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 202412161111-18**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Jensen, Katharine, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Corporate Responsi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-48**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Johnson, Daniel, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, North America New Pro

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-38**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 50 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Johnson, Daniel, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, North America New Pro

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024

Transaction ID : 2024121611111-56

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Johnson, Daniel, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, North America New Pro

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024

Transaction ID : 2025010894511-78

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Johnson, Kathleen, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Legal

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024

Transaction ID : 2024120593310-37

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

110.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Johnson, Kathleen, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Legal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-12**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Johnson, Kathleen, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Legal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-61**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Kamrath, Kyle, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-56**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Kamrath, Kyle, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-72**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Kamrath, Kyle, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-24**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Keplinger, Courtney, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Policy & Alliance Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-91**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 53 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Keplinger, Courtney, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Policy & Alliance Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-92**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Keplinger, Courtney, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Policy & Alliance Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-99**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Kewalramani, Reshma, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-69**

Amount of Each Receipt this Period

192.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

252.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 121

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kewalramani, Reshma, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-28**

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

B. Kewalramani, Reshma, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-5**

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

C. Khetarpal, Rani, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, IT Architecture & Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-17**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

414.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Khetarpal, Rani, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, IT Architecture & Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-41**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Khetarpal, Rani, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, IT Architecture & Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-53**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. King, Bryan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Medical Affairs MSL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-118**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. King, Bryan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Medical Affairs MSL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-118**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. King, Bryan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Medical Affairs MSL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-120**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Knop, Jane, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Commercial Training Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-4**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 57 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Knop, Jane, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Commercial Training Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-3**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Knop, Jane, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Commercial Training Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-42**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Kotas, James, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-34**

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

FOR LINE NUMBER: PAGE 58 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Kotas, James, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-8**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Kotas, James, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-64**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Krauss, Kelly, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-33**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Krauss, Kelly, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-43**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Krauss, Kelly, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-72**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Lee, Eric, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Patient Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-8**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 60 OF 121
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Lee, Eric, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Patient Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-58**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Lee, Eric, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Patient Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-77**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Lee, Latasha, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, Policy & Alliance Developmen

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-95**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Lee, Latasha, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, Policy & Alliance Developmen

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-97**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Lee, Latasha, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, Policy & Alliance Developmen

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-105**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Lee, Margaret, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
External Innovation Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-78**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Lee, Margaret, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
External Innovation Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 202412161111-25**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Lee, Margaret, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
External Innovation Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-31**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Lee, Shan-Hwei, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals Inc (US)Occupation (for Individual)
Director, Systems and Strategic Operat

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-47**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Lee, Shan-Hwei, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals Inc (US)Occupation (for Individual)
Director, Systems and Strategic Operat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-51**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Lee, Shan-Hwei, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals Inc (US)Occupation (for Individual)
Director, Systems and Strategic Operat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-75**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Liang, Erin, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Associate Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-26**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 64 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Liang, Erin, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Associate Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-35**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Liang, Erin, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Associate Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-56**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Litner, Jessica, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Business Title Director, Program Opera

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-54**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

90.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Litner, Jessica, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Business Title Director, Program Opera

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-79**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Litner, Jessica, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Business Title Director, Program Opera

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-12**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Liu, Joy, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President & General Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-65**

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 66 OF 121

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Liu, Joy, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President & General Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-6**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Liu, Joy, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President & General Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-9**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Lorio, Christopher, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Commercial Training

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-68**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 67 OF 121
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Lorio, Christopher, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Commercial Training

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-31**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Lorio, Christopher, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Commercial Training

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-4**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Lough, Jean, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-96**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Lough, Jean, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-99**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Lough, Jean, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-97**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Lusignan, Alicia, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Support Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-20**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 69 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Lusignan, Alicia, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Support Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-54**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Lusignan, Alicia, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Support Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-74**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Machado, John, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-1**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Machado, John, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-2**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Machado, John, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
State Government Affairs Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-44**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Macnaught, Eustacia, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President & Chief of Staff, Exter

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-42**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Macnaught, Eustacia, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President & Chief of Staff, Exter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-66**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Macnaught, Eustacia, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President & Chief of Staff, Exter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-14**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Mancini, Mark, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Human Resources E

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-81**

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Mancini, Mark, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Human Resources E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-19**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Mancini, Mark, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-26**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Martin, Avery, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-32**

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Martin, Avery, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-40**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Martin, Avery, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-65**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. McGarry, Lisa, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Health Economics &

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-74**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. McGarry, Lisa, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Health Economics &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-46**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. McGarry, Lisa, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Health Economics &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-37**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. McGoohan, Scott, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Policy & Alliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-105**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

50.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. McGoohan, Scott, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Policy & Alliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-93**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. McGoohan, Scott, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Policy & Alliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-91**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. McGrath, Katherine, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-43**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. McGrath, Katherine, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-65**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. McGrath, Katherine, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-22**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. McKechnie, Duncan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President , Commercial Str

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-15**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. McKechnie, Duncan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President , Commercial Str

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-61**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. McKechnie, Duncan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President , Commercial Str

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-82**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. McKenzie, Diana, , ,

Mailing Address 1209 Waterway Ct

City
WilmingtonState
NCZip Code
28411-8816FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals, Inc.Occupation (for Individual)
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
12 / 27 / 2024**Transaction ID : E45FE4FA1325444EA7CF**

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Meeks, Tracey, A, ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Patient Advocacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-58**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Meeks, Tracey, A, ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Patient Advocacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-73**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Meeks, Tracey, A, ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Patient Advocacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-21**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 79 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Meltzer, Noel, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Medical Science Liaison

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1060.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-114**

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. Meltzer, Noel, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Medical Science Liaison

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1060.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-109**

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. Meltzer, Noel, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Medical Science Liaison

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1060.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-113**

Amount of Each Receipt this Period

35.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

105.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 80 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Mendelsohn, Erin, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Federal Government Affairs Senior Dire

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
11 / 29 / 2024**Transaction ID : 2024120593310-103**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Mendelsohn, Erin, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Federal Government Affairs Senior Dire

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
12 / 13 / 2024**Transaction ID : 2024121611111-105**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Mendelsohn, Erin, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Federal Government Affairs Senior Dire

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
12 / 27 / 2024**Transaction ID : 2025010894511-98**

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Minson, Ryan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, Comm'l Data Mgmt & Field Op

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-61**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Minson, Ryan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, Comm'l Data Mgmt & Field Op

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-84**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Minson, Ryan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, Comm'l Data Mgmt & Field Op

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-39**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 82 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Mohamadi, Ali, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Medical Affairs

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
11 / 29 / 2024**Transaction ID : 2024120593310-7**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Mohamadi, Ali, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Medical Affairs

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
12 / 13 / 2024**Transaction ID : 2024121611111-48**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Mohamadi, Ali, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Medical Affairs

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
12 / 27 / 2024**Transaction ID : 2025010894511-68**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Nathanson, David, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-25**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Nathanson, David, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-39**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Nathanson, David, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-60**

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Negulescu, Paul, , ,

Mailing Address 3215 Merryfield Row

City
San DiegoState
CAZip Code
92121-1126FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President, Disease Area Ex

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-86**

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

B. Negulescu, Paul, , ,

Mailing Address 3215 Merryfield Row

City
San DiegoState
CAZip Code
92121-1126FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President, Disease Area Ex

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-86**

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

C. Negulescu, Paul, , ,

Mailing Address 3215 Merryfield Row

City
San DiegoState
CAZip Code
92121-1126FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President, Disease Area Ex

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-88**

Amount of Each Receipt this Period

15.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 85 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Nicholas, Sharon, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Senior M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-67**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Nicholas, Sharon, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Senior M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-26**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Nicholas, Sharon, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Senior M

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-8**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

90.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Olson, Richard, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, State Govt Affairs & P

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-48**

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

B. Olson, Richard, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, State Govt Affairs & P

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-70**

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

C. Olson, Richard, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, State Govt Affairs & P

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-25**

Amount of Each Receipt this Period

192.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Parta, Abigail, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, State Government A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-62**

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

B. Parta, Abigail, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, State Government /

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-83**

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

C. Parta, Abigail, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, State Government A

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-40**

Amount of Each Receipt this Period

192.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Patel, Dhrupad, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Project Management &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-57**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Patel, Dhrupad, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Project Management &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-71**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Patel, Dhrupad, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Project Management &

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-23**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Pedraza, Roberto, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Payer Account Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-111**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Pedraza, Roberto, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Payer Account Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-114**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Pedraza, Roberto, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Payer Account Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-112**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Prescott, Kelly, M, ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Payer Accounts & F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-106**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Prescott, Kelly, M, ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Payer Accounts & F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-111**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Prescott, Kelly, M, ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Payer Accounts & F

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-116**

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Richter, Kristin, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Federal Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-101**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Richter, Kristin, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Federal Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-103**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Richter, Kristin, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Federal Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-90**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Rodriguez Ruberto, Cecilia, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-112**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Rodriguez Ruberto, Cecilia, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-106**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Rodriguez Ruberto, Cecilia, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Patient Advocacy Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-108**

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Rowan, Elizabeth, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Clinical Scientist Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-11**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Rowan, Elizabeth, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Clinical Scientist Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-10**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Rowan, Elizabeth, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Clinical Scientist Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-52**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 94 OF 121
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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Sachdev, Amit, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
EVP, Chief Patient and External Affair

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
12 / 19 / 2024

Transaction ID : C48186E6521A43B79E5C

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

B. Sachs, Bruce, I, ,

Mailing Address 20 1st Ave S

City
NaplesState
FLZip Code
34102-5945FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Board Member

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
12 / 13 / 2024

Transaction ID : 77CBA1F449CC4F2CAB2A

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

C. Sagon, Lindsey, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024

Transaction ID : 2024120593310-59

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7510.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 95 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Sagon, Lindsey, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-78**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Sagon, Lindsey, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-3**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Savage, Morgan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-12**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Savage, Morgan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-60**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Savage, Morgan, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-79**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Schneider, Jennifer, , ,

Mailing Address 1665 Spring Mountain Rd

City
Saint HelenaState
CAZip Code
94574-1733FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
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
12 / 27 / 2024**Transaction ID : 9A1C3D04054449A0997E**

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5020.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Schumaker, Matthew, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Federal Government Aff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4751.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-89**

Amount of Each Receipt this Period

116.18

☐ Memo Item

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

B. Schumaker, Matthew, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Federal Government At

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4751.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-90**

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

C. Schumaker, Matthew, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Federal Government Aff

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4751.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-90**

Amount of Each Receipt this Period

116.18

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

424.66

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Schumaker, Matthew, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Federal Government Aff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4751.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2024

Transaction ID : 2024121611111-91

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

B. Schumaker, Matthew, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Federal Government At

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4751.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		27		2024

Transaction ID : 2025010894511-100

Amount of Each Receipt this Period

116.18

☐ Memo Item

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

C. Schumaker, Matthew, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Federal Government Aff

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4751.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		27		2024

Transaction ID : 2025010894511-101

Amount of Each Receipt this Period

192.30

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

500.78

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Shah, Pooja, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Associat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-73**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Shah, Pooja, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Associa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-47**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Shah, Pooja, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Associat

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1160.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-38**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Sherlock, Gregory, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, Access Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-36**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Sherlock, Gregory, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, Access Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-63**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Sherlock, Gregory, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, Access Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-41**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Short, Paul, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Access Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-13**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Short, Paul, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Access Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-57**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Short, Paul, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Access Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-80**

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 102 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Shraye, Lisa, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Legal Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-82**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Shraye, Lisa, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Legal Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-11**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Shraye, Lisa, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Director, Legal Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-43**

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 RECEIPTSUse separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Smith, Arthur, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Patient Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Smith, Arthur, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Patient Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-55**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Smith, Arthur, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Patient Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-76**

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Stephens, David, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Process Chemistry Senior Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-19**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Stephens, David, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Process Chemistry Senior Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-21**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Stephens, David, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Process Chemistry Senior Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-50**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Tandon, Suzanne, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Senior C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-14**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Tandon, Suzanne, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Senior I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-59**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Tandon, Suzanne, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Senior D

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-81**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Tatsis, Ourania, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive VP, Chief Regulatory and Qu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-79**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Tatsis, Ourania, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive VP, Chief Regulatory and Qu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Tatsis, Ourania, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive VP, Chief Regulatory and Qu

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-28**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 107 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Tavolaro, Anthony, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Trade & Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-107**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Tavolaro, Anthony, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Trade & Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-115**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Tavolaro, Anthony, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Director, Trade & Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-114**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Thangapazham, Rajesh, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, Regulatory Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-100**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Thangapazham, Rajesh, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, Regulatory Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-94**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Thomas, Monica, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Administrative Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-84**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 109 OF 121
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Thomas, Monica, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Administrative Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-1**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Thomas, Monica, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Administrative Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-84**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Thornberry, Nancy, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals, Inc.Occupation (for Individual)
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
12 / 27 / 2024**Transaction ID : 6E9236AB3D624E729F2E**

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5060.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Townsend, Jennifer, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Associate Director, Access Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-60**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Townsend, Jennifer, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Associate Director, Access Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-82**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Townsend, Jennifer, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Associate Director, Access Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-11**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 111 OF 121
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Townsend, Patrick, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, Trade & Distribution Operati

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-50**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Townsend, Patrick, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, Trade & Distribution Operati

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-76**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Townsend, Patrick, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Director, Trade & Distribution Operati

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-18**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Valentin, Karla, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-16**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Valentin, Karla, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-44**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Valentin, Karla, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-47**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Vallurupalli, Swarna, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Federal Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-99**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Vallurupalli, Swarna, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Federal Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-102**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Vallurupalli, Swarna, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Federal Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-93**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Vandervest, Jason, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Payer Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-110**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Vandervest, Jason, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Payer Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-113**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Vandervest, Jason, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Payer Account Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-109**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Ventimiglia, Samantha, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President, U.S. Public Aff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		29		2024

Transaction ID : 2024120593310-93

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

B. Ventimiglia, Samantha, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President, U.S. Public Aff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2024

Transaction ID : 2024121611111-96

Amount of Each Receipt this Period

192.00

☐ Memo Item

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

C. Ventimiglia, Samantha, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Senior Vice President, U.S. Public Aff

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4992.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		27		2024

Transaction ID : 2025010894511-104

Amount of Each Receipt this Period

192.00

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

576.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 116 OF 121
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Wagner, Charles, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive VP, Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-31**

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

B. Wagner, Charles, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive VP, Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-13**

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

C. Wagner, Charles, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Executive VP, Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-55**

Amount of Each Receipt this Period

75.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Williams, Hannah, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Associat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-104**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Williams, Hannah, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Associa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-94**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Williams, Hannah, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Associat

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-96**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Wotring, Amy, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Senior C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-94**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

B. Wotring, Amy, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Senior I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-95**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Wotring, Amy, , ,Mailing Address 1050 K St NW
Ste 1125City
WashingtonState
DCZip Code
20001-4954FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Policy & Alliance Development Senior D

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-102**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 OF 121

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Yeager, Paul, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Strategic Accounts Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-116**

Amount of Each Receipt this Period

19.00

☐ Memo Item

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

B. Yeager, Paul, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Strategic Accounts Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-119**

Amount of Each Receipt this Period

19.00

☐ Memo Item

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

C. Yeager, Paul, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Strategic Accounts Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

632.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-119**

Amount of Each Receipt this Period

19.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

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

A. Yohai, Sabrina, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Corporate Legal & ESG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 29 / 2024**Transaction ID : 2024120593310-72**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Yohai, Sabrina, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Corporate Legal & ESG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2024**Transaction ID : 2024121611111-15**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Yohai, Sabrina, , ,

Mailing Address 50 Northern Ave

City
BostonState
MAZip Code
02210-1862FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vertex Pharmaceuticals IncorporatedOccupation (for Individual)
Vice President, Corporate Legal & ESG

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2024**Transaction ID : 2025010894511-35**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

45250.34

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 121 OF 121

☐ 21b	☐ 22	☒ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Vertex Pharmaceuticals Incorporated Political Action Committee

Full Name (Last, First, Middle Initial)

A. Arkansas For Leadership Political Action Committee (ARKPAC)

Mailing Address PO Box 1672

City
AlexandriaState
VAZip Code
22313

Purpose of Disbursement

2024 Contribution

011

Candidate Name

Arkansas For Leadership Political Action Committee (ARKPAC)

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☐ General
☒ Other (specify) ▼

Contribution

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2		/	0	5		/	2	0	2	4		

FEC Identification Number

C C00413948

Transaction ID : EDD298D335

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Shaheen For Senate

Mailing Address PO Box 33079

City
WashingtonState
DCZip Code
20033

Purpose of Disbursement

2026 General

011

Candidate Name

Shaheen, Cynthia Jeanne Bower, , ,

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify)

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2		/	1	6		/	2	0	2	4		

FEC Identification Number

C C00457325

Transaction ID : C0A0B5A886!

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Tomorrow Is Meaningful PACMailing Address 7620 Rivers Ave
Ste 370City
North CharlestonState
SCZip Code
29406

Purpose of Disbursement

2024 Contribution

011

Candidate Name

Tomorrow Is Meaningful PAC

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☐ Primary ☐ General
☒ Other (specify) ▼

Contribution

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2		/	0	5		/	2	0	2	4		

FEC Identification Number

C C00495887

Transaction ID : 560B491B47!

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

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

9000.00

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

9000.00