

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXXONMOBIL PAC)

A.	Full Name (Last, First, Middle Initial) FRIENDS OF DOC HASTINGS	Transaction ID: 3490 Date of Disbursement
	Mailing Address PO Box 2926	<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Pasco State WA Zip Code 99302	Amount of Each Disbursement this Period
	Purpose of Disbursement Event on 04/27/2010	<input type="text" value="1000.00"/>
	Candidate Name DOC HASTINGS	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 04	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRIENDS OF JIM MARSHALL	Transaction ID: 3450 Date of Disbursement
	Mailing Address 586 Orange Street	<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City Macon State GA Zip Code 31201	Amount of Each Disbursement this Period
	Purpose of Disbursement Event on 4/14/2010	<input type="text" value="1000.00"/>
	Candidate Name JIM MARSHALL	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MIKE CRAPO FOR US SENATE	Transaction ID: 3473 Date of Disbursement
	Mailing Address P.O. BOX 1948	<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City BOISE State ID Zip Code 83701	Amount of Each Disbursement this Period
	Purpose of Disbursement Event on 5/13/2010	<input type="text" value="1500.00"/>
	Candidate Name MICHAEL D CRAPO	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>