

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)

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| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) FRIENDS OF CLIFF STEARNS</p> <p>Mailing Address PO BOX 308</p> <p>City SILVER SPRINGS State FL Zip Code 34489</p> <p>Purpose of Disbursement Event on 10/29/2010</p> <p>Candidate Name CLIFFORD B. STEARNS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 06</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 4071 Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p> |
| <p>B. Full Name (Last, First, Middle Initial) FRIENDS OF DAVID HARMER</p> <p>Mailing Address 9321 SILVERBEND LANE</p> <p>City ELK GROVE State CA Zip Code 95624</p> <p>Purpose of Disbursement Event on 10/29/2010</p> <p>Candidate Name DAVID JEFFREY HARMER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 4044 Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p> |
| <p>C. Full Name (Last, First, Middle Initial) FRIENDS OF JOHN LOUGHLIN</p> <p>Mailing Address PO BOX 244</p> <p>City ADAMSVILLE State RI Zip Code 02801</p> <p>Purpose of Disbursement Event on 10/29/2010</p> <p>Candidate Name JOHN J II LOUGHLIN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 01</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 4046 Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>011 Category/ Type</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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