

**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)  
**USEC Inc. Political Action Committee (USEC PAC)**

Full Name (Last, First, Middle Initial)

**A. Chuck Fleischmann for Congress Committee, Inc.**

Mailing Address PO Box 11091

City Chattanooga State TN Zip Code 37401

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Charles J. Fleischmann**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: TN District: 03

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2012

**Transaction ID : 96EFCE418210D4DE9BE**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Nuclear Energy Institute Federal Political Action Committee**

Mailing Address 1776 I Street NW 4th Flr

City Washington State DC Zip Code 20006

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**Nuclear Energy Institute Federal Political Action Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼ Contribution

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 09 / 2012

**Transaction ID : 8C0F4F2F384443AC6CA**

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

2000.00

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

2000.00