



Please complete and return.

Business Debt Schedule As of _____

(Must match current interim balance sheet provided)

CREDITOR	ORIGINAL AMOUNT	ORIGINAL DATE OF LOAN	PRESENT BALANCE	INTEREST RATE	MATURITY DATE	MONTHLY PAYMENT	COLLATERAL
TOTAL:							

- INDIVIDUAL AND TOTAL BALANCES MUST MATCH THE CURRENT INTERIM BALANCE SHEET**
- IF NO BUSINESS DEBT - PLEASE INDICATE "NO DEBT" ON FORM, SIGN AND RETURN
 - INDICATE WITH AN ASTERISK (*) ANY LOANS TO BE PAID OFF WITH THE PROCEEDS OF THE PROPOSED LOAN

Signature _____ Title _____ Date _____