

Applicant's Name _____

SUGGESTED FORMAT

OMB No. 3245-0017

SCHEDULE OF LIABILITIES
 (Notes, Mortgages and Accounts Payable)

Date of Schedule _____

Name of Creditor	Original amount	Original date	Current balance	Current or delinquent?	Maturity date	Payment amount (Month- Year)	How Secured

_____ Signed

_____ Title

This form is provided for your convenience in responding to filing requirements in item 2 on the application, SBA Form 5. You may use your own form if you prefer. The information contained in this schedule is a supplement to your balance sheet and should balance to the liabilities presented on that form.