Schedule of Business Debt

Instructions

To be completed by applicant business owner. Please list all outstanding debts of the business and provide all requested information.

Business Name _____ **As of Date*** _____

☐ If your business has **no** outstanding debts, please check this box and sign and date at the bottom of the page

Lender / Debtor	Type of Debt Credit Card, Line of Credit, Term Loan, etc.	Refinance Do you plan to payoff this debt with loan proceeds? (Y/N)	Original Date	Original Balance or Credit Limit	Term (Months)	Interest Rate	Current Balance **	Monthly Payment	SBA Is this an SBA loan? (Y/N)	Current or Past Due	Original Purpose of Debt Equipment Purchase, Operational Expenses, Debt Refinance, etc.	Specific Collateral Securing Debt
						Total	$ $ 0 -	$ $ 0 -				

*Must be same date as the current interim financial statement provided
**Individual and total balances must match the current interim balance sheet provided

I certify the information above to be true and accurate. For any debt to be refinanced, I certify on behalf of the Small Business Applicant, that the proceeds from each debt to be refinanced were used exclusively for the Applicant's business and no portion of the original debt was used for personal expenses, or any other ineligible purpose as set forth in 13 CFR § 120.130*

X _____
Signature

_____
Date

***Click here to review 13 CFR § 120.130

V.1.31.22