

Applicant's Name \_\_\_\_\_

**SUGGESTED FORMAT**

**SCHEDULE OF LIABILITIES**  
**(Notes, Mortgages and Accounts Payable)**

Date of Schedule \_\_\_\_\_

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

\_\_\_\_\_  
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.