

BUSINESS DEBT SCHEDULE

COMPANY NAME: _____

Date: _____

Furnish the following information on all installment debts, credit cards, lines of credit,
leases (non-occupancy), notes and mortgages payable.

Include only the debt as it pertains to the company. Do not include accounts payable or accrued liabilities.

| CREDITOR | ORIGINAL DATE MM/DD/YYYY | ORIGINAL AMOUNT OR LINE OF CREDIT LIMIT | PRESENT BALANCE | INTEREST RATE | MONTHLY PAYMENT | MATURITY DATE MM/DD/YYYY | COLLATERAL/SECURITY | CHECK IF PAYING OFF W/NEW LOAN |
|--------------|-----------------------------|--|--------------------|------------------|--------------------|--------------------------------|---------------------|--------------------------------------|
| | | | | | | | | <input type="checkbox"/> |
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| | | | | | | | | <input type="checkbox"/> |
| | | | | | | | | <input type="checkbox"/> |
| TOTAL | | | \$ - | | \$ - | | | |

By: _____

Date