

BUSINESS DEBT SCHEDULE as of _____ BUSINESS NAME _____

Must be completed, signed, and included with Commercial Loan Application

Direct Debt Business is listed as borrower or obligor						
Creditor Name	Maturity Date	Interest Rate	Original Balance	Current Balance	Monthly Payment	Collateral/Security
Totals			\$	\$	\$	

Contingent Liabilities Guarantor obligations or contingent liabilities not listed above					
Creditor Name	Maturity Date	In Default? (Yes/No)	Total Amount of Debt	Amount or % Guaranteed	
Totals			\$	\$	

I (We) hereby affirm that the information contained in this document is as of the date indicated and is true, complete and correct. I understand the Beneficial State Bank is relying on this statement of financial condition in making loan(s) to me or my business. Beneficial State Bank is authorized to make any investigation of my credit or employment status either directly or through any agency employed by Beneficial State Bank for that purpose. I agree to inform Beneficial State Bank immediately of any matter which will cause any significant change in my /our financial condition. I understand that the Lender will retain this financial statement whether or not credit is granted.

Signature		Signature	
Print Name	Date	Print Name	Date