

OMB Control No: 3245-0007 Expiration Date: 01-31-2010

<u>Instructions:</u> The small business must complete this form and submit it to the surety agent of choice.

## SMALL BUSINESS ADMINSTRATION SCHEDULE OF WORK IN PROCESS (ALL WORK-BONDED & UNBONDED-IF COST PLUS PLEASE INDICATE) **BUSINESS NAME AND BUSINESS TRADE NAME** TAX ID OR SS NUMBER **DATE** AS OF JOB DESCRIPTION STARTING COMPLETION BONDED CONTRACT PRICE **Total Billed to Date Total Estimated Cost To** DATE DATE YES / NO (Including Approved **Including Retainages Total Cost To Date** Complete Change Orders) (Explain Any Dispute Items) 1 3 4 5 6 7 8 9 10 11 12 13 14 **15 TOTALS**

**Signature** Title

PLEASE NOTE: The estimated burden for completing this form is 20 minutes per response. You are not required to respond to any collection of information unless it displays a currently valid OMB approval number. Comments on the burden should be sent to: Chief, Administrative Information Branch, Room 5000, U.S. Small Business Administration, 409 3<sup>rd</sup> St., SW. Washington, DC 20416; and Desk Officer for the Small Business Administration, Office of Management and Budget, New Executive Office Building, Room 10202 Washington, DC 20503.

SBA Form 994F (06-09) Previous Editions are Obsolete