OMB Approval No. 3245-0109 Expiration Date: 02/29/2016



U.S. SMALL BUSINESS ADMINISTRATION (SBA) REQUEST FOR INFORMATION CONCERNING PORTFOLIO FINANCING BY SMALL BUSINESS INVESTMENT COMPANIES (SBICs)

The information requested below obtains voluntary representations from the management of small businesses receiving financing from Small Business Investment Companies (SBICs) to assist in SBA's oversight of the SBIC program. The information is collected by an SBA Examiner as part of an onsite examination to determine SBIC compliance with applicable statutory and regulatory program provisions, including, but not limited to: conflicts of interests, maximum interest rates, use of financing proceeds, and verification of information reported to SBA regarding financing activities. Confidential information will be protected from disclosure to the extent permitted by law, including Exemptions 4, 6, and 8 of the Freedom of Information Act, 5 U.S.C 552.

Please return completed forms within 10 days as directed by the requesting SBA Examiner.			
Na	me of SBIC Name of Small Business		
1.	What are the terms and the unpaid balance of your company's financing from the SBIC?		
2.	Does the SBIC own an equity interest in your company (shares of stock, partnership interest, etc.)? Yes No		
	If 'Yes' please indicate the number of shares, the percentage of ownership, and the purchase price paid for such equity interest:		
3.	the SBIC? Yes No		
	If 'Yes' what are the terms and the conditions of these instruments, including dates, numbers of shares, prices, etc.?		
4.	How were the proceeds of this financing used by your company?		
5.	Are any of the officers, directors or owners of your company related to or affiliated in any way with: (a) The SBIC or its officers, directors or owners? Yes No (b) Any other SBIC or its officers, directors or owners? Yes No		
	If the answer to either question above is 'Yes' please furnish details:		

6. Who were the officers, directors and/or owners of	of your company at the time of the financing?
7. Any other comments or concerns you consider p	pertinent to SBA's examination:
WARNING Du signing halaw you are asknowledge	on that a various matrice for the U.S. Corell Divisions
WARNING By signing below, you are acknowledgir Administration (SBA) and the SBA are relying on this improsecution under 18 U.S.C. 1014, and other statutes, will years, and civil fraud damages of three times the Government	formation, and that false statements can lead to criminal th fines of up to \$1,000,000 and imprisonment of up to 30
I hereby certify that all information provided in this fo	orm is true and correct to the best of my knowledge.
SIGNATURE AND TITLE	DATE
PORTFOLIO COMPANY NAME	

PLEASE NOTE: The estimated burden for completing this form is 1 hour. You are not required to respond to this or any collection of information unless it displays a currently valid OMB approval number. Comments on the burden should be sent to U.S. Small Business Administration, Chief, AlB, 409 3rd St., S.W., Washington D.C. 20416 and Desk Officer for the Small Business Administration, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503 (OMB Approval 3245-0109). **PLEASE DO NOT SEND FORMS TO OMB.**