

OMB Control No: 3245-0007

Expiration Date: XX-XX-XXXX

## SMALL BUSINESS ADMINSTRATION SCHEDULE OF WORK IN PROCESS

**Instructions:** The small business must complete this form and submit it as part of its SBA Form 994, Application for Surety Bond Guarantee Assistance, to the surety agent of choice.

to the	surety agent of choice.							
		(ALL WORK-BC	ONDED & UNBC	ONDED-IF COST I	PLUS PLEASE INC	DICATE)		
BUSINESS NAME AND BUSINESS TRADE NAME:				TAX ID OR SOCIAL SECURITY NUMBER:			DATE AS OF:	
	JOB DESCRIPTION	STARTING DATE	COMPLETION DATE	BONDED YES / NO	CONTRACT PRICE (Including Approved Change Orders)	Total Billed to Date Including Retainages (Explain Any Dispute Items)	Total Cost to Date	Total Estimated Cost to Complete
1								
2								
3								
4								
5								
6								
7								
8 9								
10								
11								
12								
13								
14								
15								
TOTALS								

**PLEASE NOTE:** The estimated burden for completing this form is 15 minutes.. You are not required to respond to any collection of information unless it displays a currently valid OMB Control number (3245-0007). Comments on the burden should be sent to: Director, Records Management Division, Room 5000, U.S. Small Business Administration, 409 3<sup>rd</sup> St., SW. Washington, DC 20416 and/or Desk Officer for the Small Business Administration, Office of Management and Budget, New Executive Office Building, Room 10202 Washington, DC 20503. **PLEASE DO NOT SEND COMPLETED FORMS TO OMB.**