U.S. SMALL BUSINESS ADMINISTRATION 8(a) BUSINESS PLAN

NAME OF COMPANY:				
ADDRESS OF COMPANY:				
CONTACT PERSON:	TELEPHONE NO.:			
	SBA STATEMENT ON REPRESE	NTATIVES AND FEES		
You are not required to use a repr purpose, the following information	esentative to complete this busine must be provided:	ss plan. If you chose to	o hire a represer	tative for this
Names of Representatives and Addresses	Description of Services	Hourly Rate	Amount Paid	Amount Due
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