

**FILL OUT ALL SECTIONS OF THIS FORM BEFORE FILING WITH THE COUNTY CLERK  
AND FIDUCIARY CLERK/COURT – MUST BE COMPLETED WITHIN 30 DAYS OF SALE**

*If this is an E-Filed case, upload this form to NYSCEF as a "Foreclosure Action Surplus Monies Form"*

## **FORECLOSURE ACTION SURPLUS MONIES FORM**

**SUPREME COURT/COUNTY COURT OF THE STATE OF NEW YORK:**

**COUNTY OF** QUEENS

**MORTGAGE ASSETS MANAGEMENT, LLC,**

**Index No.** 723248/2021

**Plaintiff,**

**-against-**

MARIE A. WHITEHEAD, AS HEIR AND DISTRIBUTEE TO  
THE ESTATE OF MARSHA JACQUELINE WHITEHEAD A/K/  
A MARSHA WHITEHEAD A/K/A MARSHA SNEAD; ET AL.,

**Defendant.**

**MORTGAGED PROPERTY:**

13046 217TH ST

SPRINGFIELD GARDENS, NY 11413

**COUNTY:** QUEENS

**SBL #:** Block: 12892 Lot: 77

**Sale Date:** November 11, 2025

### **A. To be completed by the Referee**

1. Final Judgment Amount per Judgment: \$ 667,355.88

2. Adjusted Judgment Amount (Upset Price): \$ 740,000.00

(This is the total amount due to the bank after post-sale disbursements, fees, taxes, utilities, etc.)

3. Sale Price: \$ 740,000.00

(To calculate if there is a surplus, subtract the higher of line 1 or line 2 from line 3 and enter any surplus on line 4)

4. Surplus Amount (enter \$0.00 if no surplus) \$ 0

*\*\*If there are surplus funds, attach proof/receipt that the surplus amount was deposited with the  
Treasurer, Comptroller, Commissioner of Finance, Clerk of Court, etc.*

Referee's TOTAL compensation awarded/fees  
earned in this matter:

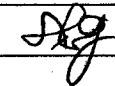
\$ \_\_\_\_\_

Referee Name: Stephanie S. Goldstone

Telephone: 917-498-3253

Address: 2584 Steinway Street, Astoria, NY 11103

Email: sgoldstone500@aol.com

Signature/Date:  11/7/25

*\*If plaintiff is also the purchaser, complete both B. and C.*

### **B. To be completed by Plaintiff's Rep.**

Name: Terence Gee

Address: 144.36 78th Avenue

Flushing, N.Y. 11367

Telephone: 917.324.2033

Email: \_\_\_\_\_

Signature/Date:  11-7-25

### **C. To Be Completed by Purchaser**

Name: Same as plaintiff

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Signature/Date: \_\_\_\_\_