NYSCEF DOC. NO. 52

INDEX NO. 850288/2024---

RECEIVED NYSCEF: 10/15/2025

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

| HILTON RESORTS CORPORATION, | Index No. <u>850288/2024</u> |
|--|---|
| Plaintiff, | MORTGAGED PROPERTY: |
| -against- | 57TH STREET VACATION SUITES 102 West 57th Street New York, NY |
| DAVID HURWITT as Administrator of the Estates of David F. Hurwitt and Susan Hurwitt, | |
| Defendant. | COUNTY: NEW YORK |
| | SBL #: Block 1009 Lot 37 |
| | Sale Date: OCTOBER 15, 2025 |
| To be completed by the Referee | |
| 1. Final Judgment Amount per Judgment: | \$ <u>16,637.91</u> |
| 2. Adjusted Judgment Amount (Upset Price): | \$ 38,424.00 |
| (This is the total amount due to the bank after post-sale | disbursements, fees, taxes, utilities, etc.) |
| 3. Sale Price: | \$ <u>10.00</u> |
| (To calculate if there is a surplus, subtract the higher of | f line 1 or line 2 from line 3 and enter any surplus on line 4) |
| 1. Surplus Amount (enter \$0.00 if no surplus) | \$ 0.00 |
| | t that the surplus amount was deposited with the |
| Treasurer, Comptroller, Commissioner of Finance | , Clerk of Court, etc. |
| Referee's TOTAL compensation awarded/fees | \$ 1,100.00 |
| earned in this matter: | T |
| Referee Name: PAUL SKLAR, ESQ. | Telephone: 917-697-7073 |
| | |
| Address: 551 5TH AVENUE ROOM 220 NEW Y | ORK, NY 10176 |
| Address: 551 5TH AVENUE ROOM 220 NEW Y | Signature/Date: \\ \(\lambda |
| Address: 551 5TH AVENUE ROOM 220 NEW Y | Signature/Date: The Signature 10/ |
| Address: 551 5TH AVENUE ROOM 220 NEW Y | Signature/Date: The Signature 10/ |
| Address: 551 5TH AVENUE ROOM 220 NEW York and selections of the purchaser, complete both B. a | Signature/Date: Jally Siller 10) |
| Address: 551 5TH AVENUE ROOM 220 NEW Y mail: paul@kamberllc.com If plaintiff is also the purchaser, complete both B. a To be completed by Plaintiff's Rep. | Signature/Date: JUSH Siller 10 and C. C. To Be Completed by Purchaser |
| Address: 551 5TH AVENUE ROOM 220 NEW York mail: paul@kamberllc.com If plaintiff is also the purchaser, complete both B. a To be completed by Plaintiff's Rep. Name: CRUSER MITCHELL NOVITZ | Signature/Date: Jole Silver 10) and C. C. To Be Completed by Purchaser Name: CRUSER MITCHELL NOVITZ Address: 341 CONKLIN STREET FARMINGDALE, NY 11735 |
| Address: 551 5TH AVENUE ROOM 220 NEW Y Email: paul@kamberllc.com If plaintiff is also the purchaser, complete both B. a Io be completed by Plaintiff's Rep. Name: CRUSER MITCHELL NOVITZ Address: 341 CONKLIN STREET FARMINGDALE, NY 11735 Telephone: 516-586-8513 | Signature/Date: Jole 10/19 C. To Be Completed by Purchaser Name: CRUSER MITCHELL NOVITZ Address: 341 CONKLIN STREET |
| Address: 551 5TH AVENUE ROOM 220 NEW Y Email: paul@kamberllc.com If plaintiff is also the purchaser, complete both B. a To be completed by Plaintiff's Rep. Name: CRUSER MITCHELL NOVITZ Address: 341 CONKLIN STREET FARMINGDALE, NY 11735 | Signature/Date: Jole Jole 10) and C. C. To Be Completed by Purchaser Name: CRUSER MITCHELL NOVITZ Address: 341 CONKLIN STREET FARMINGDALE, NY 11735 |