FILED: KINGS COUNTY CLERK 10/17/2025 04:10 PM

INDEX NO. 510914/2017

NYSCEF DOC. MALL SECTIONS OF THIS FORM BEFORE FILING WITH THE COUNTY CLERK: 10/17/2025
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:		TATE OF NEW YORK:
	COUNTY OF KINGS	
	Plaintiff, Joan -against-	Index No. 5/09/4/2017  MORTGAGED PROPERTY:  +3 Martene Struct  COUNTY:
	Defendant.	SBL #: B. 5086 4.57
		Sale Date: 10/16/25
Α.	To be completed by the Referee	
3.70	Final Judgment Amount per Judgment:	\$ 520,741.55
	Adjusted Judgment Amount (Upset Price):     (This is the total amount due to the bank after post-sale)	
	Sale Price:     (To calculate if there is a surplus, subtract the higher)	\$ \frac{105,941.32}{\text{ 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)  **If there are surplus funds, attach proof/recei Treasurer, Comptroller, Commissioner of Finance	ipt that the surplus amount was deposited with the
	Referee's TOTAL compensation awarded/fees earned in this matter:	\$
	Referee Name: Dana h Joukins Address: 14 Virgina Aue. Froeport	Telephone: NY 11520   1
	*If plaintiff is also the purchaser, complete both B.	Signature/Date: Signature/Date
В.	To be completed by Plaintiff's Rep.	C. To Be Completed by Purchaser
	Name: Terence Ger	Name: Lasy School
	Address: 184.36 78th Ave	Address: 20 Pine Street APT 1619
	Fhsh-, NY 11367	
	Telephone: 4.7.324.2037	Telephone:
	Email:	Email:
	Signature/Date:	Signature/ Date:
Add	ditional Copies of this Form can be found at <u>https:</u> .	//www.nycourts.gov/forms/foreclasure/