

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 _____

One West Bank

Plaintiff,

-against-

Richard Chiodo

Defendant.

Index No. 135126/2014

MORTGAGED PROPERTY:

137 Jefferson Ave
Staten Island NY 10306

COUNTY: Richmond

SBL #: _____

A. To be completed by the Referee

1. Final Judgment Amount per Judgment: \$ 454,662.60
2. Adjusted Judgment Amount (Upset Price): \$ 545,445.44
(This is the total amount due to the bank after post-sale disbursements, fees, taxes, utilities, etc.)
3. Sale Price: \$ 570,000.-
(to compute surplus, subtract line 3 from higher amount indicated on line 1 or line 2 and enter on line 4)
4. Surplus Amount (enter \$0.00 if no surplus) \$ _____
**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.

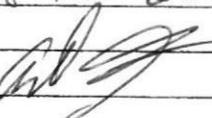
Referee's TOTAL compensation awarded/fees
earned in this matter:

\$ _____

Referee Name: Edward Finkelstein

Telephone: 718-448-8808

Address: 1610 Richmond Road

 11-13-25

Email: Edward.Finkelstein@cmflaw.com

Signature/Date: _____

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

B. To be completed by Plaintiff's Rep.

Name: Joe Casella
Address: 20 Vesey St
NYC NY 10007

Telephone: 631-981-4408

Email: _____

Signature/Date: Joe Casella 11/13/25

C. To Be Completed by Purchaser

Name: Agent: Mina Gavarcjians
Address: 220 Sprague Ave #51

Staten Island NY 10307

Telephone: 917 572 2066

Email: 220spragueave@gmail.com

Signature/ Date: Mina Gavarcjians

Additional Copies of this Form can be found at <https://www.nycourts.gov/forms/foreclosure/>

Rev. 11/19

11/13/25