NYSCEF DOC. NO. 57

INDEX NO. 104128/2007

RECEIVED NYSCEF: 07/25/2025

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

	SUPREME COURT/COUNTY COURT OF THE STATE OF NEW YORK: COUNTY OF	
	New Ret UC.	Index No. 104178/07.
	Plaintiff, -against-	MORTGAGED PROPERTY: 14 your, for Ave 31- NY 103011
	Defendant.	COUNTY: Dichmond.
_		SBL #;
A.	To be completed by the Referee	25
	 Final Judgment Amount per Judgment: 	s <u>क्वि, १५३.69</u>
	Adjusted Judgment Amount (Upset Price): (This is the total amount due to the bank after)	s 37, 200 post-sale disbursements, fees, taxes, utilities, etc.)
	3. Sale Price:	\$3H, ZOO amount indicated on line 1 or line 2 and enter on line 4)
	4. Surplus Amount (enter \$0.00 if no surplus)	\$t that the surplus amount was deposited with the
	Referee's TOTAL compensation awarded/fees earned in this matter:	•
	Referee Name: Alice Sporkers Address: 3974 Am (1)	Telephone: 718 448, 114 5
	*If plaintiff is also the purchaser, complete both B. a	Signature/Day
В.	To be completed by Plaintiff's Rep. Name: D. Mirabella.	C. To Be Completed by Purchaser
	Address: 44 Willis Aut 20/	Name:Address:
	Telephone: 1/2 - 741-1366	Telephone:
	Email: Allirabelle Am Tron	Email:
	Signature/Date:	-25 Signature/ Date:
Add	litional Copies of this Form can be found at https://w	www.nycourts.gov/forms/foreclosure/ Rev. 11/19