

**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 York

WILMINGTON SAVINGS FUND SOCIETY, FSB, NOT
IN ITS INDIVIDUAL CAPACITY, BUT SOLELY AS
OWNER TRUSTEE FOR CSMC 2022-RPL2 TRUST

Index No. 850278/2024

Plaintiff,

-against-

MARIYN WILSON, BOARD OF MANAGERS OF THE STRAND,
WORKERS COMPENSATION BOARD OF THE STATE OF NEW
YORK, NEW YORK CITY PARKING VIOLATIONS BUREAU,
NEW YORK CITY ENVIRONMENTAL CONTROL BOARD

Defendant.

MORTGAGED PROPERTY:

500 West 43rd Street

Apartment 21E

NEW YORK, NY 10036

COUNTY: New York

SBL #: Block 1071 and Lot 1167

Sale Date: September 24, 2025

A. To be completed by the Referee

- Final Judgment Amount per Judgment: \$ 65,146.46
- Adjusted Judgment Amount (Upset Price): \$ 104,393.56
(This is the total amount due to the bank after post-sale disbursements, fees, taxes, utilities, etc.)
- Sale Price: \$ 500,000.00
(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)
- Surplus Amount (enter \$0.00 if no surplus) \$ 395,606.44
***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:

\$ 1,100.00

Referee Name: Ronald V. Zezima, Esq.

Telephone: 914-633-5600

Address: 271 North Avenue, Suite 908, New Rochelle, NY 10801-5117

Email: RVZE59@aol.com

Signature/Date: [Signature] 9/24/25

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

B. To be completed by Plaintiff's Rep.

Name: Gross Polowy LLC

Address: 1775 Wehrle Drive, Suite 100,
Williamsville, NY 14221

Telephone: (716) 204-1700

Email: info@grosspolowy.com

Signature/Date: Kim Cavani 9/24/25

C. To Be Completed by Purchaser

Name: Casey Schear

Address: 20 Pine St Apt 1619
New York, NY 10005

Telephone: 516-455-8812

Email: Caseyschear@gmail.com

Signature/Date: C [Signature] 9/24/25

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