

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 Bronx

Bayview Loan Servicing  
 Plaintiff,

-against-

Luis D. Contrerencia  
 Defendant.

Index No. 32347/2017E

**MORTGAGED PROPERTY:**

1625 Arrow Avenue  
Bronx, NY 10469

COUNTY: Bronx

SBL #: 4184 34

Sale Date: 1/12/2026

**A. To be completed by the Referee**

1. Final Judgment Amount per Judgment: \$ 918,113.03
2. Adjusted Judgment Amount (Upset Price): \$ 700,400.00  
(This is the total amount due to the bank after post-sale disbursements, fees, taxes, utilities, etc.)
3. Sale Price: \$ 701,600.00  
(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)
4. Surplus Amount (enter \$0.00 if no surplus) \$ 0.00  
\*\*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: Joseph T. Jednak Telephone: 718-654-8878

Address: 4345 Webster Ave, Bronx 10470

Email: j.jednak@gmail.com Signature/Date: Joseph T. Jednak

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

**B. To be completed by Plaintiff's Rep.**

Name: Re�ance A/J/S-Ward

Address: 147 Prince Street  
PR 3-37 Brooklyn, NY 11201

Telephone: 6

Email: FwdAuction.com

Signature/Date: D 1/12/2026

**C. To Be Completed by Purchaser**

Name: Kobi Shalton

Address: 160 Riverside Blvd 8B  
New York, NY 10069

Telephone: 646-339-9384

Email: KShalton@yahoo.com

Signature/ Date: Kobi Shalton 1/12/2026

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