

**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 OF THE STATE OF NEW YORK COUNTY OF QUEENS

Index No. 703443/2016

Wilmington Savings Fund Society, FSB, not in its individual capacity but solely in its capacity as Owner Trustee for Cascade Funding Mortgage Trust HB4, Plaintiff,

-against-

Herbert Callahan, Jr., et al,

Defendants.

MORTGAGED PROPERTY:
115-17 167th Street, Jamaica,
NY 11434

COUNTY: Queens

SBL #: Block 12342 Lot 99
Sale Date: 12/12/25

A. To be completed by the Referee

1. Final Judgment Amount per Judgment:

\$ 459,599.56
\$ 529,373.39

2. Adjusted Judgment Amount (Upset Price):
(This is the total amount due to the bank after post-sale disbursements, fees, taxes, utilities, etc.)

3. Sale Price:
(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 in 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:

\$ 1,100.00

Referee Name: JMAN AKBAR
Address: 51 Smith St, Bettenville, NY
E-mail: jmanakbar12@gmail.com

Telephone: 347 234 1753

Signature/Date: 12/12/2025

B. To be completed by Plaintiff's Rep

Name: CRISTINE DeAngelis

Address: 1825 Greenwood Ln

Address: EAST MEADOW NY

E-mail: _____

Telephone: _____

Signature and Date: Cristine DeAngelis 12/12/25

C. To be completed by Purchaser

Name (please print): Plaintiff B

Address: _____

E-mail: _____

Telephone: _____

Signature and Date: _____

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