FILED: KINGS COUNTY CLERK 10/03/2025 10:55 AM

INDEX NO. 516963/2023

NYSCEF DOC. NOLL TOUT ALL SECTIONS OF THIS FORM BEFORE FILING WITH THE COUNTY CLERK: 10/03/2025

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 STA	ATE OF NEW YORK:	
	COUNTY OF KINGS		
	Plaintiff, -against-  Mngo, Justin Defendant	Index No. 5/6963/2023  MORTGAGED PROPERTY:  723 Mardonough Street  HA49  COUNTY:  SBL #:  Sale Date: 10/2/25	
		Sale Date. 10/2/23	
A.	To be completed by the Referee	123 0511 00	
	Final Judgment Amount per Judgment:	\$ 175,054.70	
	<ol><li>Adjusted Judgment Amount (Upset Price): (This is the total amount due to the bank after post-sale</li></ol>	\$ $\frac{197,908.08}{\text{disbursements, fees, taxes, utilities, etc.}}$	
	3. Sale Price:	\$ 400,000.00	
	(To calculate if there is a surplus, subtract the higher o	f line 1 or line 2 from line 3 and enter any surplus on line 4)	
	4. Surplus Amount (enter \$0.00 if no surplus)  **If there are surplus funds, attach proof/receip Treasurer, Comptroller, Commissioner of Finance	\$	
	Referee's TOTAL compensation awarded/fees earned in this matter:	\$	
	Referee Name: Charlane DROWN Address: 72 (US) Stand	Telephone: 5/6-50-765/	
	Email: Chrowy & chrolaw. Con	Signature/Date: 10/2/25	
	*If plaintiff is also the purchaser, complete both B. a		
В.	To be completed by Plaintiff's Rep.	C. To Be Completed by Purchaser	
	Name: GREBG RUR LYL	Name: Mark Kingson	
	Address: 101 b Camyly Rd	Address: 19 Buroof Pl	
	Telephone: 516 605-4518	Telephone:	
	Email: GF VELY NO Suction Par	Email: / / /	
	Signature/Date: 10 /2/25	Signature/ Date: Www.	
Add	Additional Copies of this Form can be found at <a href="https://www.nycourts.gov/forms/foreclosure/">https://www.nycourts.gov/forms/foreclosure/</a>		