

**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 RICHMOND**

DLJ Mortgage Capital, Inc

Index Number: 135197/2014

Plaintiff(s),

Mortgaged Property:

-against-

123 Roe Street, Staten Island, New York 10310

County: RICHMOND

SBL #: 221, 18

Sale Date: January 22, 2026

IBRAHIM S. NABIE; CAPITAL ONE BANK; AMERICAN
EXPRESS; NORTH STAR CAPITAL ACQUISITION, LLC;
NEW YORK CITY DEPARTMENT OF FINANCE; NEW
YORK STATE DEPARTMENT OF TAXATION AND
FINANCE; CAVALRY PORTFOLIO SERVICES, LLC;
UNITED STATES OF AMERICA O/B/O INTERNAL
REVENUE SERVICE; CITY OF NEW YORK
ENVIRONMENTAL CONTROL BOARD;

Defendant(s)

A. To be completed by the Referee

1. Final Judgment Amount Per Judgment

\$ 689,009.90

2. Adjusted Judgment Amount (Upset Price)

\$ 360,000.00

(This is the total amount due to the bank after post-sale disbursements, fees, taxes, utilities, etc.)

3. Sale Price

\$ 1,000.00

(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)

4. Surplus Amount (enter \$0.00 if 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

\$ _____

Referee Name:

T. Murphy

Telephone

718-981-1022

Address:

1457 75th Ave, Flushing, NY 11355

Email:

murphy@tmc.net

Signature/Date

[Signature] 01/22/2026***If plaintiff is also the purchaser, complete both B. and C.****B. To be completed by Plaintiff's Rep.**

Name: Sheldon May & Associates, P.C.

Address: 255 Merrick Road

Rockville Centre, New York 11570

Telephone: (516) 763 – 3200

E-Mail: Information@MayLawFirm.Com

Signature/Date

[Signature] 1/22/26**C. To be completed by Purchaser**

Name:

Address:

Telephone:

E-Mail:

Signature/Date

N/A