

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

TD BANK, N.A.

Index No. 811859/2023E

Plaintiff,

-against-

192 ST. APTS., LLC, et. al.

Defendant.

MORTGAGED PROPERTY:

67 West 192nd Street
Bronx, New York 10468

COUNTY: Bronx

SBL #: Block: 3215; Lot: 64

Sale Date: December 8, 2025

A. To be completed by the Referee

1. Final Judgment Amount per Judgment: \$ 1,671,156.32
2. Adjusted Judgment Amount (Upset Price): \$ 1,600,000
(This is the total amount due to the bank after post-sale disbursements, fees, taxes, utilities, etc.)
3. Sale Price: \$ 1,000
(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
**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: Stephen B. Kaufman, Esq.

Telephone: (718) 822-0500

Address: 3397 East Tremont Avenue, Bronx, New York 10461

Email: skaufman@sbk.nyc

Signature/Date: Stephen S. Kaufman
12/8/25

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

B. To be completed by Plaintiff's Rep.

Name: H. Michael Lynch, Esq.
 Address: 167 Main Street
Northport, New York 11768
 Telephone: (631) 547-1000
 Email: mlynch@hmlaw.com
 Signature/Date: _____

C. To Be Completed by Purchaser

Name: _____
 Address: _____
 Telephone: _____
 Email: _____
 Signature/ Date: _____