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NYSCEF DOC. NO. 120

INDEX NO. 850007/2020

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FORECLOSURE ACTION SURPLUS MONIES FORM

	OUNTY OF New York	
IN ITS	LMINGTON SAVINGS FUND SOCIETY, FSB, NOT ITS INDIVIDUAL CAPACITY BUT SOLELY IN S CAPACITY AS OWNER TRUSTEE FOR	Index No. <u>850007/2020</u>
	SCADE FUNDING MORTGAGE TRUST 2018-RM2 ntiff,	MORTGAGED PROPERTY:
	,	245 WEST 123RD STREET
DON	-against- ALL JLFE, BANK OF AMERICA, N.A., SUCCESSOR BY MERGER TO FLEET NATIONAL	NEW YORK, NY 10027
BANK, FKA FLEET NATIONAL BANK OF CONNECTICUT, FKA SHAWMUT BANK CONNECTICUT, N.A., SUCCESSOR BY MERGER TO GATEWAY BANK, CITY REGISTER OF THE CITY OF NEW YORK, NEW YORK, NEW YORK CITY PARKING VIOLATIONS BUREAU, NEW YORK CITY ENVIRONMENTAL CONTROL BOARD, NEW YORK CITY DEPARTMENT OF HOUSING PRESERVATION AND DEVELOPMENT		
		COUNTY: New York
Def	Defendant.	SBL #: Block 1929, Lot 12
		Sale Date: October 22,2025
	I a consulate d bartha Batana a	
	be completed by the Referee	. 1 244 914 70
1.	Final Judgment Amount per Judgment:	\$ <u>1,344,814.70</u>
2.	Adjusted Judgment Amount (Upset Price):	\$ <u>1,627,706.04</u>
	(This is the total amount due to the bank after post-sale	disbursements, fees, taxes, utilities, etc.)
2	Sale Price:	¢ 1210 and
J.		\$ 1 0 00 000 <u> </u>
	(To calculate if there is a surplus, subtract the higher of	\$
4. Re	(To calculate if there is a surplus, subtract the higher of Surplus Amount (enter \$0.00 if no surplus) **If there are surplus funds, attach proof/receipt Treasurer, Comptroller, Commissioner of Finance eferee's TOTAL compensation awarded/fees	\$t that the surplus amount was deposited with the e, Clerk of Court, etc.
4. Re	(To calculate if there is a surplus, subtract the higher of Surplus Amount (enter \$0.00 if no surplus) **If there are surplus funds, attach proof/receipt Treasurer, Comptroller, Commissioner of Finance eferee's TOTAL compensation awarded/fees arned in this matter:	\$ \$ t that the surplus amount was deposited with the e, Clerk of Court, etc. \$
4. Re	(To calculate if there is a surplus, subtract the higher of Surplus Amount (enter \$0.00 if no surplus) **If there are surplus funds, attach proof/receipt Treasurer, Comptroller, Commissioner of Finance eferee's TOTAL compensation awarded/fees	\$ \$ t that the surplus amount was deposited with the e, Clerk of Court, etc. \$
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4. Ree	(To calculate if there is a surplus, subtract the higher of Surplus Amount (enter \$0.00 if no surplus) **If there are surplus funds, attach proof/receipt Treasurer, Comptroller, Commissioner of Finance eferee's TOTAL compensation awarded/fees arned in this matter: eferee Name: Doron A. Leiby, Esq.	f line 1 or line 2 from line 3 and enter any surplus on line 4) \$ t that the surplus amount was deposited with the e, Clerk of Court, etc. \$ 1,100.00 Telephone: 212-227-4200 NY 10004-1604
4. Ree ea Re Ac Er	Surplus Amount (enter \$0.00 if no surplus) **If there are surplus funds, attach proof/receipt Treasurer, Comptroller, Commissioner of Finance eferee's TOTAL compensation awarded/fees arned in this matter: eferee Name: Doron A. Leiby, Esq. ddress: 32 Broadway, Floor 13, New York,	f line 1 or line 2 from line 3 and enter any surplus on line 4) \$
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4. Ree ea Re Ac Err */:	Surplus Amount (enter \$0.00 if no surplus) **If there are surplus funds, attach proof/receipt Treasurer, Comptroller, Commissioner of Finance eferee's TOTAL compensation awarded/fees arned in this matter: eferee Name: Doron A. Leiby, Esq. ddress: 32 Broadway, Floor 13, New York, mail: f plaintiff is also the purchaser, complete both B. at a be completed by Plaintiff's Rep.	f line 1 or line 2 from line 3 and enter any surplus on line 4) \$
4. Ree each Acceptaintee Accep	Surplus Amount (enter \$0.00 if no surplus) **If there are surplus funds, attach proof/receipt Treasurer, Comptroller, Commissioner of Finance eferee's TOTAL compensation awarded/fees arned in this matter: eferee Name: Doron A. Leiby, Esq. ddress: 32 Broadway, Floor 13, New York, mail: f plaintiff is also the purchaser, complete both B. a be completed by Plaintiff's Rep. ame: Gross Polowy LLC	f line 1 or line 2 from line 3 and enter any surplus on line 4) \$
4. Ree each Acceptaintee Accep	Surplus Amount (enter \$0.00 if no surplus) **If there are surplus funds, attach proof/receipt Treasurer, Comptroller, Commissioner of Finance eferee's TOTAL compensation awarded/fees arned in this matter: eferee Name: Doron A. Leiby, Esq. ddress: 32 Broadway, Floor 13, New York, mail: f plaintiff is also the purchaser, complete both B. at a be completed by Plaintiff's Rep.	f line 1 or line 2 from line 3 and enter any surplus on line 4) \$
4. Ree ea Rei Ac Err */: To No	Surplus Amount (enter \$0.00 if no surplus) **If there are surplus funds, attach proof/receipt Treasurer, Comptroller, Commissioner of Finance eferee's TOTAL compensation awarded/fees arned in this matter: eferee Name: Doron A. Leiby, Esq. ddress: 32 Broadway, Floor 13, New York, mail: f plaintiff is also the purchaser, complete both B. at the be completed by Plaintiff's Rep. ame: Gross Polowy LLC ddress:1775 Wehrle Drive, Suite 100, Williamsville, NY 14221	f line 1 or line 2 from line 3 and enter any surplus on line 4) \$
4. Ree ear Ree Arc Err */: To Na Arc Err Free Err Err Err Err Err Err Err Err Err	Surplus Amount (enter \$0.00 if no surplus) **If there are surplus funds, attach proof/receipt Treasurer, Comptroller, Commissioner of Finance eferee's TOTAL compensation awarded/fees arned in this matter: eferee Name: Doron A. Leiby, Esq. ddress: 32 Broadway, Floor 13, New York, mail: f plaintiff is also the purchaser, complete both B. a be completed by Plaintiff's Rep. ame: Gross Polowy LLC ddress: 1775 Wehrle Drive, Suite 100,	f line 1 or line 2 from line 3 and enter any surplus on line 4) \$