FILED: BRONX COUNTY CLERK 01/14/2025 10:43 AM

NYSCEF DOC. NO. 229

14

INDEX NO. 32134/2016E

Rev. 12/19

RECEIVED NYSCEF: 01/14/2025

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

	FORECLUSURE ACTION SURPLUS INICIALES I ORINI		
	SUPREME COURT/COUNTY COURT OF THE STATE OF NEW YORK:		
	COUNTY OF Blong		
	11/2		Index No. 32134/16
	Plaintiff,		MORTGAGED PROPERTY:
	-against-		Brank, NY 10461
	Giannotti		COUNTY: Bronx
	Defendant.		SBL #:
			Sale Date:
١.	To be completed by the Referee		
	1. Final Judgment Amount per Judgment:	\$_	305,591.58
	2. Adjusted Judgment Amount (Upset Price):		472,400
	(This is the total amount due to the bank after post-sale d	lisburs	sements, fees, taxes, utilities, etc.)
	3. Sale Price:		535,000
	(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) **If there are surplus funds, attach proof/receipt Treasurer, Comptroller, Commissioner of Finance,	that	the surplus amount was deposited with the
	Referee's TOTAL compensation awarded/fees earned in this matter:	\$_	750.
	Referee Name: Juseph Jednak	Tele	ephone:
	Referee Name: Juseph Jednak Address: 4345 Webster Ave,	13	OF HOLKIN XUE
	Email: 15 ean ake Houssand journ ak		
	*If plaintiff is also the purchaser, complete both B. a	'nd C.	JOHANNY RAMINEZ
В.	To be completed by Plaintiff's Rep.	C.	To Be Completed by Purchaser
	Name & Mirchelles		Name: Actor
	Address: 34 Willis Mr #201		Address 113 Liberty AV
	Minesla N/ 11501		Nuje RochellE 10805
	Telephone: 212-741-1366		Telephone: 646 708 2171
	Email: Mivabelle Checkon cu	2	Email:
	Signature/Date: 1-13-25		Signature/ Date:
A	dditional Copies of this Form can be found at https://w	www	nycourts.gov/forms/foreclosure/