

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

Index No. 814427/2021E

Wilmington Living
Plaintiff,

-against-

MORTGAGED PROPERTY:

2600 Henry Hudson Pl
Unit 515

Brookside Altgrace
Defendant.

COUNTY: _____

SBL #: _____

Sale Date: _____

A. To be completed by the Referee

1. Final Judgment Amount per Judgment: \$ 446,843.84

2. Adjusted Judgment Amount (Upset Price): \$ 199,000.00

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

3. Sale Price: \$ 220,000.00

(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) \$ 0.00

**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: Oshrie Zak

Telephone: _____

Address: 165 W End Ave Apt 25B New York, NY

Email: _____

Signature/Date: _____

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

B. To be completed by Plaintiff's Rep.

Name: _____

Address: _____

Telephone: _____

Email: _____

Signature/Date: _____

John O'Keefe
Pinnacle Court Service
49 Andrew Ave
Islip Terrace, NY 11752
631.804.7716

C. To Be Completed by Purchaser

Name: Shohidul Islam Bhuiyan

Address: 282 E 205th St, BA

Bronx NY 10467

Telephone: 917 682 5381

Email: _____

Signature/Date: _____

Additional Copies of this Form can be found at <https://www.nycourts.gov/forms/foreclosure/>