

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 _____

U.S. Bank
Plaintiff,

-against-

Isabel M. Davria,
Defendant.

Index No. 135 205 -15

MORTGAGED PROPERTY:
116 Tyson St SI

COUNTY: Richmond

SBL #: _____

Sale Date: 3/20/25

A. To be completed by the Referee

- Final Judgment Amount per Judgment: \$ 837,730.09
- Adjusted Judgment Amount (Upset Price): \$ 943,306.71
(This is the total amount due to the bank after post-sale disbursements, fees, taxes, utilities, etc.)
- 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)
- 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: \$ 750.00

Referee Name: Daniel Marotta Telephone: 718-390-0555

Address: 1878 Victory Boulevard

Email: daniel.marotta@marotta.com Signature/Date: [Signature] 3/20/2025

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

B. To be completed by Plaintiff's Rep.

Name: William Maza as agent

Address: _____

Telephone: _____

Email: _____

Signature/Date: [Signature]

C. To Be Completed by Purchaser

Name: _____

Address: _____

Telephone: _____

Email: _____

Signature/Date: _____

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