## FILED: NEW YORK COUNTY CLERK 10/10/2024 02:46 PM

NYSCEF DOC. NO. 173

A.

B.

INDEX NO. 850377/2015

RECEIVED NYSCEF: 10/10/2024

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 ST	ATE OF NEW YORK:
COUNTY OF NEW YORK	
	Index No. 850377/2015
CIT BANK, N.A.,	MORTGAGED PROPERTY:
-against- PUBLIC ADMINISTRATOR OF NEW YORK AS	340 WEST 57TH STREET, UNIT 9-E,
	NEW YORK, NY 10019
ADMINISTRATOR OF THE ESTATE OF MARIAN S.	
O'HARA; ET AL,	COUNTY: NEW YORK
Defendant.	SBL #: Section: , Block: 1047, Lot: 1096
	Sale Date: October 9, 2024
To be completed by the Referee	
Final Judgment Amount per Judgment:	\$ <u>642,267.84</u>
<ol> <li>Adjusted Judgment Amount (Upset Price): (This is the total amount due to the bank after post-sale</li> </ol>	
3. Sale Price:	\$
(To calculate if there is a surplus, subtract the higher of	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 prooffreceip  Treasurer, Comptroller, Commissioner of Finance	ot that the surplus amount was deposited with the
Referee's TOTAL compensation awarded/fees earned in this matter:	\$ <u>1,100.00</u>
Referee Name: Shari S. Laskowitz	Telephone: 212-907-9600
Address:	1350 Broadway, NYNY 10018
Email: Slaskowitz@tarter Krimsky.com	M Signature/Date:
*If plaintiff is also the purchaser, complete both B.	
To be completed by Plaintiff's Rep.	C. To Be Completed by Purchaser
Name: Terence Gee	Name:
Address: 144.36 78 14 Avenue.	Address:
Flucking, N.Y. 11367 Telephone: 917.324.2033	
Telephone: 917.324.2033	Telephone:
Email:	Email:
Signature/Date: 7 _ Ju 10.9.24	Signature/ Date: