

**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 OF THE STATE OF NEW YORK
COUNTY OF BRONX**

CHESTNUT FUNDING CORP.

Plaintiff,

Index No. 32054/2017E

-against-

NURUS SAFA; ET. AL,

**MORTGAGED PROPERTY: 1774
POPHAM AVENUE
BRONX, NY 10453
COUNTY: Bronx**

Defendant.

BL #: 2877-451

Sale Date: November 4, 2024 at 2:15PM

A. To be completed by the Referee

1. Final Judgment Amount per Judgment: \$531,571.91
2. Adjusted Judgment Amount (Upset Price): \$ 936,599 —
(This is the total amount due to the bank after post-sale disbursements, fees, taxes, utilities, etc.)
3. Sale Price: \$ 100 —
(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: \$ 750 —

Referee Name: FRANK LOMBARDI Telephone: 945-519-0430

Address: 13 MAPLE HILL DR MANHATTAN NY 10541

Email: _____ Signature/Date: [Signature] 11/4/24

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

B. To be completed by Plaintiff's Rep.

C. To be completed by Purchaser

Name: Chestnut Funding Corp
Address: 565 Tuxedo Road, Elmsford NY
Telephone: (914) 345-3020
Email Address: _____
Signature and Date: _____

Name: _____
Address: _____
Telephone: _____
Email Address: _____
Signature and Date: _____

NOTE TO REFEREE: This form must be filed with the Bronx County Clerk within thirty (30) days of the auction. You must provide a stamped copy to Chambers