

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. 802289/2022E

Municipal Credit Union
Plaintiff,

-against-

Watkins
Defendant.

MORTGAGED PROPERTY:

18 Landingway Unit # 46
BRONX NY. 10464

COUNTY:

SBL #: 5642/1046

Sale Date: 6/9/25

A. To be completed by the Referee

- Final Judgment Amount per Judgment: \$ 445,349.17
- Adjusted Judgment Amount (Upset Price): \$ 489,054.94
(This is the total amount due to the bank after post-sale disbursements, fees, taxes, utilities, etc.)
- Sale Price: \$ 1,000.00
(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)
- Surplus Amount (enter \$0.00 if no surplus) \$ _____
**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: Leticia Arzu Telephone: 914-668-4600
Address: 200 Hamamoneck Ave, Ste 500, White Plains, NY 10601
Email: Larzu@beamanlawfirm.com Signature/Date: [Signature]
*If plaintiff is also the purchaser, complete both B. and C.

B. To be completed by Plaintiff's Rep.

Name: Joe Casella
Address: 20 Vesey St
NYC. NY. 10007
Telephone: 516-805-6103
Email: _____
Signature/Date: Joe Casella 6/9/25

C. To Be Completed by Purchaser

Name: _____
Address: NA
Telephone: _____
Email: _____
Signature/Date: _____

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