

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 QUEENS

WILMINGTON SAVINGS FUND SOCIETY, FSB, D/B/A
 CHRISTIANA TRUST, NOT INDIVIDUALLY BUT AS TRUSTEE
 FOR PRETIUM MORTGAGE ACQUISITION TRUST,

Index No. 723167/2022

Plaintiff,

-against-

ELLIOT STRIKA; NEW YORK CITY PARKING VIOLATIONS BUREAU;
 NEW YORK CITY ENVIRONMENTAL CONTROL BOARD; NEW YORK
 CITY TRANSIT ADJUDICATION BUREAU; SHERYL "DOE" AS "JOHN
 DOE #1"; JOHN DOE AS JOHN DOE #2,

Defendant.

MORTGAGED PROPERTY:

9203 DE SOTA ROAD, ROCKAWAY
BEACH, NY 11693

COUNTY: SUFFOLK

SBL #: 16127-12

Sale Date: MARCH 28, 2025

A. To be completed by the Referee

1. Final Judgment Amount per Judgment: \$ 561,552.99

2. Adjusted Judgment Amount (Upset Price): \$ 585,000.00

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

3. Sale Price: \$ 585,000.00

(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

***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: Gerald Chiariello, II, Esq.

Telephone: 516-801-8100

Address: 147 Glen Street, Glen Cove, NY 11542

Email: gc2@chiariello.com

Signature/Date:  3/28/25

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

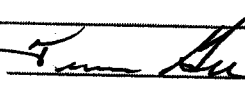
B. To be completed by Plaintiff's Rep.

Name: Terence Gue

Address: 144-36 78th Avenue
Flushing, N.Y. 11367

Telephone: 917.324.2033

Email: _____

Signature/Date:  3.28.25

C. To Be Completed by Purchaser

Name: Same as plaintiff

Address: _____

Telephone: _____

Email: _____

Signature/Date: _____

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