

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

US BANK
Plaintiff,

-against-

RAFAELA RODRIGUEZ
Defendant.

Index No. 35400/2015E

MORTGAGED PROPERTY:

862 Leland Ave
34A

COUNTY: BRONX

SBL #: 3643-1099

Sale Date: _____

A. To be completed by the Referee

- Final Judgment Amount per Judgment: \$ 451,536.15
- Adjusted Judgment Amount (Upset Price): \$ ~~451,536.15~~ 480,294.90
(This is the total amount due to the bank after post-sale disbursements, fees, taxes, utilities, etc.)
- 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)
- 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: \$ _____

Referee Name: Edmond J Pryor Esq Telephone: 718-829-0222

Address: 282 City Island Ave Bx 10464

Email: pryor@pryorlaw.com

Signature/Date: [Signature] 1/27/25

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

B. To be completed by Plaintiff's Rep.

Name: GREGG EVELYN

Address: 1 Old Country Rd
250 CARLE PL

Telephone: 516-605-4589

Email: GREGG@NDAuction.com

Signature/Date: [Signature] 1-27-25

C. To Be Completed by Purchaser

Name: Plaintiff

Address: _____

Telephone: _____

Email: _____

Signature/ Date: _____

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