FILED: RICHMOND COUNTY CLERK 02/20/2025 12:03 PM

NYSCEF DOC. NO. 140

INDEX NO. 135641/2016

RECEIVED NYSCEF: 02/20/2025

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 Richmond	
	Plaintiff, -against- Defendant.	Index No
A.	To be completed by the Referee	
	1. Final Judgment Amount per Judgment:	\$ 311,327.97
	2. Adjusted Judgment Amount (Upset Price): (This is the total amount due to the bank after post-sale	\$ <u>483,197,46</u> disbursements, fees, taxes, utilities, etc.)
	3. Sale Price: (To calculate if there is a surplus, subtract the higher of	\$S
	4. Surplus Amount (enter \$0.00 if no surplus) **If there are surplus funds, attach proof/receipt Treasurer, Comptroller, Commissioner of Finance,	\$ 26,802,51/ that the surplus amount was deposited with the Clerk of Court, etc.
	Referee's TOTAL compensation awarded/fees earned in this matter:	\$
	Referee Name:	Telephone:
	Address:	
	Email: *If plaintiff is also the purchaser, complete both B. an	Signature/Date: 40 20 20 and C.
В.	To be completed by Plaintiff's Rep. Name: B. Minsbelle Address: 34 W. (1,5 hr #ze) I neola My 1/50/ Telephone: 242 74/-1366 Email: Minsbelle Muchon. 2 Signature/Date: 7-70-74	C. To Be Completed by Purchaser Name: Arhen Dzemovsti Address: 8/Archwoon Av 5.7 N.Y 10312 Telephone: 347-885-9063 Email: Arhen840 Iclayd. Com Signature/ Date: 2-20-2025
Additional Copies of this Form can be found at <u>https://www.nycourts.gov/forms/foreclosure/</u> Rev. 12/19		