

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 _____

Index No. 32600/2017 E

Plaintiff,

MARLENE FERRER SAVING AND
LOAN -against-

MORTGAGED PROPERTY:

793 ST. ANN'S AVE
27C

RODOLFO CAMILO, et al.
Defendant.

COUNTY: BRONX, NY

SBL #:

Sale Date: 12/2/24

A. To be completed by the Referee

1. Final Judgment Amount per Judgment: \$ 50,261.43

2. Adjusted Judgment Amount (Upset Price): \$ 69,000.00

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

3. Sale Price: \$ 175,000

(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) \$ 106,000

**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: David Lischt

Telephone: (718) 292-1131

Address: 860 GRAND CONCOURSE

Email: DPLISCHT@AOL.COM

Signature/Date: 12/2/24

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

B. To be completed by Plaintiff's Rep.

Name: Verick Kersialk, Esq.

Address: 65-12 69th Place

Middle Village, NY 11379

Telephone: 718-894-9500

Email: verick@kortegianlaw.com

Signature/Date: [Signature] 12/2/24

C. To Be Completed by Purchaser

Name: Mazy Samad

Address: 147-20 Hillside Ave

Jamaica, NY 11435

Telephone: 718-291-5555

Email: mazy.samad@yahoo.com

Signature/Date: [Signature] 12-2-24

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