

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. \_\_\_\_\_

Plaintiff,

MMG  
-against-  
2710 Morris Ave

MORTGAGED PROPERTY:

2710 Morris Ave

Defendant.

COUNTY: BRONX

SBL #: \_\_\_\_\_

Sale Date: 4/7/25

### A. To be completed by the Referee

1. Final Judgment Amount per Judgment: \$ 12,039.184

2. Adjusted Judgment Amount (Upset Price): \$ \_\_\_\_\_

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

3. Sale Price: \$ 1 million

(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

\$ 750.00

Referee Name: Darryl Solomon

Telephone: \_\_\_\_\_

Address: 55 Disbrow Lane

Email: \_\_\_\_\_

Signature/Date: [Signature] 2024

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

### B. To be completed by Plaintiff's Rep.

Name: Robert [unclear]

Address: 212-593-7800

Telephone: 212-593-7800

Email: \_\_\_\_\_

Signature/Date: [Signature]

### C. To Be Completed by Purchaser

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Signature/Date: \_\_\_\_\_

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