

FORECLOSURE RETURN OF SALE - NO PROCEEDS

JD-CV-97 Rev. 12-22
C.G.S. §§ 49-27, 12-498 (a) (9)

For information on ADA accommodations, contact the Centralized ADA Office at 860-706-5310 or go to: www.jud.ct.gov/ADA/

STATE OF CONNECTICUT
JUDICIAL BRANCH
SUPERIOR COURT
www.jud.ct.gov



Name of case (Plaintiff v. Defendant)		Judicial District	Docket number
Name of seller/committee	E-mail address of seller/committee		Juris number
Address of seller/committee			Telephone number
Name of buyer	E-mail address of buyer		Telephone number
Address of buyer			
Attorney of buyer	E-mail address of attorney of buyer		Juris number
Address of attorney of buyer			Telephone number
Property address/location			

The committee reports:

1. On _____, 2 _____, the court
 - a. approved the sale of the property listed above for \$ _____ and
 - b. accepted the Committee Report.
2. On _____, 2 _____, the court approved the Committee Deed for the sale of the property.
3. On _____, 2 _____,
 - a. the committee held the closing for the property with the buyer's attorney;
 - b. the buyer's attorney paid the committee \$ _____ for:
 - i. court-approved committee fees;
 - ii. court-approved appraiser's fee; and
 - iii. court-approved committee expenses.
4. On _____, 2 _____, the committee paid
 - a. court-approved committee fees;
 - b. court-approved appraiser's fee; and
 - c. court-approved committee expenses.

The committee has brought none of the proceeds from the sale to court because the sales price for the property was less than the judgment debt, interest and costs.

Signed - Seller/Committee	Date
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Certification

I certify that a copy of this document was or will immediately be mailed or delivered electronically or non-electronically on (date) _____ to all attorneys and self-represented parties of record and that written consent for electronic delivery was received from all attorneys and self-represented parties of record who received or will immediately be receiving electronic delivery.

Name and address of each party and attorney that copy was or will be mailed or delivered to*

*If necessary, attach additional sheet or sheets with name and address which the copy was or will be mailed or delivered to.

Signed (Signature of filer)	Print or type name of person signing	Date signed
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