

LINITED STATES DANKDIBTCV COURT FOR THE DISTRICT	OF NEVADA PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED	
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.	
Name of Creditor (the person or other entity to whom the Debtor owes money or property):	☐ Check this box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent:	Court Claim Number: (If known)
9248 Eaton Creek CT.	Filed on: APR - 7 2015
9248 Eaton Creek CT. Las Vegas NV 89123 Telephone number: 702 - 480 - 1462	
Email address: Yealtor unnell Communition	
Name and address where payment should be sent (if different from above):	☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.
	FILED - 00126
	District of Nevada
Telephone number:	Ameri-Dream, LLC
1. Amount of Claim as of Date Case Filed: S 4, 900 + \$228 = \$5/287	
If all or part of the claim is secured, complete item 4.	
If all or part of the claim is entitled to priority, complete item 5.	
☐ Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.	
2. Basis for Claim:	
(See instruction #2)	
3. Last four digits of any number by which creditor identifies debtor: 3.	a. Debtor may have scheduled account as: 3b. Uniform Claim Identifier (optional):
	(See instruction #3a) (See instruction #3b)
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information. Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any:	
	Motor Vehicle Basis for perfection:
Describe:	
Value of Property: \$ Amount of Secured Claim: \$	
Annual Interest Rate% ☐ Fixed or ☐ (when case was filed)	Variable Amount Unsecured: \$
5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.	
Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). Wages, salaries, or commissions (up to Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).	
Up to \$2,775* of deposits toward business ceased, whicheve purchase, lease, or rental of property or services for personal, family, or household use − 11 U.S.C. § 507 (a)(7). the case was filed or the D business ceased, whicheve 11.U.S.C. § 507 (a)(4). Taxes or penalties owed to	r is earlier - Other - Specify applicable paragraph of 11 U S.C. § 507 (a)(_).
governmental units – 11 U.S.C. § 507 (a)(7).	s.c. § # 228 \$5128;
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment / 6. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)	
I D. I FEGUS The amount of all navments on this claim has been credited for the	DIFFORE OF MAKING this proof of claim (See instruction #6)