UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED	
ZHIYI ZHANG	
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	☐ Check this box to indicate that this claim amends a previously filed claim
property): ZHIYI 2HANG LLC	Court Claim Number:
Name and address where notices should be sent:	(If known) castler City Group Les
54 Perennial Border CT	
S4 Perennial Border Ct Las Vegas, NV 89148	Filed on: (MAY - 7 2015)
Los Vegas, no se	
7-2-5-00-6	
Telephone number: 702-505-0959 Email address: libertyeagle 99@ gmail. Com	
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.
Same with above	
1	FILED - 00345
Telephone number: 702-505-0959 Email address /ibertyeagle99@gmail.Com	District of Nevada Ameri-Dream, LLC
1. Amount of Claim as of Date Case Filed: \$ 13,199,97	
If all or part of the claim is secured, complete item 4.	
If all or part of the claim is secured, 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.	
BULLOT ASSAT Commission of TA Dominail Rulant 1 / Attachment	
2. Basis for Claim: Dayer Agent Commission of Strategical Cook Attachment, (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):
	(0
4. Secured Claim (See instruction #4)	(See instruction #3a) (See instruction #3b) Amount of arrearage and other charges, as of the time case
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. was filed, included in secured claim, if any:	
	Motor Vehicle
□ Other	Basis for perfection:
Describe:	
Value of Property: \$	Amount of Secured Claim: \$
	Variable
(when case was filed)	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 \$12,475*) earned within 180 days before plan – 11 U.S C § 507 (a)(5). the case was filed or the Debtor's	
Up to \$2,775* of deposits toward business ceased, whicheve purchase, lease, or rental of property or 11 U.S.C § 507 (a)(4).	er is earlier - Other - Specify applicable paragraph Amount entitled to priority:
services for personal, family, or	\$ /3//77.1
household use – 11 U.S.C § 507 (a)(7). laxes of penalties ower to governmental units – 11 U.S.C § 507 (a)(8).	
*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)	