EXHIBIT “31”

UNITED STATES BANKRUPTCY 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): SNO DRILLING TOOL INC.

Name and address where notices should be sent:
385, 328 CENTER STREET, S.E.
CALGARY, ALBERTA T2G4X6
CANADA

Telephone number: 1-403-263-1689
Email address: sdtusa@shodrill.com

☐ Check this box to indicate that this claim amends a previously filed claim.

Court Claim Number: _____ *(If known)*

Filed on: _____

Garden City Group, LLC
MAR 20 2015

Name and address where payment should be sent (if different from above):

Telephone number:
Email address:

☐ 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 - 00086
District of Nevada
Ameri-Dream, LLC

1. **Amount of Claim as of Date Case Filed:** $ 1,400.00

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:** Security Deposits for Rental of Property
(See instruction #2)

3. **Last four digits of any number by which creditor identifies debtor:** 1045

3a. **Debtor may have scheduled account as:** _____ (See instruction #3a)

3b. **Uniform Claim Identifier (optional):** _____ (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.

Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other

Describe: _____

Value of Property: $_____

Annual Interest Rate _____% ☐ Fixed or ☐ Variable
(When case was filed)

Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: $_____

Basis for perfection: _____

Amount of Secured Claim: $_____

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).

☑ Up to $2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).

☐ Wages, salaries, or commissions (up to $12,475*) earned within 180 days before the case was filed or the Debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).

☐ Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).

☐ Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).

☐ Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(__).

Amount entitled to priority: $1,400.00

**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)

EXHIBIT “32”

UNITED STATES BANKRUPTCY 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): SNO DRILLING TOOL, INC.

Name and address where notices should be sent:
385, 328 CENTRE STREET, S.E.
CALGARY, ALBERTA T2G4X6
CANADA

Telephone number: 1-403-263-1689
Email address: Sdtusa@Snodrill.com

☐ Check this box to indicate that this claim amends a previously filed claim.

Court Claim Number: _____ (If known)

Filed on: _____

Garden City Group, LLC
MAR 20 2015

Name and address where payment should be sent (if different from above):

Telephone number:
Email address:

☐ 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 - 00087
District of Nevada
Ameri-Dream, LLC

1. **Amount of Claim as of Date Case Filed:** $ 3,350.00

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:** Security deposits for rental of property
(See instruction #2)

3. **Last four digits of any number by which creditor identifies debtor:** 1 7 1 1

3a. **Debtor may have scheduled account as:** _____ (See instruction #3a)

3b. **Uniform Claim Identifier (optional):** _____ (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.

Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other

Describe: _____

Value of Property: $_____

Annual Interest Rate _____% ☐ Fixed or ☐ Variable
(when case was filed)

Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: $_____

Basis for perfection: _____

Amount of Secured Claim: $_____

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).

✓ Up to $2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).

☐ Wages, salaries, or commissions (up to $12,475*) earned within 180 days before the case was filed or the Debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).

☐ Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).

☐ Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).

☐ Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(__)

Amount entitled to priority: $2,775.00

**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)

EXHIBIT “33”

UNITED STATES BANKRUPTCY 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): ZHONG WANG HUA (Sun Palm LLC)

Name and address where notices should be sent:
ZHONG WANG HUA (William)
Sun Palm LLC
1025 Loma Verde Dr
Arcadia CA 91006
Telephone number: (626) 617-5328
Email address: ZLJBuse@gmail.com

Name and address where payment should be sent (if different from above):

Telephone number:
Email address:

☐ Check this box to indicate that this claim amends a previously filed claim.

Court Claim Number: _____ (If known)

Filed on: _____

Garden City Group, LLC
MAR 23 2015

☐ 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 - 00091
District of Nevada
Ameri-Dream, LLC

1. **Amount of Claim as of Date Case Filed:** $ 3,719.00

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:** Security Deposit, Rent From Tenant Keep by Debtor
(See instruction #2)

3. **Last four digits of any number by which creditor identifies debtor:** 5 7 6 2

3a. **Debtor may have scheduled account as:** _____ (See instruction #3a)

3b. **Uniform Claim Identifier (optional):** _____ (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.

Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other

Describe: _____

Value of Property: $_____

Annual Interest Rate _____ % ☐ Fixed or ☐ Variable (when case was filed)

Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: $_____

Basis for perfection: _____

Amount of Secured Claim: $_____

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).

☐ Up to $2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).

☐ Wages, salaries, or commissions (up to $12,475*) earned within 180 days before the case was filed or the Debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).

☐ Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).

☐ Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).

☐ Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(__).

Amount entitled to priority: $ 3,719.00

**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)

Modified B10 (GCG) (4/13)

NHW

EXHIBIT “34”

UNITED STATES BANKRUPTCY 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): RICKY KONG

Name and address where notices should be sent:
RICKY KONG
856 VALLOMBROSA DR.
PASADENA, CA 91107

Telephone number: 626-673-2380
Email address: rkong09@yahoo.com

☐ Check this box to indicate that this claim amends a previously filed claim.

Court Claim Number: _____ (If known)

Filed on: _____

Garden City Group, LLC MAR 23 2015

Name and address where payment should be sent (if different from above):

Telephone number:
Email address:

☐ 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 - 00092
District of Nevada
Ameri-Dream, LLC

1. Amount of Claim as of Date Case Filed: $ 2483.00

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: Recovery of Tenant paid rent, fees, deposits + Owner paid deposit
(See instruction #2) Attached Claims Summary

3. Last four digits of any number by which creditor identifies debtor: 2028

3a. Debtor may have scheduled account as: _____ (See instruction #3a)

3b. Uniform Claim Identifier (optional): _____ (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.

Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other

Describe: _____

Value of Property: $ _____

Annual Interest Rate _____ % ☐ Fixed or ☐ Variable
(when case was filed)

Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: $ _____

Basis for perfection: _____

Amount of Secured Claim: $ _____

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).

☑ Up to $2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).

☑ Wages, salaries, or commissions (up to $12,475*) earned within 180 days before the case was filed or the Debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).

☐ Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).

☐ Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).

☑ Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(__).

Amount entitled to priority: $ 2483.00

**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)

Modified B10 (GCG) (4/13)

Attached Claims Summary
Attached Property Management Agreement + Lease Agreement

EXHIBIT “35”

UNITED STATES BANKRUPTCY 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): SEN LANG

Name and address where notices should be sent:

C/O EMILY MOON
LAS VEGAS REAL ESTATES SPECIALTISTS
7582 LAS VEGAS BLVD S. # 568
LAS VEGAS, NV 89123

Telephone number: 702-530-8475
Email address: NANCYLANG88@GMAIL.COM

☐ Check this box to indicate that this claim amends a previously filed claim

Court Claim Number: _____ *(If known)*

Filed on: _____

Garden City Group, LLC MAR 23 2015

Name and address where payment should be sent (if different from above):

SAME AS ABOVE

Telephone number:
Email address:

☐ 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 - 00095
District of Nevada
Ameri-Dream, LLC

1. **Amount of Claim as of Date Case Filed:** $ 5870.00

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.

RE: PROPERTY ADDRESS. 1333 CALLE CANTAR HENDERSON, NV 89014 OWNER: SEN LANG

☐ 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:** JAN OF 2015 RENTAL INCOM OF: $2570.00 CLEANING FEE $300.00 RENTER'S SECURITY DEPOSIT $3000.00 (See instruction #2)

3. **Last four digits of any number by which creditor identifies debtor:** LAST FOUR DIGITS OF SSN 8435

3a. **Debtor may have scheduled account as:** _____ (See instruction #3a)

3b. **Uniform Claim Identifier (optional):** _____ (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.

Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other

Describe: _____

Value of Property: $_____

Annual Interest Rate _____% ☐ Fixed or ☐ Variable (when case was filed)

Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: $_____

Basis for perfection: _____

Amount of Secured Claim: $_____

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).

☑ Up to $2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).

☐ Wages, salaries, or commissions (up to $12,475*) earned within 180 days before the case was filed or the Debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).

☐ Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).

☐ Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).

☐ Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(__).

Amount entitled to priority: $ 2775.00

**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)

Modified B10 (GCG) (4/13)

NHW

EXHIBIT “36”

UNITED STATES BANKRUPTCY 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): JAMES CHUNG

Name and address where notices should be sent:
JAMES CHUNG
P.O.BOX: 1612
FREMONT, CA 94538
Telephone number: 510-589-3680
Email address: acjcchung@aol.com

Name and address where payment should be sent (if different from above):

Telephone number:
Email address:

☐ Check this box to indicate that this claim amends a previously filed claim.

Court Claim Number: BK-S-15-10110-LED (If known)

Filed on: FEB 5, 2015 LAS VEGAS, NV

Garden City Group, LLC MAR 26 2015

☐ 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 - 00099
District of Nevada
Ameri-Dream, LLC

1. **Amount of Claim as of Date Case Filed:** $ 1,850 —

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:** SECURITY DEPOSIT OF RENTAL PROPERTY FOR 1065 UPPER LAUREL ST. LAS VEGAS, NV 89179
(See instruction #2)

3. **Last four digits of any number by which creditor identifies debtor:** DEBTOR'S ACCOUNT USED - JAMES CHUNG - TO IDENTIFY THE CREDITOR — — — —
3a. **Debtor may have scheduled account as:** _____ (See instruction #3a)
3b. **Uniform Claim Identifier (optional):** _____ (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.

Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other

Describe: _____

Value of Property: $_____

Annual Interest Rate _____ % ☐ Fixed or ☐ Variable
(when case was filed)

Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: $_____

Basis for perfection: _____

Amount of Secured Claim: $_____

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).

☒ Up to $2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).

☐ Wages, salaries, or commissions (up to $12,475*) earned within 180 days before the case was filed or the Debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).

☐ Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).

☐ Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).

☐ Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(__).

Amount entitled to priority: $ 1,850 —

**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)

Modified B10 (GCG) (4/13)

EXHIBIT “37”

UNITED STATES BANKRUPTCY 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): Joe H. Zhou and Dora D. Qiu

☐ Check this box to indicate that this claim amends a previously filed claim.

Court Claim Number: _____ *(If known)*

Filed on: _____

Garden City Group, LLC MAR 27 2015

Name and address where notices should be sent:

Joe H. Zhou
3323 Lotus Dr.
Hacienda Heights, CA 91745

Telephone number: 626-677-6689
Email address: jzhou8888@gmail.com

Name and address where payment should be sent (if different from above):

Same as above

Telephone number:
Email address:

☐ 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 - 00101
District of Nevada
Ameri-Dream, LLC

1. **Amount of Claim as of Date Case Filed:** $3,500.00

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:** Security deposit for rental properties
(See instruction #2)

3. **Last four digits of any number by which creditor identifies debtor:** 8219

3a. **Debtor may have scheduled account as:** _____ (See instruction #3a)

3b. **Uniform Claim Identifier (optional):** _____ (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.

Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other

Describe: _____

Value of Property: $_____

Annual Interest Rate _____% ☐ Fixed or ☐ Variable
(when case was filed)

Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: $_____

Basis for perfection: _____

Amount of Secured Claim: $_____

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).

☒ Up to $2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).

☐ Wages, salaries, or commissions (up to $12,475*) earned within 180 days before the case was filed or the Debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).

☐ Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).

☐ Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).

☐ Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(__).

Amount entitled to priority: $3,500.00

**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)

EXHIBIT “38”

UNITED STATES BANKRUPTCY 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): Dave with it Trust

Name and address where notices should be sent:
DAVID MAZZEO
8445 LAS VEGAS Blvd S #2065
LAS VEGAS, NV 89123

Telephone number: 702 521 7891
Email address: davidmazzeo165@aol.com

☐ Check this box to indicate that this claim amends a previously filed claim.

Court Claim Number: 15-10110-LED (If known)

Filed on: 2-25-15 OR 1-9-15

Garden City Group, LLC
MAR 27 2015

Name and address where payment should be sent (if different from above).

Telephone number:
Email address:

☐ 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 - 00103
District of Nevada
Ameri-Dream, LLC

1. **Amount of Claim as of Date Case Filed: $** 1599 -

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:** deposits for property management contract
(See instruction #2)

3. **Last four digits of any number by which creditor identifies debtor:** 2

3a. **Debtor may have scheduled account as:** 2
(See instruction #3a)

3b. **Uniform Claim Identifier (optional):** 2
(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.

Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other

Describe:

Value of Property: $

Annual Interest Rate ____% ☐ Fixed or ☐ Variable
(when case was filed)

Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: $

Basis for perfection:

Amount of Secured Claim: $

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).

☐ Up to $2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).

☐ Wages, salaries, or commissions (up to $12,475*) earned within 180 days before the case was filed or the Debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).

☐ Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).

☐ Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5)

☐ Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(__)

Amount entitled to priority: $ 1599 -

**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)

EXHIBIT “39”

B10 (Official Form 10) (04/13)

UNITED STATES BANKRUPTCY COURT District of Nevada		PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC	Case Number: 15-10110-LED	Garden City Group, LLC MAR 30 2015 COURT USE ONLY

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):
WEIJUN LI and YAO WANG

Name and address where notices should be sent:
WEIJUN LI and YAO WANG
1247 Rousseau Dr
Sunnyvale, CA 94087
Telephone number: (707) 695-4128 email: jensen_liwang@yahoo.com jensen_liwang@yahoo.com

☐ Check this box if this claim amends a previously filed claim.
Court Claim Number: _____ (If known)
Filed on: _____

Name and address where payment should be sent (if different from above):
Same as above
Telephone number: email:

FILED - 00108
District of Nevada
Ameri-Dream, LLC

☐ 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.

1. Amount of Claim as of Date Case Filed: $ 1,350.00

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: $1050 tenant's security deposit and $300 creditor's reserve held in trust by debtor
(See instruction #2)

3. Last four digits of any number by which creditor identifies debtor:	3a. Debtor may have scheduled account as:	3b. Uniform Claim Identifier (optional):
4 0 7 8	N/A (See instruction #3a)	N / A (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.

Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other
Describe:

Value of Property: $_____

Annual Interest Rate _____% ☐ Fixed or ☐ Variable
(when case was filed)

Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any:
$_____

Basis for perfection: _____

Amount of Secured Claim: $_____

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 $12,475*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).

☐ Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).

Amount entitled to priority:

☑ Up to $2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7). $ 1,350.00

☐ Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).

☐ Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(__).

**Amounts are subject to adjustment on 4/01/16 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)

EXHIBIT “40”

UNITED STATES BANKRUPTCY 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): WEI [redacted] HSU & JACQUELYN HSU

Name and address where notices should be sent:
104 EL CERRITO AVE
HILLSBOROUGH, CA 94104

Telephone number: (415) 412-5429
Email address: JACKIEVO@GMAIL.COM

☐ Check this box to indicate that this claim amends a previously filed claim.

Court Claim Number: _____ (If known)

Filed on: _____

Garden City Group, LLC
MAR 30 2015

Name and address where payment should be sent (if different from above):

Telephone number:
Email address:

☐ 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 - 00109
District of Nevada
Ameri-Dream, LLC

1. **Amount of Claim as of Date Case Filed: $** $3,285

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:** $2,460-SECURITY DEPOSIT HELD BY AMERIDREAM FOR PROPERTY AND $825 IN RENT
(See instruction #2)

3. **Last four digits of any number by which creditor identifies debtor:** 0274

3a. **Debtor may have scheduled account as:** _____ (See instruction #3a)

3b. **Uniform Claim Identifier (optional):** _____ (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.

Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other

Describe: _____

Value of Property: $ _____

Annual Interest Rate _____ % ☐ Fixed or ☐ Variable (when case was filed)

Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: $ _____

Basis for perfection: _____

Amount of Secured Claim: $ _____

Amount Unsecured: $ $3,285

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).

☒ Up to $2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).

☐ Wages, salaries, or commissions (up to $12,475*) earned within 180 days before the case was filed or the Debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).

☐ Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).

☐ Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).

☐ Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(__).

Amount entitled to priority: $ $3285

*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)

Modified B10 (GCG) (4/13)