## EXHIBIT "11"

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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 are expense according to 11 U.S.C. § 503.	ises after the bankruptcy filing. You may file a request for payment of an administrative
Name of Creditor (the person or other entity to whom the Debtor owes money or property): Karen Feng	☐ Check this box to indicate that this claim amends a previously filed claim.  Court Claim Number:
9628 Camden Hills Ave Las Vesos, NV 89145	Filed on: (If known)
Telephone number: 702-683-2880 Email address: Jian - Li 2011 @hot mail. 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 - 00247 District of Nevada Ameri-Dream, LLC
	to the principal amount of the claim. Attach a statement that itemizes interest or charges.  154 Month Rent Security
(See instruction #2)	a. Debtor may have scheduled 3b. Uniform Claim Identifier (optional): account as:
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a ri attach required redacted documents, and provide the requested information.  Nature of property or right of setoff:	(See instruction #3a) (See instruction #3b)  Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any:  S  Basis for perfection:
Value of Property: S	Amount of Secured Claim: \$
5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any p 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).  Taxes or penalties owed to governmental units – 11 U.507 (a)(8).	art of the claim falls into one of the following categories, check the box specifying sisions (up to Contributions to an employee benefit 80 days before plan - 11 U.S.C. § 507 (a)(5). ebtor's r is earlier - Cother - Specify applicable paragraph of 11 U.S.C. § 507 (a)(_).  S.C. §
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w	
<ol><li>Credits. The amount of all payments on this claim has been credited for the</li></ol>	purpose of making this proof of claim. (See instruction #6)

## EXHIBIT "12"

	LEARNING COMPANY OF THE PROPERTY OF THE PROPER
UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LEI	
NOTE: Do not use this form to make a cloim for an administrative expense that are expense according to 11 U.S.C. § 503.	ises after the bankruptcy filing. You may file a request for payment of an administrative
Name of Creditor (the person or other entity to whom the Debtor owes money or property): Karen Feng	Check this box to indicate that this claim amends a previously filed claim.  Court Claim Number:
Name and address where notices should be sent:  Karen Feng	(If known)
Karen Feng 9628 Camden Hills Ave	Filed on: WAY - 1 2015
Las Vegas NV 89145  Telephone number: 702-683-2880  Email address: Jian-Li 2011 Chotmail 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 as orbove.	F1LED - 00248 District of Nevada Ameri-Dream, LLC
Email address:  1. Amount of Claim as of Date Case Filed: \$/980.00	
2. Basis for Claim: Security, Koy, Pet (See instruction #2)	s. Debtor may have scheduled  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 rattach required reducted documents, and provide the requested information.  Nature of property or right of setoff: □ Real Estate □ 1  Describe:	Amount of arrearage and other charges, as of the time case sight of setoff, was filed, included in secured claim, if any:  S  Basis for perfection:
Value of Property: S	Amount of Secured Claim: S
Annual Interest Rate % □ Fixed or □ ' (when case was filed)	Variable Amount Unsecured: \$
<ol> <li>Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any p the priority and state the amount.</li> </ol>	oart of the claim falls into one of the following categories, check the box specifying
Domestic support obligations under  11 U.S.C. § 507 (u\chix)(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\chix).  Taxes or penalties owed to governmental units - 11 U.  507 (a)(8).	80 days before plan - 11 U.S.C. § 507 (a)(5). ebtor's r is earlier - Other - Specify applicable paragraph of 11 U.S.C. § 507 (a)(_).  S
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter v	vith respect to cases commenced on or after the date of adjustment.
Condite The amount of all assessments on this abile has been undied for the	and the second s

## EXHIBIT "13"



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT (	DF NEVADA PROOF OF CLAIM		
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED	38		
NOTE: Do not use this form to make a claim for an administrative expense that are expense according to 11 U.S.C § 503.	ses after the bankruptcy filing. You may file a request for payment of an administrative		
Name of Creditor (the person or other entity to whom the Debtor owes money or property): Jusuf Sri M Revocable Trust	Check this box to indicate that this claim amends a previously filed claim.		
Name and address where notices should be sent:  Jusuf Sri M Revocable Trust	Court Claim Number:		
5542 Ryland Ave Temple City, CA 91780	Filed on:		
	WAY - 1 2013		
Telephone number: 6261-272-0380 Email address: m3waty@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.		
	FILED - 00249		
	District of Nevada Ameri-Dream, LLC		
Telephone number: Email address:	, and the state of		
(See instruction #2) Summary, Lease Agreement, Mana	anda Dr, LV NV 89117 (Deposits statement, Deposit gement Agreement attached)  Debter may have scheduled account as:  3b. Uniform Claim Identifier (optional):		
4 4 5 9	(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 attach required reducted documents, and provide the requested information.  Nature of property or right of setoff:    Real Estate   N	Amount of arrearage and other charges, as of the time case		
Value of Property: S	Amount of Secured Claim: \$		
	ariable Amount Unsecured: \$		
<ol> <li>Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any printed the priority and state the amount.</li> </ol>	ort of the cinim falls into one of the following entegories, check the box specifying		
☐ Domestic support obligations under  11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).  22 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)(X).  ☐ Taxes or penalties owed to governmental units - 11 U.S. 507 (a)(8).	0 days before plan – 11 U.S.C. § 507 (a)(5). btor's is carrier – Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(		
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w	ith 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	surpose of making this proof of claim. (See instruction #6)		

### EXHIBIT "14"

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA PROOF OF CLAIM		
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LEI	D	• .	
NOTE: Do not use this form to make a claim for an administrative expense that an expense according to 11 U.S.C. § 503.	rises after the bankruptcy filling. You may file a request for payment of an administra	tive	
Name of Creditor (the person or other entity to whom the Debtor owes money or property): WANG PANG LEE  Name and address where notices should be sent:	Check this box to indicate that this claim amends a previously filed claim.  Court Claim Number:		
WANG PANG LEE	(I known)		
31028 DURHAM DR	Filed on: MAY - 1 2015		
MENIFEE CA 92584	[—————————————————————————————————————		
Telephone number: 951-746-6311 Email address: Wangleeusa@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 relat this claim. Attach copy of statement giving particulars.	ting to	
	FILED - 00250		
Telephone number:	District of Nevada Ameri-Dream, LLC		
Email address:  1. Amount of Claim as of Date Case Filed: \$ 3225		_	
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 HEL (See instruction #2)	D BY AMERI-DREAM (SEE ATT. 1)		
	s. Debtor may have scheduled 3b. Uniform Claim Identifier (optional account as:	)c	
<u> </u>	NANG PANG LEE	-	
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 ri attach required reducted documents, and provide the requested information.	ght of setoff, was filed, included in secured claim, if any:		
Nature of property or right of setoff: ☐ Real Estate ☐ M ☐ Other	Motor Vehicle Basis for perfection:		
Describe:'		.	
Value of Property: S	Amount of Secured Claim: \$		
Annual Interest Rate	Amount Unsecured: \$ 3225		
<ol> <li>Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any patter priority and state the amount.</li> </ol>	art of the claim falls into one of the following categories, check the box specifying	E .	
11 U.S.C. § 507 (n)(1)(A) or (n)(1)(B). \$12,475*) earned within 18 the case was filed or the Del	ttor's		
☐ Up to \$2,775* of deposits toward purchase, lesse, or retrial of property or services for personal, finally, or household use — 11 U.S.C. § 507 (a)(7).  ☐ Taxes or penalties owed to governmental units — 11 U.S. 507 (a)(8).	of 11 U.S.C. § 507 (a)(_).		
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter wi			
<ol><li>Credits. The amount of all payments on this claim has been credited for the p</li></ol>	purpose of making this proof of claim. (See instruction #6)  Modified B10 (GCG	ليب	

## **EXHIBIT** "15"

1			
INITED STATES BANKRUPTCY COURT FOR THE DISTRIC	T OF NEVADA		PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-L	ED		
IOTE: Do not use this form to make a claim for an administrative expense that expense according to 11 U.S.C. § 503.	arises after the ban	kruptcy filing. You me	by file a request for payment of an administrative
Name of Creditor (the person or other entity to whom the Debtor owes money or	r Check this b	ex to indicate that thi	is claim amends a previously filed claim.
roperty): Xiangyu LLC (aka. Yiru Trust)	Court Claim N	fumber:	
Name and address where notices should be sent:			Con and Co
Yiru Truot	-		_ (7/known) 3015
8112 Wapy Sage Way	Filed on:		_ ( way = 1, 2012 )
8112 Wispy Sage Way Las Vagas, NV 89149 Telephone number: (702) 283 2779 Small address: Like 1020 @ Kormail. com			
Small address: Liuke 1020 @ Lormail. Com  Name and address where payment should be sent (if different from above):			hat anyone eise has filed a proof of claim relating to
Same as above	this daim, Atta	ch copy of statement	
Jame as above	1		ED - 00251 ict of Nevada
Feloritors analysis	1		i-Dream, LLC
Felephone number: Email address:			
. Amount of Claim as of Date Case Filed: S 2,417.			
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.			
	n to the principal am	nount of the claim. At	ttach a statement that itamizes interest or charges.
☐ Check this box if the claim includes interest or other charges in addition			
Check this box if the claim includes interest or other charges in addition  Basts for Claim: Security Deposit, Clean			
☐ Check this box if the claim includes interest or other charges in addition		and un	
2. Basis for Claim: 3ecurity Deposit, Clean (See instruction #2)	3a. Debtor may account as:	and un	paid rent.
Check this box if the claim includes interest or other charges in addition  Basis for Claim: Security Deposit, Cleans (See instruction #2)  Last four digits of any number by which creditor identifies debtor:  4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or	3a. Debtor may account as:  (See instrument of setoff,	and un have scheduled nuction #3a)	3b. Uniform Claim Identifier (optional):
Check this box if the claim includes interest or other charges in addition  Basis for Claim: Security Deposit, Clean  (See instruction #2)  Last four digits of any number by which creditor identifies debtor:  4. Secured Claim (See instruction #4)  Check the appropriate box if the claim is secured by a lien on property or attach required reducted documents, and provide the requested information	3a. Debtor may account as:  (See instruction of setoff, st.	and un have scheduled nuction #3a)	3b. Uniform Claim Identifier (optional):  (See instruction #3b)  age and other charges, as of the time case
Check this box if the claim includes interest or other charges in addition  Basis for Claim: Security Deposit, Clean  (See instruction #2)  Last four digits of any number by which creditor identifies debtor:  4. Secured Claim (See instruction #4)  Check the appropriate box if the claim is secured by a lien on property or attach required reducted documents, and provide the requested information	3a. Debtor may account as:  (See instrument of setoff,	have scheduled  nuction #3a)  Amount of arrear was filed, included	3b. Uniform Claim Identifier (optional):  (See instruction #3b)  age and other charges, as of the time case in secured claim, if any:  \$
Check this box if the claim includes interest or other charges in addition  Basis for Claim: Security Deposit, Cleans (See instruction #2)  Last four digits of any number by which creditor identifies debtor:  4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or uttach required reducted documents, and provide the requested information.  Nature of property or right of setoff:	3a. Debtor may account as:  (See instruction of setoff, st.	and un have scheduled nuction #3a)	3b. Uniform Claim Identifier (optional):  (See instruction #3b)  age and other charges, as of the time case in secured claim, if any:  \$
Check this box if the claim includes interest or other charges in addition  Basis for Claim: Security Deposit, Cleans (See instruction #2)  Last four digits of any number by which creditor identifies debtor:  4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or uttach required redacted documents, and provide the requested information  Nature of property or right of setoff:	3a. Debtor may account as:  (See instruction of setoff, st.	have scheduled  nuction #3a)  Amount of arrear was filed, included	3b. Uniform Claim Identifier (optional):  (See instruction #3b)  age and other charges, as of the time case in secured claim, if any:  \$
Check this box if the claim includes interest or other charges in addition  2. Basts for Claim: Security Deposit, Cleans (See instruction #2)  3. Last four digits of any number by which creditor identifies debtor:  4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or uttach required reducted documents, and provide the requested information Nature of property or right of setoff:  Describe:  Value of Property: \$	3a. Debtor may account as:  (See instruction of setoff, st.	have scheduled  ruction #3a)  Amount of arrear was filed, included  Basis for perfection	3b. Uniform Claim Identifier (optional):  (See instruction #3b)  age and other charges, as of the time case d in secured claim, if any:  \$
Check this box if the claim includes interest or other charges in addition  2. Basts for Claim: Security Deposit, Cleans (See instruction #2)  3. Last four digits of any number by which creditor identifies debtor:  4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or uttach required redacted documents, and provide the requested information.  Nature of property or right of setoff:  Describe:  Value of Property: \$	3a. Debtor may account as:  (See instrument of setoff, on.  1) Motor Vehicle	Amount of Secure	3b. Uniform Claim Identifier (optional):  (See instruction #3b)  age and other charges, as of the time case d in secured claim, if any:  \$
Check this box if the claim includes interest or other charges in addition  2. Basts for Claim: Security Deposit, Cleans (See instruction #2)  3. Last four digits of any number by which creditor identifies debtor:  4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or attach required redacted documents, and provide the requested information Nature of property or right of setoff:  Describe:  Value of Property: S  Annual Interest Rate (when case was filled)  5. Amount of Claims Entitled to Priority under 11 U.S.C. § 507 (a). If an the priority and state the amount.  Domestic support obligations under 11 U.S.C. § 507 (a) and within 11 U.S.C. § 507 (a) (a) (1)(B).	3a. Debtor may laccount as:  (See instruction of setoff, on.)  O Wariable  To year of the claims amissions (up to 0 in 100 days before	Amount of Secure	See instruction #3b)  (See instruction #3b)  age and other charges, as of the time case d in secured claims, if any:  \$
Check this box if the claim includes interest or other charges in addition  Basis for Claim: Security Deposit, Cleans (See instruction #2)  Last four digits of any number by which creditor identifies debtor:  Check the appropriate box if the claim is secured by a lien on property or attach required reducted documents, and provide the requested information.  Nature of property or right of setoff:  Describe:  Value of Property: S  Annual Interest Rate (when case was filed)  Annual Interest Rate 10 Other  Value of Property: S  Annual Interest Rate (when case was filed)  Annual Interest Rate (Wages, malaries, or come in U.S.C. § 507 (a) If an the priority and state the amount.  Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).  Vuly to \$2,775° of deposits toward purchase, lease, or rental of property or  11 U.S.C. § 507 (a)(4).	Ja. Debtor may account as:  (See instruction of setoff, inc.)  Distribution of setoff, inc.  Dis	have scheduled  Amount of arrear was filed, included  Basis for perfection  Amount of Secure  Amount Unsecure falls into one of the	3b. Uniform Claim Identifier (optional):  (See instruction #3b)  age and other charges, as of the time case d in secured claim, if any:  \$
Check this box if the claim includes interest or other charges in addition  Describes  Last four Claim: Security Deposit, Cleans (See instruction #2)  Last four digits of any number by which creditor identifies debtor:  Check the appropriate box if the claim is secured by a lien on property or uttach required reducted documents, and provide the requested information.  Nature of property or right of setoff:  Describes:  Value of Property: 5  Annual Interest Rate (when case was filed)  Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If an the priority and state the amount.  Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).  Vup to \$2,775* of deposits toward	Ja. Debtor may account as:  (See instruction of setoff, on.  D Motor Vehicle  O Variable  sy part of the claims  missions (up to 10 in 180 days before e Debtor's ever is earlier — Co	have scheduled  Amount of arrear was filed, included  Basis for perfection  Amount Unsecure falls into one of the  Contributions to an plan - 11 U.S.C. § 2  Other - Specify app	3b. Uniform Claim Identifier (optional):  (See instruction #3b)  age and other charges, as of the time case d in secured claims, if any:  \$
Check this box if the claim includes interest or other charges in addition  Basis for Claim: Security Deposit, Cleans (See instruction #2)  Last four digits of any number by which creditor identifies debtor:  Check the appropriate box if the claim is secured by a lien on property or attach required reducted documents, and provide the requested information.  Nature of property or right of setoff:  Describe:  Value of Property: S  Annual Interest Rate (when case was filed)  Annual Interest Rate 10 Domestic support obligations under 11 U.S.C. § 507 (a). If an the priority and state the amount.  Domestic support obligations under 11 U.S.C. § 507 (a). Wages, salaries, or comparable, lease, or rental of property or services for personal, family, or household use — 11 U.S.C. § 507 (a)(7).	Ja. Debtor may account as:  (See instruction of setoff, on.)  Discontinuous of setoff, on.  Disc	have scheduled  have scheduled  Amount of arrear was filed, included  Basis for perfection  Amount of Secure  Amount Unsecure falls into one of the  Contributions to an plan – 11 U.S.C. § 507	See instruction #3b)  (See instruction #3b)  age and other charges, as of the time case d in secured claim, if any:  S  ed:  S  following estegories, check the box specifying  employee benefit  507 (a)(5).  plicable paragraph  (eX    1 7 45,00

## EXHIBIT "16"

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA	PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LE	D	
NOTE: Do not use this form to make a claim for an administrative expense that a expense according to 11 U.S.C. § 503.	orises after the bankruptcy filing. You	may file a request for payment of an administrative
Name of Creditor (the person or other entity to whom the Debter owes money or property): Stephen Mok		t this claim amonds a previously filed claim.
Name and address where notices should be sent:  Stephen Mok.  9828 Meandering Creek Ct	Court Claim Number:	(If known)
Las Vegas, NV 89117	Filed on.	- (MAY - 1 2015)
Telephone number: 702-480-7234		
Email address. mikecheung702@hotmail.com  Name and address where payment should be sent (if different from above)	Check this box if you are awar this claim. Attach copy of statem	re that anyone else has filed a proof of claim relating to nent giving particulars.
		FILED - 00252 District of Nevada
Telephone number: Ernail address:		meri-Dream, LLC
Amount of Claim as of Date Case Filed: 5 1,500.00		
	andering Creek Ct, LV NV 8	Attach a statement that itemszes interest or charges. 39117 (Deposits statement, Deposit Summa
	3a. Debtor may have scheduled account as:	3b. Uniform Claim Identifier (optional):
3 5 4 7	(See instruction #3a)	(See instruction #3b)
<ol> <li>Secured Claim (See instruction #4)         Check the appropriate box if the claim is secured by a lien on property or a attach required redacted documents, and provide the requested information.     </li> <li>Nature of property or right of setoff:          Real Estate     </li> </ol>	right of setoff, was filed, inclu	earage and other charges, as of the time case ded in secured chaim, if any:
Describe:	Basis for perfe	ction:
Value of Property: S	Amount of Sec	ured Claim: S
Annual Interest Rate	I Variable Amount Unsec	ured: \$
<ul> <li>Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any the priority and state the amount.</li> <li>□ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).</li> <li>□ Wages, salaries, or commulators (a)(1)(B) (b)(B)(B)(B)(B)(B)(B)(B)(B)(B)(B)(B)(B)(B)</li></ul>	rissions (up to 🔲 Contributions to	an employee benefit
the case was filed or the I  Up to \$2,775* of deposits toward  purchase, lease, or rental of property or  11 U.S.C. § 507 (a)(4)		applicable paragraph Amount entitled to priority: 7 (a)(). \$ 1,500.00
services for personal, family, or bousehold use − 11 U.S.C. § 507 (a)(7).  □ Taxes or penalties owed to governmental units − 11 U.507 (a)(8).		3 11000:00
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter	with respect to cases commenced or	or after the date of adjustment.
6. Credits. The amount of all payments on this claim has been credited for the	e purpose of making this proof of cla	im. (See instruction #6)  Modified B19 (GCG) (4/13)

## **EXHIBIT** "17"



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT O	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 are expense according to 11 U.S.C. § 503.	es after the bankruptcy filing. You may file a req	quest for payment of an administrative	
Name of Creditor (the person or other entity to whom the Debter owes money or property) Starlight Investments LLC	☐ Check this box to indicate that this claim am	nends a previously filed claim.	
Name and address where notices should be sent	Court Claim Number:		
Starlight Investments LLC	(If kno	nem)	
7275 Tara Ave.,		den City Grave	
Las Vegas, NV 89117	Filed on:	(3) ×3	
		MAY = 1 2015	
Telephone number: 702-480-7234			
Email address: RealtorMikeCheung@yahoo.com			
Name and address where payment should be sent (if different from above)	☐ Check this box if you are aware that anyone this claim. Attach copy of statement giving par		
	FILED - 00253		
	District of Nevada		
Telephone number: Email address:	Ameri-Dream, LLC	3	
Amount of Claim as of Date Case Filed: S 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: Refundable Deposits of 644 Rolling Valley Way, Henderson NV 89015 (Deposits statement, Lease			
(See instruction #2) Agreement, Management Agreeme		1	
Last four digits of any number by which creditor identifies debtor:     Ja	Debtor may have scheduled 3b. Us account as:	niform Claim Identifier (optional):	
9 2 9 0			
	(See instruction #3a)	(See instruction #3b)	
<ol> <li>Secured Claim (See instruction #4)         Check the appropriate box if the claim is secured by a lien on property or a rigatach required reducted documents, and provide the requested information.     </li> </ol>		her charges, as of the time case d claim, if any:	
	otor Vehicle	s	
Describe:	Basis for perfection:		
Value of Property: S	Amount of Secured Claim:	s	
	ariable .		
(when case was filed)	Amount Unsecured:	5	
<ol> <li>Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any pathe priority and state the amount.</li> </ol>			
☐ Domestic support obligations under  IT U.S.C. § 507 (a)(1)(A) or (a)(1)(B).  \$12.475*) earned within 18	days before plan = 11 U.S.C. § 507 (a)(5).	enefit	
the case was filed or the De business ceased, whichever	is earlier - Other - Specify applicable para	graph Amount entitled to priority:	
purchase, lease, or rental of property or services for personal, family, or	of 11 U.S.C. § 507 (a)().	s 1,350.00	
household use = 11 U S C. § 507 (a)(7)  Taxes or penalties owed to governmental units = 11 U S 507 (a)(8).	C §	-	
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w	th respect to cases commenced on or ofter the de	ate of adjustment.	
6. Credits. The amount of all payments on this claim has been credited for the p			
the state of the s	The state of the s		

# **EXHIBIT** "18"

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	T OF NEVADA PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LE	
NOTE: Do not use this form to make a claim for an administrative expense that expense according to 11 U.S.C. § 503.	anses after the bankruptcy filing. You may file a request for payment of an administrative
Name of Creditor (the person or other entity to whom the Debtor owes money or property) Starlight Investments LLC	
Name and address where notices should be sent: Starlight Investments LLC 7275 Tara Ave., Las Vegas, NV 89117	Filed on:
Telephone number. 702-480-7234 Email address. RealtorMikeCheung@yahoo.com	
Name and address where payment should be sent (if different from above)  Telephone number.	☐ 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 = 00254  District of Nevada  Ameri-Dream, LLC
Basis for Claim: Refundable Deposits of 5536 W V	to the principal amount of the claim, Attach a statement that itemizes interest or charges.  Viking Rd., LV NV 89103 (Deposits statement, Lease Agreement,
(See instruction #2) Management Agreement, LLC Art 3. Last four digits of any number by which creditor identifies debtor:  9 2 9 0	Ja. Debtor may have scheduled account as:  Jb. Uniform Claim Identifier (optional):
Secured Claim (See instruction #4)     Check the appropriate box if the claim is secured by a lien on property or a stack required reducted documents, and provide the requested information.	
Value of Property: S	Amount of Secured Claim: 5
	part of the claim falls into one of the following categories, check the box specifying  missions (up to 180 days before plan - 11 U.S.C. § 507 (a)(5).  Debtor's ver is earlier - Other - Specify applicable paragraph of 11 U.S.C. § 507 (a)(2).  to U.S.C. §
Credits, The amount of all payments on this claim has been credited for the	

# **EXHIBIT** "19"



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 filling. 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): Stephen Mok, Donglei S Hu	TO PROTOCOLOGICA CONTROLLA		
Name and address where notices should be sent: Stephen Mok, Donglei S Hu 9828 Meandering Creek Ct Las Vegas, NV 89117	Filed on:		
Telephone number: 702-480-7234 Emuil address: mikecheung702@hotmail.com			
Name and address where payment should be sent (if different from above)  Telephone number:	□ 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 - 00255  District of Nevada		
I. Amount of Claim as of Date Case Filed: S 1,550.00  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	o the principal amount of the claim. Attach a statement that itemizes interest or charges.		
	ell Av, LV NV 89147 (Deposits statement, Deposit Summary,		
	behter may have scheduled account as:  3b. Uniform Claim Identifier (optional):		
<u> </u>	(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 riattach required reducted documents, and provide the requested information  Nature of property or right of setoff:  □ Real Estate □ F □ Other  Describe:	Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any:  S  Basis for perfection:		
	Amount of Secured Claim: 5		
	Amount Unsecured: \$ art of the claim fulls 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) \$12,475*) earned within 11 the case was filed or the Dousiness ceased, whichever purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).  Taxes or penalties owed to governmental units – 11 U.507 (a)(8).	esions (up to 30 days before plan - 11 U.S.C. § 507 (a)(5).  chtor's r is earlier - Other - Specify applicable paragraph of 11 U.S.C. § 507 (a)(_).  S.C. §		
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w  6. Credits. The amount of all payments on this claim has been credited for the			
the amount of an payments on this claim has been credited for the	purpose of making this proof of claim (See instruction wo)		

## EXHIBIT "20"

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA PROOF OF CLAIM	
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LEI	D	
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filling. You may file a request for payment of an administrative expense according to 11 U.S.C. 6 503.		
Name of Creditor (the person or other entity to whom the Debtor owes money or property): Shao Fen Huang	☐ Check this box to indicate that this claim amends a previously filed claim.  Court Claim Number:	
Name and address where notices should be sent Shao Fen Huang		
	10 ranged Con 1. Col	
7373 W. Shelbourne Av Las Vegas, NV 89113	Filed on: (3 MAY - 1 2015	
Telephone number: 702-768-8370		
Email address: mikecheunq702@hotmail.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.	
	FILED - 00256	
Telephone sumber	District of Nevada	
Telephone number: Email address:	Ameri-Dream, LLC	
	to the principal amount of the claim. Attach a statement that isemizes interest or charges.  el St., LV NV 89118 (Deposits statement, Deposit Summary,	
(See instruction #2) Lease Agreement, Management Agreement attached)		
300 100 100 100 100 100 100 100 100 100	a. Debtor may have scheduled account as:  3b. Uniform Claim Identifier (optional):	
3 0 8 1	(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 rattach required redacted documents, and provide the requested information.  Nature of property or right of setoff:  □ Real Estate □ Other  Describe:	Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any:  S  Basis for perfection:	
Value of Property: S	Amount of Secured Claim: \$	
Annual Interest Rate	Variable Amount Unsecured: \$	
<ol> <li>Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any p the priority and state the amount.</li> <li>Domestic support obligations under</li> <li>Wages, salaries, or commit</li> </ol>	part of the claim falls into one of the following categories, check the box specifying	
11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B) \$12,475*) earned within 180 days before plan = 11 U.S.C. § 507 (a)(5), the case was filed or the Debtor's		
W 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).      Taxes or penalties owed to governmental units − 11 U.507 (a)(8).	of 11 U.S.C. § 507 (a)(_) s_1,700.00	
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter u	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		