EXHIBIT "41"



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LEE	
NOTE: Do not use this form to make a claim for an administrative expense that an 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): Yui Tong Chong, Lai Fong Chong	☐ Check this box to indicate that this claim amends a previously filed claim. Court Claim Number:
Name and address where notices should be sent: Yui Tong Chong, Lai Fong Chong	(If known) Jan City Group, IL
8162 Yellow Daisy Av Las Vegas, NV 89147	Filed on: MAY - 1 2015
Telephone number. 720-217-6918 Email address: chinghong.chong1105@gmail.com	
Nume 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 - 00277
Telephone number.	District of Nevada
Email address.	Ameri-Bream, I.I.C
(See instruction #2) Lease Agreement, Management Ag	nester St., LV NV 89117 (Deposits statement, Deposit Summary, greement attached) a. Debtor may have scheduled account as: 3b. Uniform Claim Identifier (optional):
8 0 1 7	(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 Of	Amount of arrearage and other charges, as of the time case
Describe:	Basis for perfection:
Value of Property: S	Amount of Secured Claim: S
Annual Interest Rate	Amount Unsecured: \$
the priority and state the amount.	urt of the claim falls into one of the following categories, check the box specifying
☐ Domestic support obligations under II U S C. § 507 (a)(1)(A) or (a)(1)(B) \$12,475*) earned within 11 the case was filed or the D	80 days before plan = 11 U.S.C. § 507 (a)(5).
business ceased, whicheve purchase, lease, or rental of property or services for personal, family, or household use − 11 U.S.C. § 507 (a)(7). □ Taxies or penalties owed to governmental units − 11 U.S.C. § 507 (a)(8).	of 11 U S C. § 307 (a)(_). § 1,750.00
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter u	rith 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	

Modified B10 (GCG) (4/13)

EXHIBIT "42"



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA PROOF OF CLAIM				
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LEE	,			
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 far payment of an administrative			
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). Yui Tong Chong, Lai Fong Chong	Court Claim Number:			
Name and address where notices should be sent	City Gra			
Yui Tong Chong, Lai Fong Chong 8162 Yellow Daisy Av	(If known) siden Utily Group			
Las Vegas, NV 89147	Filed on:			
Las vagas, 117 05 147	. (MAY - 1 2015 }			
Takanhana number: 720-217-6918				
Telephone number: 720-217-0918 Email address chinghong.chong1105@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 - 00278 District of Nevada			
Telephone number:	Ameri-Dream, LLC			
Amount of Claim as of Date Case Filed: S 1,600.00				
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 6026 Tea L	ight Ct, LV NV 89113 (Deposits statement, Deposit Summary,			
(See instruction #2) Lease Agreement, Management Ag	preement attached)			
Last four digits of any number by which creditor identifies debtor:	account as: 3b. Uniform Claim Identifier (optional):			
8 0 1 7				
	(See instruction #3a) (See instruction #3b)			
 Secured Claim (See instruction #4) 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. 	Amount of arrearage and other charges, as of the time case ght of setoff, was filed, included in secured claim, if any:			
	Motor Vehicle			
Other	Basis for perfection:			
Describe:				
Value of Property: S Amount of Secured Claim: S				
Annual Interest Rate %	Variable			
(when case was filed)	Amount Unsecured: \$			
 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 commis \$12,475*) earned within 18	80 days before plan – 11 U S C. § 507 (a)(5).			
the case was filed or the Do 20.Up to \$2,775* of deposits toward business ceased, whichever	r is earlier - Other - Specify applicable paragraph			
purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4). services for personal, family, or	of 11 U S C. § 507 (a)(). s 1,600.00			
household use – 11 U.S.C. § 507 (a)(7) Taxes or penalties owed to governmental units – 11 U.				
507 (a X 8).	Street M			
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w	rith 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 "43"

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). Yui Tong Chong, Lai Fong Chong	Check this box to indicate that this claim amends a previously filed claim.		
Name and address where notices should be sent:	Court Claim Number:		
Yui Tong Chong, Lai Fong Chong	(If known) den City Grove		
8162 Yellow Daisy Av	(2) (2) (2)		
Las Vegas, NV 89147	Filed on: (MAY - 1 2015		
Telephone number 720-217-6918			
Email address chinghong.chong1105@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 - 00279		
	District of Nevada		
Telephone number: Email address	Ameri-Dream, LLC		
Amount of Claim as of Date Case Filed: \$ 825.00			
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.	•		
	the principal amount of the claim. Attach a statement that itemizes interest or charges.		
Basis for Claim: Refundable Deposits of 4341 Gann	et Cir. #176, LV NV 89103 (Deposits statement, Deposit Summary,		
(See instruction #2) Lease Agreement, Management Ag			
	account as: 3b. Uniform Claim Identifier (optional):		
8 0 1 7	(See instruction #3a) (See instruction #3b)		
4. Secured Claim (See instruction #30) Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attuch required reducted documents, and provide the requested information.			
	Motor Vehicle		
Describe:	Basis for perfection:		
Value of Property: S	Amount of Secured Claim: S		
Annual Interest Rate	/ariable Amount Unsecured: \$		
 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 ☐ Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit ☐ 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)			
★ Up to \$2,775* of deposits toward the case was filed or the Debusiness ceased, whichever	Amount entitled to priority:		
purchase, lease, or rental of property or services for personal, family, or	of II U.S.C. § 507 (a)() § 825.00		
household use - 11 U.S.C. § 507 (a)(7). Taxes or penalties owed to governmental units - 11 U.S.	S.C. §		
507 (a)(8).	, ,		
*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	purpose of making this proof of claim. (See instruction #6)		

EXHIBIT "44"

.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 ☐ Check this box to indicate that this claim amends a previously filed claim. Gary Chen property): Court Claim Number: Name and address where notices should be sent: arden City Group Gary Chen (If known) 1305 Torrance Ave MAY - 2 2015 Filed on: Sunnyvale, CA 94089 Telephone number: 408-393-3619 gary_chn1@yahoo.com Email address: ☐ Check this box if you are aware that anyone else has filed a proof of claim relating to Name and address where payment should be sent (if different from above): this daim. Attach copy of statement giving particulars. FILED - 00280 District of Nevada Ameri-Dream, LLC Telephone number: Email address: 1. Amount of Claim as of Date Case Filed: \$ 1645. 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 its trust renter security trom 2. Basis for Claim: (See instruction #2) Last four digits of any number by which creditor identifies debtor: 3b. Uniform Claim Identifier (optional): 3a. Debtor may have scheduled account as: Social Gary Chen Security Number (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: 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 reducted documents, and provide the requested information. Nature of property or right of setoff: ☐ Real Estate ■ Motor Vehicle Other Basis for perfection: Describe: _ Value of Property: S Amount of Secured Claim: * % D Fixed or O Variable (when case was filed) Amount Unsecured: 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 □ Contributions to an employee benefit plan - 11 U.S.C. § 507 (a)(5). the case was filed or the Debtor's

business ceased, whichever is enriler -
11 U.S.C. § 507 (a)(4).

Taxes or penalties owed to

507 (a)(8).

ntal units - 11 U.S.C. §

*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 adjustments. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)

Up to \$2,775° of deposits toward purchase, losse, or rental of property or services for personal, family, or

household use - 11 U.S.C. § 507 (a)(7).

Modified B10 (GCG) (4/13)

Amount entitled to priority:

645.00

EXHIBIT "45"



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 an expense according to 11 U.S.C. § 503.	ses after the bankruptcy filing. You may file a request for payme	nt of an administrative			
Name of Creditor (the person or other entity to whom the Debtor owes money or property): Chun Yu Chung, Jessica Y Q Chung	Check this box to indicate that this claim amends a previous	ly filed claim.			
Name and address where notices should be sent:	Court Claim Number:	City Group			
Chun Yu Chung, Jessica Y Q Chung P.O. Box 235547	(lf known)	鼅			
Honolulu, HI 96823	Filed on: MAY	-2 200			
Hollolulu, 111 90023		2015			

Telephone number 808-389-9626					
Email address: mikecheung702@hotmail.com	Check this box if you are aware that anyone else has filed a	accord of claim relation to			
Name and address where payment should be sent (if different from above).	this claim. Attach copy of statement giving particulars.	proof of claim relating to			
	F1LED - 00281				
	District of Nevada				
Telephone number:	· Ameri-Dream, LLC				
Email address: 1. Amount of Claim as of Date Case Filed: \$ 2,750.00 (\$1,550.00 \$	Security Deposit + \$1,200.00 January Rent)				
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.					
	she assessed assessed of the claim. Attach a sectionary that items	no interest or charges			
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. Days or Claim.	on Valley Av, LV NV 89147 (Deposits statemen	it, Deposit			
(See instruction #2) Summary, Lease Agreement, Mana Last four digits of any number by which creditor identifies debtor:	Debtor may have scheduled 3b. Uniform Claim I account as:	dentifier (optional):			
2 7 4 7	account as.				
3 7 4 7	(See instruction #3a) (See inst	ruction #3b)			
Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a relation.	Amount of arrearage and other charges, as ght of setoff. was filed, included in secured claim, if any:				
attach required redacted documents, and provide the requested information	s				
Nature of property or right of setoff: Real Estate 1	fotor Vehicle Basis for perfection:				
Describe:		-			
Value of Property: S	Amount of Secured Claim: \$				
Annual Interest Rate % ☐ Fixed or ☐ \(\text{(when case was filed)}\)	'arrable Amount Unsecured: \$				
 Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any p the priority and state the amount. 	art of the claim falls into one of the following categories, chec	k the box specifying			
	sions (up to Contributions to an employee benefit 0 days before plan - 11 U.S.C. § 507 (a)(5).				
the case was filed or the Do 25 Up to \$2,775* of deposits toward business ceased, whicheve		ount entitled to priority:			
purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4)	of 11 U.S.C. & 507 (aV).	750.00			
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).	S.C. §				
*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 adjustmen	K.			
6. Credits. The amount of all payments on this claim has been credited for the					

Modified B10 (GCG) (4/13)

EXHIBIT "46"



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	Check this box to indicate that this clair	m amends a previously filed claim.	
property): Summerstone Investments LLC	Court Claim Number:		
Name and address where notices should be sent: - MING WILLIA	Court Ciniii Number:	City	
Mingming liu	l — — — «	(known) Agen Carly Gold	
Mingming liu 9525 Queen Charlotte Dr	Filed on:	MAY	
2a 5 Vegas. NV. 89 145. Telephone number: 702 - 635 - 0456		(2015)	
707-635-0456			
Telephone number: Hiumingming@gmail.com			
Name and address where payment should be sent (if different from above):		yone else has filed a proof of claim relating to g particulars.	
Mingmingliu			
9525 Queen Charlotte Dy	Di Di	FILED - 00283 strict of Nevada	
Telephone number: 0702-635-04561 Email address: 11 y ming ming gmail. com	Am	neri-Dream, LLC	
Email address: 11 iu mingming@gmall. (om			
Amount of Cirilians of Part Case Priest, 5 7 2 2 3	- .		
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: Solimits, Key Clounts (See instruction #2)	5 depost		
	a. Debtor may have scheduled 3b	. Uniform Claim Identifier (optional):	
	account as:		
·	(See instruction #3a)	(See instruction #3b)	
4. Secured Claim (See instruction #4)		nd other charges, as of the time case	
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.	ight of setoff, was filed, included in se	cured claim, if any:	
	Motor Vehicle	•	
Describe:	Basis for perfection:		
Value of Bernarder 6			
Value of Property: S	Amount of Secured Cla	im: 3	
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 commi			
the case was filed or the D Up to \$2,775* of deposits toward business ceased, whicheve		e paragraph Amount entitled to priority:	
purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4). services for personal, family, or	of 11 U.S.C. § 507 (a)(
household use – 11 U.S.C. § 507 (a)(7). Taxes or penalties owed to governmental units – 11 U 507 (a)(8).			
*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.	
6. Credits. The amount of all payments on this claim has been credited for the			

EXHIBIT "47"



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.	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	☐ Check this box to indicate that this claim amends a previously filed claim.			
property): Symmes Strong Dy Dextx 1)1				
Name and address where notices should be sent:	Court Claim Number:			
Mingming Liu	(If known) Sales [5]			
Mingming liu 9525 Queen Charlotte Dr	Filed on: WAY - 2 2015			
Las regas. NV. 89145 89145				
Telephone number: 702-635-0456	\sim			
Email address	☐ Check this box if you are aware that anyone else has filed a proof of claim relating to			
Name and address where payment should be sent (if different from above):	this claim. Attach copy of statement giving particulars.			
	- FILED - 00284			
	District of Nevada Ameri-Dream, I.I.C			
Telephone number: Email address:	Ameri-Dream, LAA			
1. Amount of Claim as of Date Case Filed: 5 /750	_			
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: Seasists deposit. Rot deposit Claims deproyet				
(See instruction N2)	3 2/2/			
3. Last four digits of any number by which creditor identifies debtor: 3a. Debtor may have scheduled account as: 3b. Uniform Claim Identifier (optional):				
	(See instruction #3a) (See instruction #3b)			
 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a rigattach 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:			
	fotor Vehicle			
□ Other	Basis for perfection:			
Describe:				
Value of Property: S	Amount of Secured Claim: S			
Annual Interest Rate	ariable			
(when case was filed)	Amount Unsecured: \$			
 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 commis \$12,475*) earned within 18	0 days before plan = 11 U.S.C. § 507 (a)(5).			
Up to \$2,775* of deposits toward the case was filed or the De business ceased, whichever	is earlier - Other - Specify applicable paragraph Amount entitled to priority:			
purchase, lease, or rental of property or services for personal, family, or	of 11 U.S.C. § 507 (a)(_). s_1750.00			
household use – 11 U.S C § 507 (a)(7). Taxes or penalties owed to governmental units – 11 U.S 507 (a)(8).				
so, (alla).	s.c. g			
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w				

EXHIBIT "48"

18000	1000	Rela	ЯÐ	199	m	(20 11)	E III	ш	п
11	1300	М	ш	T IRRE	М	11	Ш	ı	ı
	L SAN	811	ш		и		H	B	п

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): Summer Stane. Holding LlC. Name and address where notices should be sent: Ming ming Liu 9525 Queen Charlotte Dy Lasvegas. NN. 89145 Telephone number: Email address: Niu ming aming agmail. Com Name and address where payment should be sent (if different from above): Check this box if you are aware that amyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.			
Expense according to 11 U.S.C. § 503. Name of Creditor (the person or other entity to whom the Debtor owes money or property): Summer of Stone. Holding L.C. Name and address where notices should be sent: Ming ming Lin Ming Ming Liu 9525 Queen Charlotte Dy Lasvegas. NIV. 89145 Telephone number: Email address: Hi u ming ming Egmail. Com Name and address where payment should be sent (if different from above): Ocheck this box to indicate that this claim amends a previously filed claim. Court Claim Number: ### Filed on: Check this box to indicate that this claim amends a previously filed claim.			
Name of Creditor (the person or other entity to whom the Debtor owes money or property): Summer Stone Holding L.C. Name and address where notices should be sent: Ming ming Liu 9525 Queen Charlotte Dy Lasvegas. NV. 89145 Telephone number: Email address: 11 in ming ming Egmail. Com Name and address where payment should be sent (if different from above): Ocheck this box to indicate that this claim amends a previously filed claim. Court Claim Number: (If known) MAY - 2 2015			
Name and address where notices should be sent: Mirg Ming Liu Ming Ming Liu 9525 Queen Charlotte Dy Lasvegas. NV. 89145 Telephone number: Email address: 11 in Ming ming @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			
9525 Queen Charlotte Dy Lasvegas. N.V. 39145 Telephone number: Email address: 11 in ming ming @gmail. Com Name and address where payment should be sent (if different from above):			
Email address: III W M779 31179 C 3710 C C C W C C C C C C C C C C C C C C C			
Email address: III W M779 31179 C 3710 C C C W C C C C C C C C C C C C C C C			
Email address: III W M779 31179 C 3710 C C C W C C C C C C C C C C C C C C C			
FILED - 00285			
Telephone number: District of Nevada Ameri-Dream, LLC			
Email address: 1. Amount of Claim as of Date Case Filed: S			
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: Seary deposit. pots, cleaning oleposit \$ 2250,00			
3. Last four digits of any number by which creditor identifies debtor: 3a. 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:			
Nature of property or right of setoff: Real Estate Motor Vehicle Other Basis for perfection:			
Describe: Basis for perfection:			
Value of Property: S Amount of Secured Claim: S			
Annual Interest Rate%			
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). 12 Up to \$2,775 of deposits toward 13 Us to \$2,775 of deposits toward 14 Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit for plan = 11 U.S.C. § 507 (a)(5). 15 Up to \$2,775 of deposits toward 16 Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit for plan = 11 U.S.C. § 507 (a)(5). 16 Up to \$2,775 of deposits toward 17 Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit for plan = 11 U.S.C. § 507 (a)(5). 17 Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit for plan = 11 U.S.C. § 507 (a)(5). 18 Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit for plan = 11 U.S.C. § 507 (a)(5). 19 Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit for plan = 11 U.S.C. § 507 (a)(5). 20 Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit for plan = 11 U.S.C. § 507 (a)(5). 21 Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit for plan = 11 U.S.C. § 507 (a)(5). 22 Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit for plan = 11 U.S.C. § 507 (a)(5). 22 Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit for plan = 11 U.S.C. § 507 (a)(5). 22 Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit for plan = 11 U.S.C. § 507 (a)(5). 23 Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit for plan = 11 U.S.C. § 507 (a)(5). 24 Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit for plan = 11 U.S.C. § 507 (a)(5). 25 Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit for plan = 11 U.S.C. § 507 (a)(5). 25 Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit for plan = 11 U.S.C. § 507 (a)(5). 26 Wages, salaries, or commissions (up to ☐ Contributions to an emp			
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.S.C. § 507 (a)(7).			
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.			
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 (GCC) (M.) Modified B10 (GCC) (M.)			

Modified B10 (GCG) (4/13)

EXHIBIT "49"

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 an 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). Erson Religioso	☐ Check this box to indicate that this claim amends a previously filed claim.		
Name and address where notices should be sent:	Court Claim Number:		
Erson Religioso	(If known) den City Group		
91 QUAIL RUN	/or 1/h		
GREENSBURG, PA 15601-8562	Filed on: (MAY - 4 2015)		
	\ /		
Telephone number: (724)552-9696			
Email address: eler25@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		
reality and address where payment should be sent in unserent from acovey.	this claim. Attach copy of statement giving particulars.		
	FILED - 00286		
	District of Nevada		
Telephone number:	Ameri-Dream, LLC		
Email address:			
Amount of Claim as of Date Case Filed: \$ 930.00			
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.		
Defendable Describe of SOSS W. II	acienda Av #1176, Las Vegas NV 89118 (Deposits statement, Depo		
Basis for Claim: Retundable Deposits of 5055.W. H. (See instruction #2) Summary, Lease Agreement, Management, Management			
	Debtor may have scheduled 3b. Uniform Claim Identifier (optional):		
	account as:		
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 redacted documents, and provide the requested information.			
Nature of property or right of setoff:	Motor Vehicle		
Describe:	Basis for perfection:		
Value of Property: S Amount of Secured Claim: \$			
Annual Interest Rate% ☐ Fixed or ☐ \(\text{(when case was filed)}\)	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 unider □ Wages, salaries, or commissions (up to □ Contributions to an employee benefit 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 De Up to \$2,775* of deposits toward business ceased, whichever purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4).	Amount entitled to orionty:		
services for personal, family, or household use – 11 U.S.C. § 507 (a)(7). Taxes or penalties owed to governmental units – 11 U.S.C.	\$ 930.00		
507 (a)(8). *Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w	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			
	Modified B10 (GCG) (4/13)		

EXHIBIT "50"



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 or 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). Yuk Wing Chan, Ken Kin Cho Wong	Check this box to indicate that this claim amends a previously filed claim			
Name and address where notices should be sent: Yuk Wing Chan, Ken Kin Cho Wong	Court Claim Number:			
9 Murray Av				
Scarborough ON MIS 2AL	Filed on: (MAY ~ 4 2015)			
Canada				
Telephone number: 416-303-5555				
Email address simonc@kwoodkitchens.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.			
	EH ED. 00207			
	FILED - 00287 District of Nevada			
Telephone number.	Ameri-Dream, LLC			
Email address: 1. Amount of Claim as of Date Case Filed: \$ 1,650.00				
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.	•			
,	the principal amount of the claim. Attach a statement that itemizes interest or charges.			
Refundable Deposits of 5220 Cree	n Forest Way, LV NV 89118 (Deposits statement, Deposit Summan			
Basis for Claim: Refundable Deposits of 5239 Gree (See instruction #2) Lease Agreement, Management A				
	a. Debtor may have scheduled 3b. Uniform Claim Identifier (optional):			
<u>3 6 8 4</u>				
	(See instruction #3a) (See instruction #3b)			
 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:				
Nature of property or right of setoff: ☐ Real Estate ☐	Motor Vehicle			
Describe:	Basis for perfection:			
Describe:				
Value of Property; S	Amount of Secured Claim: S			
Annual Interest Rate% ☐ Fixed or ☐	Variable			
(when case was filed)	Amount Unsecured: \$			
 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). \$12,475*) earned within 1 the case was filed or the D	80 days before 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 11 U.S.C. § 507 (a)(4).				
services for personal, family, or	s 1,650.00			
household use – 11 U.S.C § 507 (a)(7) laxes or penatites owed to governmental units – 11 U 507 (a)(8).				
*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.			
6. Credits. The amount of all payments on this claim has been credited for the				