EXHIBIT "71"

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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			
•			
	rises ofter the bankruptcy filing. You may file a request for payment of an administrative		
expense according to 11 U.S.C. § 503.	☐ 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): Wei Chen Haw	Check this box to indicate that this claim amends a previously fried claim.		
Name and address where notices should be sent:	Court Claim Number:		
111205 Commerce Dr	(If known) (Stollp, L		
Garden Grove CA 92843			
Garden Grove CA 92843	Filed on: (5 UAY - 6 2015		
01: 0 : 50.00			
Telephone number: 114 926,7995 Email address: Weichen 154 @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		
Trans and address where payment should be settle (it different from above).	this claim. Attach copy of statement giving particulars.		
	FILED - 00320		
Telephone number:	District of Nevada Ameri-Dream, LLC		
Email address: 1. Amount of Claim as of Date Case Filed: \$ 821	4		
	-		
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.			
	to the principal amount of the claim. Attach a statement that itemizes interest or charges.		
2 Basis for Claim: Security Deposit held by	AMERIUSEAM for property		
(See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 3a	a. Debtor may have scheduled . 3b. Uniform Claim Identifier (optional):		
8 0 1 0	account as:		
0 2 1 1			
4. Secured Claim (See instruction #4)	(See instruction #3a) (See instruction #3b)		
Check the appropriate box if the claim is secured by a lien on property or a ri	Amount of arrearage and other charges, as of the time case ight 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 ☐ N	Motor Vehicle Basis for perfection:		
Describe:			
Value of Property: \$	Amount of Secured Claim: S		
	Variable		
Annual Interest Rate% ☐ Fixed ' or ☐ V (when case was filed)	Amount Unsecured: \$ 82/1		
	part of the claim falls into one of the following entegories, check the box specifying		
the priority and state the amount.	4		
Domestic support obligations under ☐ Wages, salaries, or commis 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). S12,475*) earned within 18			
the case was filed or the De Up to \$2,775* of deposits toward business ceased, whichever	Amount entitled to priority		
purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4).	of 11 U.S.C. § 507 (a)(_).		
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).	atribus g		
*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	purpose of making this proof of claim. (See instruction #6)		

EXHIBIT "72"



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 occording 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): $ZHAOMING\ HU$	☐ Check this box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent:	Court Claim Number:
1514 CORONACH AVE	Filed on:
SUNNYVALE, CA 94087	- 10 10 10 10 10 6 2015
Telephone number: 408-230-0642 Phinish. Email address: Zhaoming hu @ gmail.com	41, -230-0642
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 - 00321 District of Nevada
Telephone number:	Ameri-Dream, LLC
Email address: 1. Amount of Claim as of Date Case Filed: S 1900. % 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.	
, , , , , , , , , , , , , , , , , , , ,	to the principal amount of the claim. Attach a statement that itemizes interest or charges.
2. Basis for Claim: Security and Clean Deposit of (See instruction #2)	
	a. Debtor may have scheduled 3b. Uniform Claim Identifier (optional): account as:
8 2 1 9	ZHAOMING HU
	(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 rattach required reducted documents, and provide the requested information. 	Amount of arrearage and other charges, as of the time case right of setoff, was filed, included in secured claim, if any:
	Motor Vehicle Basis for perfection:
Describe:	
Value of Property: S	Amount of Secured Claim: S
Angual Interest Rate% ☐ Fixed or ☐ (when case was filed)	Variable Amount Unsecured: \$
 Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any the priority and state the amount. 	part of the claim falls into one of the following categories, check the box specifying
☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). Uages, salaries, or comm \$12,475*) earned within the case was filed or the D	180 days before plan - 11 U.S.C. § 507 (a)(5).
TUp to \$2,775* of deposits toward business ceased, whicheve purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4).	er is earlier - Other - Specify applicable paragraph Amount entitled to priority:
services for personal, family, or	of 11 U.S.C. § 507 (a)(_). s
household use – 11 U.S.C. § 507 (a)(7). Taxes or permittee ower in governmental units – 11 U.S.C. § 507 (a)(8).	
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter	
6. Credits. The amount of all payments on this claim has been credited for the	e purpose of making this proof of claim. (See instruction #6)

EXHIBIT "73"

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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.	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): ZHAOMING HU	Court Claim Number:
Name and address where notices should be sent: ZHAOMING HU	(If known)
1514 CORONACH AVE	Filed on:
SUNNYVALE, CA 94087	MAY - 6 2015
Telephone number: 408-230-0642	£4 1.4 1.4 1.4 1.4 1.4 1.4 1.4 1.4 1.4 1.
Email address: ZHAOMING.HU@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 tiled a proof of claim relating to this claim. Attach copy of statement giving particulars.
	FILED - 00322
Telephone number:	District of Nevada Ameri-Dream, LLC
Email address:	Ninti-Oreani, LL,C
1. Amount of Claim as of Date Case Filed: S_1200	
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.	
	o the principal amount of the claim. Attach a statement that itemizes interest or charges.
2. Basis for Claim: Security and cleaning Deposit (See instruction #2)	of 9911 Elkhead Creek Wy Las Vegas 89148
	a. Debtor may have scheduled account as: 3b. Uniform Claim Identifier (optional):
8219	ZHAOMING HU
A Challe (See instruction #4)	(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 rattach required reducted documents, and provide the requested information. 	Amount of arrearage and other charges, as of the time case right of setoff, was filed, included in secured claim, if any:
Nature of property or right of setoff: Real Estate Other	Motor Vehicle
Describe:	Basis for perfection:
Value of Property: S	Amount of Secured Claim: S
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 the priority and state the amount.	part of the claim falls into one of the following categories, check the box specifying
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 C	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 services for personal, family, or services for personal, family, or	er is earlier — Other – Specify applicable paragraph 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).	0
*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	e purpose of making this proof of claim. (See instruction #6)

EXHIBIT "74"



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF	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 ari expense according to 11 U.S.C. § 503.	ses ofter 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): ZHAOMING HU	☐ Check this box to indicate that this claim amends a previously filed claim:					
Name and address, where notices should be sent: ZHAOMING HU	Court Claim Number:					
1514 CORONACH AVE	Filed on: MAY - 6 2016					
SUNNYVALE , CA 94087	22 % 14 M CA 1 1 M CA					
Telephone number: 408-230-0642-103-1- Email address. ZHAOMING. HU@GMAIL.COM	5082 + 202 + 3607					
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 - 00323 District of Nevada						
Telephone number: Ameri-Dream, LLC Email address:						
1. Amount of Claim as of Date Case Filed: S 950						
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 8984 (See instruction #2)	Ornate Glade Ave, Las Vegas, NV 89148					
	s. Debtor may have scheduled 3b. Uniform Claim Identifier (optional): account as:					
8 2 1 9	ZHAOMING HU					
	(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 rattach required redacted documents, and provide the requested information 	Amount of arrearage and other charges, as of the time case ight of setoff, was filed, included in secured claim, if any:					
	Motor Vehicle					
Describe:	Basis for perfection:					
Value of Property: S	Amount of Secured Claim: \$					
Annual Interest Rate	Variable Amount Unsecured: \$					
the priority and state the amount.	part of the claim falls into one of the following categories, check the box specifying					
Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). Uages, salaries, or commi \$12,475*) earned within 1 the case was filed or the D	ebtor's					
Durchase, lease, or rental of property or services for personal, family, or household use − 11 U.S.C. § 507 (a)(7). Days of personal time to business ceased, whicheve 11 U.S.C. § 507 (a)(4). Taxes or penalties owed to governmental units − 11 U.S.C. § 11 U.S.C. § 507 (a)(7).	ef 11 U.S.C. § 507 (a)(_).					
507 (a)(8).						
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter						
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 "75"



	190001 100001 10000
UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT C	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 aris 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) ZHAOMING HU	☐ Check this box to indicate that this claim amends a previously filed claim. Court Claim Number:
Name and address where notices should be sent:	in tillin
ZHAOMING HU	(If known)
1514 CORONACH AVE	(If known) Filed on:
SUNNYVA	
Telephone number: 408 - 230 - 0642 Email address: ZHAOMING-HU@GMAIL.COM	An and the
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 - 00324
	District of Nevada
Telephone number: Email address:	Ameri-Dream, LLC
1. Amount of Claim as of Date Case Filed: S 1100	
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.
2. Basis for Claim: Security and clean Deposit of (See instruction #2)	601 brinkburn point Ave, Las Vegas, NV 89178
3. Last four digits of any number by which creditor identifies debtor: 3:	a. Debtor may have scheduled 3b. Uniform Claim Identifier (optional):
8 2 1 9	ZHAOMING HU
	(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
	Motor Vehicle
Nature of property or right of setoff:	Basis for perfection:
Value of Property: S	Amount of Secured Claim: S
Annual Interest Rate % □ Fixed or □	Variable
(when case was filed)	Amount Unsecured: \$
the priority and state the amount.	part of the claim falls into one of the following categories, check the box specifying
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).	of 11 11 S.C. 8 507 (eV.)
services for personal, family, or	\$ 1100
governmental units - 11 U	
507 (a)(8).	
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter v	
6. Credits. The amount of all payments on this claim has been credited for the	

EXHIBIT "76"



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF	OF NEVADA	PROOF OF CLAIM			
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED	lame 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	ses after the bankruptcy filing. You may file	a request for payment of an administrative			
expense occording to 11 U.S.C. § 503.					
Name of Creditor (the person or other entity to whom the Debtor owes money or property): ZHAOMING HU	Check this box to indicate that this clai	im amends a previously filed claim:			
	Court Claim Number:				
Name and address where notices should be sent. ZHAOMING HU		CAN Group, LL			
1514 CORONACH AVE		/§" \			
SUNNYVALE, CA 94087	Filed on:	HO A MAY 76 2015			
30/W/VALE, CA 4408/	- 4M	HOAMARC MAY 131			
Telephone number: 408 - 230 - 0642 . Chine . Son -	230 - 0642	+ co4			
Email address: ZHAOMING. HU @ GMAIL.COM					
Name and address where payment should be sent (if different from above):	Check this box if you are aware that are this claim. Attach copy of statement giving	nyone else has filed a proof of claim relating to			
	Stemm reteen copy or stetement great				
	Su en				
	FILED - (District of)				
Telephone number: Email address:	Ameri-Drea				
1. Amount of Claim as of Date Case Filed: S 1900					
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.					
	a the exicular amount of the claim. Attack	a statement that its miles in income			
☐ Check this box if the claim includes interest or other charges in addition to					
2. Basis for Claim: Security and cleaning Deposit (See instruction #2)	of 70 Myrytle Spring	g ct, Las Vegas, NV 89148			
3. Last four digits of any number by which creditor identifies debtor: 3	a. Debtor may have scheduled 3 account as:	 b. Uniform Claim Identifier (optional): 			
8 2 1 9	ZHAOMING HU				
	(See instruction #3a)	(See instruction #3b)			
4. Secured Claim (See instruction #4)		and other charges, as of the time case			
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.	ight of setoff, was filed, included in s	ecured claim, if any:			
	Motor Vehicle	s			
□ Other	Basis for perfection:				
Describe:					
Value of Property: S	Amount of Secured Cl	aim: S			
Annual Interest Rate% ☐ Fixed or ☐	Variable				
(when case was filed)					
	Amount Unsecured:	5			
 Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any the priority and state the amount. 	part of the claim falls into one of the follo	wing 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	part of the claim falls into one of the follousissions (up to Oontributions to an emple 80 days before Plan - 11 U.S.C. § 507 (c	wing 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 Wages, salaries, or comm \$12,475*) earned within the case was filled or the I business ceased, whicheve	part of the claim falls into one of the follo issions (up to 80 days before bebtor's er is earlier — Other – Specify applicab	wing categories, check the box specifying loyee benefit a)(5). Amount entitled to priority:			
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	part of the claim falls into one of the followissions (up to 80 days before plan - 11 U.S.C. § 507 (a) Other - Specify application of 11 U.S.C. § 507 (a)	wing categories, check the box specifying loyee benefit a)(5). Amount entitled to priority:			
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 U.S.C. § 507 (a)(4).	part of the claim falls into one of the follousissions (up to 80 days before bebtor's In searlier — Other — Specify application of 11 U.S.C. § 507 (a)(wing categories, check the box specifying loyee benefit a)(5). Amount entitled to priority:			
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)(4).	part of the claim falls into one of the follousissions (up to 80 days before bebtor's In searlier — Other — Specify application of 11 U.S.C. § 507 (a)(wing categories, check the box specifying loyee benefit a)(5). Amount entitled to priority:			
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).	part of the claim falls into one of the folloussions (up to 80 days before bebtor's er is earlier — Other — Specify application of 11 U.S.C. § 507 (a)(_0.S.C. §	wing categories, check the box specifying loyee benefit a)(5). Amount entitled to priority: s_1900			

EXHIBIT "77"

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H	Ш	Ш	ı

UNI	TED STATES BANKRUPTCY COURT FOR THE DISTRICT O	PROOF OF CLAIM		
Nam	e of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED			
	E: Do not use this form to make a claim for an administrative expense that ari use according to 11 U.S.C. § 503.	ses after the bankruptcy filing. You ma	ry file a request for payment of an administrative	
	e of Creditor (the person or other entity to whom the Debtor owes money or erty): Luen K Chan		s claim amends a previously filed claim.	
Name	e and address where notices should be sent:	Court Claim Number:	Group //	
	Luen K Chan		(If known)	
	3413 Lindy Av	-1.4	/ Pm (%)	
	Rosemead, CA 91770	Filed on:	(If known) (III) (
	shows sumber 626-759-1212			
	hone number: 626-739-1212 il address luenkchan@hotmail.com			
_	e and address where payment should be sent (if different from above):	☐ Check this box if you are aware th	nat anyone else has filed a proof of claim relating to	
Harris	and address where payment should be self (if different from above).	this claim. Attach copy of statement	giving particulars,	
	•			
			FILED - 00326	
	phone number:		District of Nevada	
	l address:	A	meri-Dream, LLC	
1.	Amount of Claim as of Date Case Filed: \$ 1,250.00			
	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. At	ach a statement that itemizes interest or charges.	
2,	Definadable Descrite of 7995 W Fla		ach a statement that itemizes interest or charges. s NV 89147 (Deposit statement, Deposit	
2.		mingo Dr. #1118 Las Vegas	s NV 89147 (Deposit statement, Deposi	
2.	Basis for Claim: Refundable Deposits of 7885 W Fla (See instruction #2) Summary, Lease Agreement, Mana	mingo Dr. #1118 Las Vegas	s NV 89147 (Deposit statement, Deposi	
	Basis for Claim: Refundable Deposits of 7885 W Fla (See instruction #2) Summary, Lease Agreement, Mana	mingo Dr. #1118 Las Vegas gement Agreement attache Debtor may have scheduled account as:	S NV 89147 (Deposit statement, Deposit d) 3b. Uniform Claim Identifier (optional):	
3.	Basis for Claim: Refundable Deposits of 7885 W Fla (See instruction #2) Summary, Lease Agreement, Mana Last four digits of any number by which creditor identifies debtor: 3a 1 2 2 2	mingo Dr. #1118 Las Vegas igement Agreement attache Debtor may have scheduled account as: (See instruction #3a)	S NV 89147 (Deposit statement, Deposit d) 3b. Uniform Claim Identifier (optional): (See instruction #3b)	
	Basis for Claim: Refundable Deposits of 7885 W Fla (See instruction #2) Summary, Lease Agreement, Mana Last four digits of any number by which creditor identifies debtor: 3a	gement Agreement attache Debtor may have scheduled account as: (See instruction #3a)	S NV 89147 (Deposit statement, Deposit d) 3b. Uniform Claim Identifier (optional):	
3.	Basis for Claim: Refundable Deposits of 7885 W Flat (See instruction #2) Summary, Lease Agreement, Mana Last four digits of any number by which creditor identifies debtor: 3a 1 2 2 2 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a ni attach required reducted documents, and provide the requested information.	gement Agreement attache Debtor may have scheduled account as: (See instruction #3a)	S NV 89147 (Deposit statement, Deposit d) 3b. Uniform Claim Identifier (optional): (See instruction #3b) age and other charges, as of the time case	
3.	Basis for Claim: Refundable Deposits of 7885 W Flat (See instruction #2) Summary, Lease Agreement, Mana Last four digits of any number by which creditor identifies debtor: 3a 1 2 2 2 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.	gement Agreement attache Debtor may have scheduled account as: (See instruction #3a) Amount of arreary was filed, included	S NV 89147 (Deposit statement, Deposit d) 3b. Uniform Claim Identifier (optional): (See instruction #3b) Ige and other charges, as of the time case in secured claim, if any:	
3.	Basis for Claim: Refundable Deposits of 7885 W Flat (See instruction #2) Summary, Lease Agreement, Mana Last four digits of any number by which creditor identifies debtor: 3a 1 2 2 2 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:	gement Agreement attache Debtor may have scheduled account as: (See instruction #3a) Amount of arreary was filed, included	S NV 89147 (Deposit statement, Deposit d) 3b. Uniform Claim Identifier (optional): (See instruction #3b) Ige and other charges, as of the time case in secured claim, if any: S a:	
3.	Basis for Claim: Refundable Deposits of 7885 W Flat (See instruction #2) Summary, Lease Agreement, Mana Last four digits of any number by which creditor identifies debtor: 3a 1 2 2 2 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a ristoch required redacted documents, and provide the requested information. Nature of property or right of setoff: Real Estate Other Describe: Annual Interest Rate % Fixed or Fixed or	gement Agreement attache Debtor may have scheduled account as: (See instruction #3a) Amount of arreary was filed, included Motor Vehicle Basis for perfectio Amount of Secure	S NV 89147 (Deposit statement, Deposit d) 3b. Uniform Claim Identifier (optional): (See instruction #3b) Ige and other charges, as of the time case in secured claim, if any: \$	
4.	Basis for Claim: Refundable Deposits of 7885 W Flat (See instruction #2) Summary, Lease Agreement, Mana Last four digits of any number by which creditor identifies debtor: 3a 1 2 2 2 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a ristoch required redacted documents, and provide the requested information. Nature of property or right of setoff: Real Estate Other Describe: Other Value of Property: S Annual Interest Rate	gement Agreement attache Debtor may have scheduled account as: (See instruction #3a) Amount of arreary was filed, included Motor Vehicle Basis for perfectio Amount of Secure	S NV 89147 (Deposit statement, Deposit d) 3b. Uniform Claim Identifier (optional): (See instruction #3b) Inge and other charges, as of the time case in secured claim, if any: S A: Claim: S d: S	
3.	Basis for Claim: Refundable Deposits of 7885 W Flat (See instruction #2) Summary, Lease Agreement, Mana Last four digits of any number by which creditor identifies debtor: 3a 1 2 2 2 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a ristoch required redacted documents, and provide the requested information. Nature of property or right of setoff: Real Estate Other Describe: Annual Interest Rate % Fixed or Fixed or	gement Agreement attache Debtor may have scheduled account as: (See instruction #3a) Amount of arreary was filed, included Motor Vehicle Basis for perfectio Amount of Secure	S NV 89147 (Deposit statement, Deposit d) 3b. Uniform Claim Identifier (optional): (See instruction #3b) Inge and other charges, as of the time case in secured claim, if any: S A: Claim: S d: S	
4.	Basis for Claim: Refundable Deposits of 7885 W Flat (See instruction #2) Summary, Lease Agreement, Mana Last four digits of any number by which creditor identifies debtor: 3a 1 2 2 2 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a ristatch required reducted documents, and provide the requested information. Nature of property or right of setoff: Real Estate Nother Describe: Property: S Annual Interest Rate	mingo Dr. #1118 Las Vegas gement Agreement attache Debtor may have scheduled account as: (See instruction #3a) Amount of arrears was filed, included Amount of Secures Amount Unsecures art of the claim falls into one of the falsons (up to Contributions to an epot of days before plan - 11 U.S.C. § 5	S NV 89147 (Deposit statement, Deposit d) 3b. Uniform Claim Identifier (optional): (See instruction #3b) Inge and other charges, as of the time case in secured claim, if any: S	
4.	Refundable Deposits of 7885 W Flater (See instruction #2) Summary, Lease Agreement, Mana Last four digits of any number by which creditor identifies debtor: 1	Amount of Secured Amount Unsecured art of the claim falls into one of the fasions (up to 0 days before bits is earlier — Other – Specify appli	S NV 89147 (Deposit statement, Deposit d) 3b. Uniform Claim Identifier (optional): (See instruction #3b) Inge and other charges, as of the time case in secured claim, if any: \$	
4.	Refundable Deposits of 7885 W Flater (See instruction #2) Summary, Lease Agreement, Mana Last four digits of any number by which creditor identifies debtor: 1 2 2 2 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of required redacted documents, and provide the requested information. Nature of property or right of setoff: Other Describe: Value of Property: S Annual Interest Rate	Amount of Secure Amount of Secure Amount of Secure Amount of Secure Amount Unsecure art of the claim falls into one of the fasions (up to Contributions to an acount of any before plan - 11 U.S.C. § 5	S NV 89147 (Deposit statement, Deposit d) 3b. Uniform Claim Identifier (optional): (See instruction #3b) Inge and other charges, as of the time case in secured claim, if any: \$	
4.	Basis for Claim: Refundable Deposits of 7885 W Flat (See instruction #2) Summary, Lease Agreement, Mana Last four digits of any number by which creditor identifies debtor: 3a 1 2 2 2 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right attach required redacted documents, and provide the requested information. Nature of property or right of setoff:	Amount of Secured Amount Unsecured art of the claim falls into one of the falls is earlier — Other – Specify apple of 11 U.S.C. § 507 (S NV 89147 (Deposit statement, Deposit d) 3b. Uniform Claim Identifier (optional): (See instruction #3b) Inge and other charges, as of the time case in secured claim, if any: S At Claim: S Claim: A	
4.	Refundable Deposits of 7885 W Flater (See instruction #2) Summary, Lease Agreement, Mana Last four digits of any number by which creditor identifies debtor: 1	Amount of Secured Amount Unsecured art of the claim falls into one of the falls is earlier — Other – Specify apple of 11 U.S.C. § 507 (S NV 89147 (Deposit statement, Deposit d) 3b. Uniform Claim Identifier (optional): (See instruction #3b) Inge and other charges, as of the time case in secured claim, if any: S At Claim: S Claim: A	
4.	Refundable Deposits of 7885 W Flater (See instruction #2) Summary, Lease Agreement, Mana Last four digits of any number by which creditor identifies debtor: 1 2 2 2 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: Describe: Value of Property: S Annual Interest Rate	Amount of Secured Amount Unsecured art of the claim falls into one of the falls is earlier — Other – Specify apple of 11 U.S.C. § 507 (S.C. §	S NV 89147 (Deposit statement, Deposit d) 3b. Uniform Claim Identifier (optional): (See instruction #3b) Inge and other charges, as of the time case in secured claim, if any: S	

EXHIBIT "78"

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 on administrative					
Name of Creditor (the person or other entity to whom the Debtor owes money or property): Richard Chen Irene Tam	Check this box to indicate that this claim amends a previously filed claim.					
Titellard Oriell, Helle Talli	Court Claim Number:					
Name and address where notices should be sent.	Chi Gran					
Richard Chen, Irene Tam 721 16th Av	(If known) (Set City willing)					
San Francisco, CA 94118	Filed on:					
dan randoo, on serio	(MAY - 6 2015)					
Telephone number: 415-999-4088	. \ / /					
Telephone number: 415-999-4080 Email address: richc76@yahoo.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 - 00327					
Telephone number:	District of Nevada					
Email address:	Ameri-Dream, LLC					
Amount of Claim as of Date Case Filed: S 1,700.00						
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 4588 Timaru Dr	, LV NV 89147 (Deposits statement, Deposit Summary,					
Basis for Claim: (See instruction #2) Lease Agreement, Management Agreen						
	Debtor may have scheduled 3b. Uniform Claim Identifier (optional):					
	account as:					
3 7 5 6						
	(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 attach required redacted 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:					
Nature of property or right of setoff:	fotor Vehicle					
☐ Other	Basis for perfection:					
Describe:						
Value of Property: S	Amount of Secured Claim: S					
Annual Interest Rate% ☐ Fixed or ☐ V (when case was filed)	/ariable Amount Unsecured: \$					
	art of the claim falls into one of the following categories, check the box specifying					
□ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). □ Wages, salaries, or commis \$12,475*) carned within 18						
the case was filed or the De	btor's Amount entitled to priority:					
2 Up to \$2,775* of deposits toward business ceased, whichever purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4)	of 11 U.S.C. & 507 (aV.).					
services for personal, family, or	s 1,700.00					
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 coses commenced on or after the date of advertment					
Credits. The amount of all payments on this claim has been credited for the payments.						
6. Credits. The amount of all payments on this claim has been credited for the	Modified B10 (GCG) (4/13)					

EXHIBIT "79"

	-		
1000	98-16	1013	
10000	100 0		
10000	MI II		

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	ises 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). Richard Chen, Irene Tam	☐ Check this box to indicate that this claim amends a previously filed claim.			
Name and address where notices should be sent:	Court Claim Number:			
Richard Chen, Irene Tam	(If known) GIN Group, U			
721 16th Av	[8] V			
San Francisco, CA 94118	Filed on:			
	\ . /			
Telephone number: 415-999-4088				
Email address: richc76@yahoo.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.			
1.41	1. Obtained as a consistence of the property o			
Telephone number:	FILED - 00328			
Email address.	District of Nevada			
Amount of Claim as of Date Case Filed: \$_1,700.00	— Autoritaliy ida			
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.			
	, LV NV 89147 (Deposits statement, Deposit Summary,			
(See instruction #2) Lease Agreement, Management Agreen	nent attached)			
	Debtor may have scheduled account as: 3b. Uniform Claim Identifier (optional):			
3 7 5 6				
	(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 riattach 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:	1			
Value of Property: S	Amount of Secured Claim: 5			
	for the first of t			
Annual Interest Rate	Amount Unsecured: \$			
	art 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 commis				
11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). \$12,475*) carned within 18 the case was filed or the De	hane's			
☑ Up to \$2,775* of deposits toward business ceased, whichever				
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 (aX). s_1,700.00			
household use – 11 U.S.C. § 507 (a)(7). Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).	S.C. §			
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w	uth 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 "80"

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 ar 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): Richard Chen, Irene Tam	Check this box to indicate that this of	claim amends a previously filed claim.		
Name and address where notices should be sent:	Court Claim Number:	GIN Group		
Richard Chen, Irene Tam		(If known)		
721 16th Av	Filed on:	(3) 6 2015		
San Francisco, CA 94118	Fried oil.	MAY - 6 2		
Telephone purpler: 415-999-4088				
Telephone number: 413-999-4008 Email address: richc76@yahoo.com				
Name and address where payment should be sent (if different from above):	Check this box if you are aware that this claim. Attach copy of statement gi	t anyone else has filed a proof of claim relating to		
	this comi. Attach copy of statement gr	This particulars.		
	FILED -	00329		
Telephone number:	District of Nevada			
Email address:	Ameri-Drea	m, LLC		
I. Amount of Claim as of Date Case Filed: \$_1,430.00				
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				
2. Basis for Claim: Refundable Deposits of 4536 Flaming Ridge Tr, LV NV 89147 (Deposits statement, Deposit Summary,				
(See instruction #2) Lease Agreement, Management Agreement attached) 3. Last four digits of any number by which creditor identifies debtor: 3a. Debtor may have scheduled 3b. Uniform Claim Identifier (optional):				
3. East four digits of any number by which creditor identifies depoil.	account as:			
3 7 5 6				
A Chair (Can instruction MA)	(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:				
	flotor Vehicle			
Describe:	Basis for perfection:			
Value of Property: S	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). □ Wages, salaries, or commissions (up to \$12,475*) earned within 180 days before the case was filed or the Debtor's □ Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).				
purchase, lease, or rental of property or services for personal, family, or				
household use = 11 U.S.C. § 507 (a)(7). latest order to governmental units = 11 U. 507 (a)(8).	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 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) Medified B10 (GCG) (4/13)				