# EXHIBIT “91”

| UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA | PROOF OF CLAIM |
|---|---|
| Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED | |

NOTE: *Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.*

Name of Creditor (the person or other entity to whom the Debtor owes money or property): ChangHuaming and Yu Zhang

Name and address where notices should be sent:
Chang Hua Ming and Yu Zhuang
11050 Lavender Ave
Fountain Valley, CA 92708

Telephone number: 714-880-3566
Email address: Zhuang_Yu@yahoo.com

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

**Court Claim Number:** _____ *(If known)*

Filed on: _____

Garden City Group, LLC
MAY - 8 2015

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

Telephone number:
Email address:

☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.

FILED - 00421
District of Nevada
Ameri-Dream, LLC

**1. Amount of Claim as of Date Case Filed:** $ 1775

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:** Deposit on rental home 1216 Stonesthraw
(See instruction #2)

**3. Last four digits of any number by which creditor identifies debtor:** 4127

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

**3b. Uniform Claim Identifier (optional):**
(See instruction #3b)

**4. Secured Claim** (See instruction #4)
Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.

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

**Describe:** _____

**Value of Property:** $_____

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

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

**Basis for perfection:** _____

**Amount of Secured Claim:** $_____

**Amount Unsecured:** $_____

**5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.**

☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).

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

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

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

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

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

**Amount entitled to priority:**
$_____

**Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.*

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

# EXHIBIT “92”

| UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA | PROOF OF CLAIM |
|---|---|

Name of Debtor: Ameri-Dream Realty, LLC · Case No. 15-10110-LED

NOTE: *Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.*

Name of Creditor (the person or other entity to whom the Debtor owes money or property): Jing Cheng Luo.

Name and address where notices should be sent:
Jing Cheng Luo
1738 Stephen St. Apt. 3R
Ridgewood, NY 11385

Telephone number: 347-453-1677
Email address: ch5548@gmail.com

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

**Court Claim Number:** _____ *(If known)*

Filed on: _____

Garden City Group, LLC
MAY - 8 2015

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

Telephone number:
Email address:

☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.

FILED - 00424
District of Nevada
Ameri-Dream, LLC

1. **Amount of Claim as of Date Case Filed:** $ 4335

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:** Deposit on rental properties
(See instruction #2)

3. **Last four digits of any number by which creditor identifies debtor:** 9 2 8 7

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

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

4. **Secured Claim** (See instruction #4)
Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.

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

**Describe:** _____

**Value of Property:** $_____

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

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

**Basis for perfection:** _____

**Amount of Secured Claim:** $_____

**Amount Unsecured:** $_____

5. **Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.**

☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).

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

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

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

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

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

**Amount entitled to priority:**
$_____

**Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.*

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

# EXHIBIT “93”

**UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA** | **PROOF OF CLAIM**

Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED

*NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.*

Name of Creditor (the person or other entity to whom the Debtor owes money or property): Jun Liang Wu, Su Ying Cen

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

**Court Claim Number:** _____ *(If known)*

Filed on: _____

Garden City Group, LLC
MAY - 8 2015

Name and address where notices should be sent:
Jun Liang Wu, Su Ying Cen
2965 Copper Beach Ct
Las Vegas, NV 89117

Telephone number: 702-339-2593
Email address: garywym625@hotmail.com

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

Telephone number:
Email address:

☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.

**FILED - 00469**
**District of Nevada**
**Ameri-Dream, LLC**

**1. Amount of Claim as of Date Case Filed:** $ 2,375.00

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 9636 Tuscola Ct, Las Vegas NV 89148 (Deposit statement, Deposit Summary, Lease Agreement, Management Agreement attached)
(See instruction #2)

**3. Last four digits of any number by which creditor identifies debtor:** 9 9 0 4

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

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

**4. Secured Claim** (See instruction #4)
Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.

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

**Describe:** _____

**Value of Property:** $_____

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

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

**Basis for perfection:** _____

**Amount of Secured Claim:** $_____

**Amount Unsecured:** $_____

**5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.**

☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).

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

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

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

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

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

**Amount entitled to priority:**
$ 2,375.00

**Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.*

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

# EXHIBIT “94”

| UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA | PROOF OF CLAIM |
|---|---|

Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED

NOTE: *Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.*

Name of Creditor (the person or other entity to whom the Debtor owes money or property): Doan Huu Lam

Name and address where notices should be sent:
Doan Huu Lam
506 Skyview Point PL NE
Calgary AB T3N 0L7
Canada

Telephone number: 403-617-6500
Email address: a_active2002@yahoo.com

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

**Court Claim Number:** _____ *(If known)*

Filed on: _____

Garden City Group, LLC
MAY – 8 2015

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

Telephone number:
Email address:

☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.

**1. Amount of Claim as of Date Case Filed: $** 1,175.00

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.

FILED - 00468
District of Nevada
Ameri-Dream, LLC

**2. Basis for Claim:** Refundable Deposits of 729 Reagan Dr, LV NV 89110 (Deposits statement, Deposit Summary, Lease Agreement, Management Agreement attached)
(See instruction #2)

**3. Last four digits of any number by which creditor identifies debtor:** 0 5 8 7

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

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

**4. Secured Claim** (See instruction #4)
Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.

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

**Describe:** _____

**Value of Property: $** _____

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

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

**Basis for perfection:** _____

**Amount of Secured Claim:** $ _____

**Amount Unsecured:** $ _____

**5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.**

☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B)

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

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

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

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

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

**Amount entitled to priority:**
$ 1,175.00

**Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.*

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

# EXHIBIT “95”

| UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA | PROOF OF CLAIM |
|---|---|

Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED

NOTE: *Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.*

Name of Creditor (the person or other entity to whom the Debtor owes money or property): XiaoLi Li

Name and address where notices should be sent
XiaoLi Li
7850 Fall Harvest Dr
Las Vegas, NV 89147

Telephone number 562-980-2862
Email address: mikecheung702@hotmail.com

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

**Court Claim Number:** _____ *(If known)*

Filed on: _____

Garden City Group, LLC
MAY – 8 2015

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

Telephone number
Email address:

☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.

**FILED - 00470**
**District of Nevada**
**Ameri-Dream, LLC**

**1. Amount of Claim as of Date Case Filed:** $ 1,450.00

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 4452 Marengo Pl. Las Vegas NV 89147 (Deposits statement, Deposit Summary, Lease Agreement, Management Agreement attached)
(See instruction #2)

**3. Last four digits of any number by which creditor identifies debtor:** 2 1 4 2

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

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

**4. Secured Claim** (See instruction #4)
Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.

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

**Describe:** _____

**Value of Property:** $_____

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

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

**Basis for perfection:** _____

**Amount of Secured Claim:** $_____

**Amount Unsecured:** $_____

**5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.**

☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).

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

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

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

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

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

**Amount entitled to priority:**
$ 1,450.00

**Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.*

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

# EXHIBIT “96”

**UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA** | **PROOF OF CLAIM**

Name of Debtor: Ameri-Dream Realty, LLC Case No 15-10110-LED

NOTE: *Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.*

Name of Creditor (the person or other entity to whom the Debtor owes money or property): Ya Qin Huang

Name and address where notices should be sent:
Ya Qin Huang
3739 Paria Canyon St.
Las Vegas, NV 89147

Telephone number: 702-328-3008
Email address: YHuang9801@yahoo.com

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

**Court Claim Number:** _____ *(If known)*

Filed on: _____

Garden City Group, LLC
MAY - 8 2015

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

Telephone number:
Email address:

☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.

**1. Amount of Claim as of Date Case Filed:** $ 1,450.00

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

**FILED - 00471**
**District of Nevada**
**Ameri-Dream, LLC**

**2. Basis for Claim:** Refundable Deposits of 8346 Fame Av. Las Vegas, NV 89147 (Deposits statement, Lease Agreement, Management Agreement attached)
(See instruction #2)

**3. Last four digits of any number by which creditor identifies debtor:** 1 7 1 4

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

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

**4. Secured Claim** (See instruction #4)
Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.

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

**Describe:** _____

**Value of Property:** $_____

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

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

**Basis for perfection:** _____

**Amount of Secured Claim:** $_____

**Amount Unsecured:** $_____

**5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.**

☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).

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

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

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

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

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

**Amount entitled to priority:**
$ 1,450.00

**Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.*

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

# EXHIBIT “97”

| UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA | PROOF OF CLAIM |
|---|---|

Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED

NOTE: *Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.*

Name of Creditor (the person or other entity to whom the Debtor owes money or property): Johnny Yeh-Chao Chu, Theresa Chu

Name and address where notices should be sent:
Johnny Yeh-Chao Chu, Theresa Chu
7371 Gold Rush Ct
Las Vegas, NV 89113

Telephone number: 702-802-0152
Email address: jyc333@yahoo.com

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

**Court Claim Number:** _____ *(If known)*

Filed on: _____

Garden City Group, LLC
MAY - 8 2015

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

Telephone number
Email address

☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.

**1. Amount of Claim as of Date Case Filed:** $ 1,648.00

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.

FILED - 00472
District of Nevada
Ameri-Dream, LLC

☐ 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 8046 Bonaventure Dr, LV NV 89147 (Deposits statement, Deposit Summary, Lease Agreement, Management Agreement attached)
(See instruction #2)

**3. Last four digits of any number by which creditor identifies debtor:** 2 1 7 0

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

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

**4. Secured Claim** (See instruction #4)
Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information

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

**Describe:** _____

**Value of Property:** $_____

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

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

**Basis for perfection:** _____

**Amount of Secured Claim:** $_____

**Amount Unsecured:** $_____

**5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.**

☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B)

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

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

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

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

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

**Amount entitled to priority:**
$ 1,648.00

**Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.*

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

# EXHIBIT “98”

| UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA | PROOF OF CLAIM |
|---|---|

Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED

NOTE: *Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.*

Name of Creditor (the person or other entity to whom the Debtor owes money or property) Hung C Luong

Name and address where notices should be sent:
Hung C Luong
4561 HALFWAY ROCK ST
LAS VEGAS, NV 89147

Telephone number: 702-417-0801
Email address: hungluong1212@gmail.com

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

**Court Claim Number:** _____ *(If known)*

Filed on: _____

Garden City Group, LLC
MAY - 8 2015

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

Telephone number
Email address

☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.

**FILED - 00473**
**District of Nevada**
**Ameri-Dream, LLC**

1. **Amount of Claim as of Date Case Filed:** $ 1,750.00

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 3674 Summer Picnic Ct, Las Vegas NV 89147 (Deposits statement, Deposit Summary, Lease Agreement, Management Agreement attached)
(See instruction #2)

3. **Last four digits of any number by which creditor identifies debtor:** 2 5 1 8

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

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

4. **Secured Claim** (See instruction #4)
Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.

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

**Describe:** _____

**Value of Property:** $ _____

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

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

**Basis for perfection:** _____

**Amount of Secured Claim:** $ _____

**Amount Unsecured:** $ _____

5. **Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.**

☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B)

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

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

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

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

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

**Amount entitled to priority:**
$ 1,750.00

**Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.*

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

# EXHIBIT “99”

**UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA** | **PROOF OF CLAIM**

Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED

NOTE: *Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.*

Name of Creditor (the person or other entity to whom the Debtor owes money or property): 3 M Brothers LLC

Name and address where notices should be sent:
3 M Brothers LLC
9828 Meandering Creek Ct
Las Vegas, NV 89117

Telephone number: 702-480-7234
Email address: mikecheung702@hotmail.com

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

**Court Claim Number:** _____ *(If known)*

Filed on: _____

Garden City Group, LLC
MAY – 8 2015

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

Telephone number:
Email address:

☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.

FILED - 00474
District of Nevada
Ameri-Dream, LLC

1. **Amount of Claim as of Date Case Filed:** $ 2,064.80 (Security deposit $ 1,430.00 + Missing January rent $ 634.80)

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 3147 La Mesa Dr, LV NV 89104 (Deposits statement, Deposit Summary, Lease Agreement, Management Agreement attached)
(See instruction #2)

3. **Last four digits of any number by which creditor identifies debtor:** 2 3 0 0

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

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

4. **Secured Claim** (See instruction #4)
Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.

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

**Describe:** _____

**Value of Property:** $_____

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

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

**Basis for perfection:** _____

**Amount of Secured Claim:** $_____

**Amount Unsecured:** $_____

5. **Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.**

☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).

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

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

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

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

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

**Amount entitled to priority:**
$ 2,064.80

**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)