## EXHIBIT "11"



UNITED STATES BANKRUPT	UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA PROOF OF CLAIM		
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED .			
	claim for on administrative expense that arise	s after the bankruptcy filing. You may	file a request for payment of an administrative
expense according to 11 U.S.C. § 503.	entity to whom the Debtor owes money or	Charle that how to independ that this	claim amonds a previously filed claim.
property). David Su Truong, N		a check this box to indicate that this	ciain anoists a previously fried claim.
Name and address where notices shoul		Court Claim Number:	On Co
David Su Truong, M			(If known) ASIT CITY LEGUE,
1774 Sageland Dr			(3)
San Jose, CA 9513	1	Filed on.	( MAY - 8 2015 )
			. \ "" ]
Telephone number: 408-889-324			
	774@yahoo.com	Chark this how if you are aware tha	at anyone else has filed a proof of claim relating to
Name and address where payment sho		this claim. Attach copy of statement g	
			-
Telephone number:			
Email address			
<ol> <li>Amount of Claim as of Date Co</li> </ol>	se Filed: \$_1,500.00		FILED - 00485
It all or part of the claim is secur	ed. complete item 4.	-	District of Nevada
It all or part of the claim is entitle	ed to priority, complete item 5		Ameri-Dream, LLC
Check this box if the claim in	cludes interest or other charges in addition to t	he principal amount of the claim. Atta	ch a statement that itemizes interest or charges.
2. Basis for Claim: Refundable Deposits from Renters of 6336 Eldorado Pines Av. LV NV 89139 (Deposits Statement, Deposit			
(See instruction #2) Summary, Lease Agreement, Management Agreement attached)			
3. Last four digits of any number	by which creditor identifies debtor: 3a.	Debtor may have scheduled account as:	3b. Uniform Claim Identifier (optional):
_80_			
		(See instruction #3a)	(See instruction #3b)
<ol> <li>Secured Claim (See instruction Check the appropriate box if the</li> </ol>	#4) claim is secured by a lien on property or a ng		e and other charges, as of the time case in secured claim, if any:
	nts, and provide the requested information,		s
Nature of property or right of		nter Vehicle	
Describe:	. Other	Basis for perfection	-
Value of Property: S		Amount of Secured	Claim: S
Annual Interest Rate(when case was filed)	% D Fixed or D Va	uriable	. ė
(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 amo			
☐ Domestic support obligation: 11 U.S.C. § 597 (a)(1)(A) or			
	the case was filed or the Deb	nor's	Amount entitled to priority
Up to \$2,775° of deposits to purchase, lease, or rental of p	roperty or 11 U.S.C. § 507 (a)(4)	is earlier – Q Other – Specify appli of 11 U.S.C. § 507 (a	canic paragraph (X).
services for personal, family, household use = 11 U.S.C. § 5	(07 (a)x7). Taxes or penalties owed to		\$1,500.00
	governmental units – 11 U.S 507 (a)(8).	.C. §	
*Amounts are subject to adjust	nent on 4/1/16 and every 3 years thereafter wi	th respect to cases commenced on or o	after the date of adjustment.
	nents on this claim has been credited for the p		(See instruction #6)
			Modified B10 (GCG) (4/13)

## EXHIBIT "12"



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA PROOF OF CLAIM			
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED			
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filling. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.			
Name of Creditor (the person or other entity to whom the Debtor owes money or property). Loui Luu, Muoi Loi	Check this box to indicate that this claim amends a previously filed claim.		
Name and address where notices should be sent:	Court Claim Number:		
- Loui Luu, Muoi Lo	(If known) ABN City Group		
2611 Autumnvale Dr	Filed on.		
San Jose, CA 95132	( MAY - 8 2015 )		
Telephone number 408-406-7308			
Email address: louiluu@sbcglobal.net			
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.		
Telephone number;			
Email address:			
Amount of Claim as of Date Case Filed: S 1,375.00	FILED - 00486 District of Nevada		
If all or part of the claim is secured, complete item 4.	Ameri-Dream, LLC		
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	to the principal amount of the claim. Attach a statement that itemizes interest or charges.		
Busis for Claim: Refundable Deposits of 7467 Miss	ion Palm St., LV NV 89139 (Deposits statement, Deposit Summary,		
(See instruction #2) Lease Agreement, Management A			
	a. Debtor may have scheduled 3h. Uniform Claim Identifier (optional): account as:		
9 5 1 0			
	(See instruction #3a) (See instruction #3b)		
<ol> <li>Secured Claim (See instruction #4)         Check the appropriate box if the claim is secured by a lien on property or a attach required reducted documents, and provide the requested information.     </li> </ol>	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	Motor Vehicle		
□ Other	Basis for perfection:		
Describe:			
Value of Property: S	Amount of Secured Claim: S		
Annual Interest Rute% ☐ 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  !! U.S.C. § 507 (a)(1)(A) or (a)(1)(B)  \$12,475*) camed within the case was filed or the l	Debtor*s		
☑ Up to \$2,775* of deposits toward business ceased, whichever	er is earlier -   Other - Specify applicable paragraph  Amount entitled to priority:		
services for personal, family, or	of 11 U.S.C. § 507 (alf) . § 1,375.00		
household use = 11 U.S.C. § 507 (a)(7)  Taxes or penalties owed to governmental units = 11 U.S.C. § 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.		
6. Credits. The amount of all payments on this claim has been credited for th			

## EXHIBIT "13"



	THE REAL PROPERTY OF THE PROPE	
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 banks expense according to 11 U.S.C. § 503.	uptcy 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): Xing He Wu, Jian Hua Huang  Court Claim No.	x to indicate that this claim amends a previously filed claim.	
Name and address where notices should be sent:	an City Grav	
Xing He Wu, Jian Hua Huang	(If known) (Salid	
910 Pumehana #F	/ ~ /	
Honolulu, HI 96826	MAY - 8 2015	
Telephone number: 808-389-9697		
Telephone number: 808-389-9697 Email address: mikecheung702@hotmail.com		
Name and address where payment should be sent (if different from above):	if you are aware that anyone else has filed a proof of claim relating to	
this claim. Attack	h copy of statement giving particulars	
Telephone number:	i	
Email address:		
Amount of Claim as of Date Case Filed: S 1,550.00	FileD - 00487	
If all or part of the claim is secured, complete item 4.	District of Nevada	
If all or part of the claim is entitled to priority, complete item 5.	Ameri-Dream, LLC	
Check this box if the claim includes interest or other charges in addition to the principal amo	ant of the claim. Attach a statement that itemizes interest or charges	
2. Dasis in Claim.	V NV 89148 (Deposits statement, Deposit Summary,	
(See instruction #2) Lease Agreement, Management Agreement atta		
Last four digits of any number by which creditor identifies debtor:     Sa. Debtor may he account as:	ive scheduled 3b. Uniform Claim Identifier (optional):	
6 7 5 2 (See instru	ction #3a) (See instruction #3b)	
4. Secured Claim (See instruction #4)	Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any:	
attach required redacted documents, and provide the requested information	\$	
Nature of property or right of setoff: Real Estate Motor Vehicle		
Describe:	Basis for perfection:	
Value of Property: S	Amount of Secured Claim: S	
Annual Interest Rate % D Fixed or D 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.		
	Contributions to an employee benefit plan = 11 U.S.C. § 507 (a)(5).	
	Other – Specify applicable paragraph Amount entitled to priority:	
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.S.C. §		
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.		
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 "14"

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): Xing He Wu, Jian Hua Huang			
Name and address where notices should be sent:  Xing He Wu, Jian Hua Huang 910 Pumehana #F  Honolulu, HI 96826  Court Claim Number:  (If known)  Filed on:			
Telephone number: 808-389-9697			
Email address mikecheung702@hotmail.com  Name and address where payment should be sent (if different from above):  D'Check this box if you are aware that anyone else has filed a proof of claim relative claim. Attach copy of statement giving particulars.	ting to		
Telephone number: Email address:			
1. Amount of Claim as of Date Case Filed: S 1,700.00  FILED - 00488  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.			
Refundable Deposits of 7612 Glorietta Bay Ct, LV NV 89139 (Deposits statement, Deposit Sum     (See instruction #2)     Lease Agreement, Management Agreement attached)  1			
3. Last four digits of any number by which creditor identifies debtor:  3a. Debtor may have scheduled account as:  3b. Uniform Claim Identifier (options)	i):		
6 7 5 2 (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 reducted 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:	-		
Value of Property: \$ Amount of Secured Claim: \$	-		
Annual Interest Rate			
<ol> <li>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.</li> </ol>			
☐ Domestic support obligations under  IT U.S.C. § 507 (a)(1)(A) or (a)(1)(B)  Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit s12,475*) earned within 180 days before plan = 11 U.S.C. § 507 (a)(5).  the case was filed or the Debtor's	iority:		
Mount entitled to p  business ceased, whichever is earlier −  purchase, lease, or rental of property or  services for personal, family, or  household use ~ 11 U.S.C. § 507 (a)(7).  Taxes or penalities owed to  governmental units − 11 U.S.C. §  507 (a)(8)  Amount entitled to p  of 11 U.S.C. § 507 (a)().  \$ 1,700.00	_		

Modified B10 (GCG) (4/13)

## **EXHIBIT** "15"

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1000			ши

	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): YanHong Tang		claim amends a previously filed claim	
Name and address where notices should be sent:	Court Claim Number:	City Co	
YanHong Tang		(If known) aden City 0/000	
7275 Tara Ave	Filed on:	(a s/	
Las Vegas, NV 89117	i ned on.	( MAY - 8 2015 )	
Telephone number 702-480-7234			
Email address: mikecheunglv@gmail.com	C Charle thus how if you are aware the	t 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 g		
		FILED - 00489	
Telephone number:		District of Nevada	
Email address:		Ameri-Dream, LLC	
Amount of Claim as of Date Case Filed: \$ 2,100.00			
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. Atta	ch a statement that itemizes interest or charges.	
Basis for Claim: Refundable Deposits of 7763 Spino	drift Cove St., Las Vegas NV	89139 (Deposit statement, Deposit	
(See instruction #2) Summary, Lease Agreement, Mana			
Last four digits of any number by which creditor identifies debtor:     .	<ul> <li>Debtor may have scheduled account as:</li> </ul>	3b. Uniform Claim Identifier (optional):	
<u>7 5 1 3</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 r	Amount of arrears	(See instruction #3b) te and other charges, as of the time case 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 rattach required reducted documents, and provide the requested information.	Amount of arrearaging to of setoff, was filed, included it	e and other charges, as of the time case	
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	Amount of arreara; ight of setoff, was filed, included i	e and other charges, as of the time case n secured claim, if any: S	
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 arrearaging to of setoff, was filed, included it	e and other charges, as of the time case n secured claim, if any: S	
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 □ Other	Amount of arreara; ight of setoff, was filed, included i	e and other charges, as of the time case n secured claim, if any: S	
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:  Describe:  Value of Property: S	Amount of arrearaj ight of setoff, was filed, included i Motor Vehicle Basis for perfection	te and other charges, as of the time case in secured claim, if any:  S	
4. Secured Claim (See instruction #4)  Check the appropriate box if the claim is secured by a lien on property or a rattach required redacted documents, and provide the requested information.  Nature of property or right of setoff:  Describe:  Value of Property: S  Annual Interest Rate  % Fixed or	Amount of arrearage was filed, included in Motor Vehicle  Basis for perfection  Amount of Secured Variable  Amount Unsecured	e and other charges, as of the time case n secured claim, if any:  S  Claim:  \$	
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 Describe: Value of Property: S  Annual Interest Rate	Amount of arrearage was filed, included in wa	ce and other charges, as of the time case n secured claim, if any:  S  Claim:  S  Illowing categories, check the box specifying nployee benefit 7 (a)(5).	
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a rattach required redacted documents, and provide the requested information.  Nature of property or right of setoff:    Real Estate   Property	Amount of arrearage was filed, included is was filed, included is Motor Vehicle  Basis for perfection  Amount of Secured Variable  Amount Unsecured part of the claim falls into one of the form of the claim	cand other charges, as of the time case in secured claim, if any:  S	
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a rattach required redacted documents, and provide the requested information.  Nature of property or right of setoff:    Real Estate   Property: S	Amount of arrearage was filed, included is was filed, included is Motor Vehicle  Basis for perfection  Amount of Secured variable  Amount Unsecured part of the claim falls into one of the form of the claim	cand other charges, as of the time case in secured claim, if any:  S	
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a rattach required redacted documents, and provide the requested information.  Nature of property or right of setoff:    Real Estate   Property	Amount of arrearage was filed, included is was filed, included is Motor Vehicle  Basis for perfection  Amount of Secured  Variable  Amount Unsecured part of the claim falls into one of the form of the form of the claim falls into one of the form	cand other charges, as of the time case in secured claim, if any:  S  Claim:  \$  Claim:  \$  S  Mowing categories, check the box specifying inployee benefit  7 (a)(5).  Cable paragraph  (X_)  Amount entitled to priority:  \$ 2,100.00	

## EXHIBIT "16"

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF	DF 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 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)* Doan Huu Lam	☐ Check this box to indicate that this claim amends a previously filed claim.	
Name and address where notices should be sent.	Court Claim Number:	
Doan Huu Lam	(If known) allen City Group	
506 Skyview Point PL NE	Filed on:	
Calgary AB T3N 0L7	MAY - 8 2015	
Canada	<del></del>	
403-617-6500		
Telephone number		
Email address: a_active2002@yal100.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	
Name and address where payment should be sent (if different from active).	this claim. Attach copy of statement giving particulars.	
·	FILED - 00490	
Telephone number:	District of Nevada	
Email address:	· Ameri-Dream, LLC	
Amount of Claim as of Date Case Filed: S 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. Attach a statement that itemizes interest or charges.	
2. Basis for Claim: Refundable Deposits of 4448 Midw	ay Ln., LV NV 89108 (Deposits statement, Deposit Summary,	
(See instruction #2) Lease Agreement, Management Ag	greement attached)	
3. Last four digits of any number by which creditor identifies debtor: 3a	a. Debtor may have scheduled 3b. Uniform Claim Identifier (optional):	
0 5 8 7	account as.	
<u> </u>	(See instruction #3a) (See instruction #3b)	
<ol> <li>Secured Claim (See instruction #4)         Check the appropriate box if the claim is secured by a lien on property or a ri     </li> </ol>	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	
Other	Motor Vehicle Basis for perfection: ~	
Describe:		
Value of Property: S	Amount of Secured Claim: \$	
Annual 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 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		
the case was filed or the Do	ebtor's Amount entitled to priority:	
☑ 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 U.S.C. 8 507 (a)( ).	
services for personal, family, or household use - 11 U.S.C. § 507 (a)(7).   Taxes or penalties owed to	s 1,250.00	
governmental units = 11 U	S C. §	
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		
	Modified B10 (GCG) (4/13)	

## **EXHIBIT** "17"



	17/00/2007 // (100/2007 // (200/2000) // (200/2000) // (200/2000) // (200/2000) // (200/2000) // (200/2000) // (200/2000) // (200/2000) // (200/2000) // (200/2000) // (200/2000) // (200/2000) // (200/2000) // (200/2000) // (200/2000) // (200/2000) // (200/2000) // (200/2000) //	
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 far 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): Yue Fang	Check this box to indicate that this claim amends a previously filed claim.	
Name and address where notices should be sent:	Court Claim Number:	
Yue Fang	(If known) 442 8	
3956 Los Altos Ln	8 2015	
Eugene, OR 97405	Filed on:	
Telephone number 541-221-1388 Email address: ly20021@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 - 00492	
	District of Nevada	
Telephone number:	Ameri-Dream, LLC	
Email address:  1. Amount of Claim as of Date Case Filed: \$ 1,525.00		
	<del></del>	
If all or part of the claim is secured, complete item 4.		
If all or part of the claim is entitled to priority, complete item 5.		
☐ Check this box if the claim includes interest or other charges in addition to	o the principal amount of the claim. Attach a statement that itemizes interest or charges.	
2. Dasis for Claim.	evso Dr Las Vegas NV 89147 (Deposits statement, Deposit	
(See instruction #2) Summary, Lease Agreement, Mani     Last four digits of any number by which creditor identifies debtor: 3:	a. Debtor may have scheduled 3b. Uniform Claim Identifier (optional):	
5. Last four argus of any number by which creation dentines debtor.	account as:	
4 4 5 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 right of setoff, attach required redacted documents, and provide the requested information.  Amount of arrearage and other charges, as of the time case was filled, included in secured claim, if any:		
Nature of property or right of setoff:	Motor Vehicle Basis for perfection:	
Describe:		
Value of Property: S Amount of Secured Claim: S		
Annual Interest Rate%	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  ☐ Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit ☐ U.S.C. § 507 (a)(1)(A) or (a)(1)(B).  ☐ S12,475*) earned within 180 days before plan — 11 U.S.C. § 507 (a)(5).		
the case was filed or the D  Up to \$2,775* of deposits toward  purchase, lease, or rental of property or  11 U.S.C. § 507 (a)(4).	r is earlier — Other — Specify applicable paragraph  of 11 U.S.C. 8 507 (aV ).	
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).		
*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)		

# **EXHIBIT** "18"



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 occording 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): Jeffrey Chen, Shirley Zheng	Court Claim Number:	
Name and address where notices should be sent:	City Group, UC	
Jeffrey Chen, Shirley Zheng 818 29th Av	(If known)s	
San Francisco, CA 94121	Filed on:	
Telephone number: 415-730-4541		
Email address: jeff6142001@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 - 90495	
Telephone number:	District of Nevada	
Email address:	Ameri-Dream, LLC	
Amount of Claim as of Date Case Filed: S 1,750.00	<del></del>	
If all or part of the claim is secured, complete stem 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.	
	y Cr, LV NV 89117 (Deposits statement, Deposit Summary,	
(See instruction #2) Lease Agreement, Management Agree	ment attached)	
3. Last four digits of any number by which creditor identifies debtor:  3a. Debtor may have scheduled account as:  3b. Uniform Claim Identifier (optional):		
9 8 7 6		
4. 0	(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:		
	Motor Vehicle S	
□ Other	Basis for perfection:	
Describe:	4.4.	
Value of Property: S	Amount of Secured Claim: S	
Annual Interest Rate% □ Fixed or □	Variable	
(when case was filed)	Amount Unsecured: \$	
<ol> <li>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.</li> </ol>		
□ Domestic support obligations under  □ Wages, salaries, or commissions (up to □ Contributions to an employee benefit 11 U.S.C. § 507 (u)(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 D  Up to \$2,775* of deposits toward business ceased, whicheve	r is earlier - Other - Specify applicable 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)(). § 1,750.00	
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 with respect to cases commenced on or after the date of adjustment.		
6. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)		

Modified B10 (GCG) (4/13)

# **EXHIBIT** "19"



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA PROOF OF CLAIM	
Name of Debtor; Ameri-Dream Realty, LLC Case No. 15-10110-LED	•
NOTE: Do not use this form to make a claim for an administrative expense that 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): Jeffrey Chen, Shirley Zheng	Check this box to indicate that this claim amends a previously filed claim.  Court Claim Number:
Name and address where notices should be sent:  Jeffrey Chen, Shirley Zheng	(If known) Light City Group, Item
818 29th Av San Francisco, CA 94121	Filed on: (MAY - 8 2015)
Telephone number: 415-730-4541 Email address: jeff6142001@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.
2.	FILED - 00496
Telephone number:	District of Nevada Ameri-Dream, LLC
Email address:  1. Amount of Claim as of Date Case Filed: \$ 1,550.00	Ameri-Oream, ELC
Basis for Claim: Refundable Deposits of 7777 Eagle Lak     (See instruction #2) Lease Agreement, Management Agreement	to the principal amount of the claim. Attach a statement that itemizes interest or charges.  Se Av., LV NV 89147 (Deposits statement, Deposit Summary, ment attached)  a. Debter may have scheduled account as:  3b. Uniform Claim Identifier (optional):
9 8 7 6	(See instruction #3a) (See instruction #3b)
Secured Claim (Sec 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
	Motor Vehicle  Basis for perfection:
Value of Property: \$	Amount of Secured Claim: S
Annual Interest Rate	Variable Amount Unsecured: \$
<ol> <li>Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any p the priority and state the amount.</li> </ol>	sart 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 18 the case was filed or the D	80 days before plan – 11 U.S.C § 507 (a)(5).
business ceased, whichever purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).  Taxes or penalties owed to governmental units – 11 U. 507 (a)(8).	of 11 U.S.C. § 507 (a)().  s 1,550.00
*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)

Modified BI0 (GCG) (4/13)

## EXHIBIT "20"



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 ari	ses after the bankruptcy filing. You may file a request for payment of an administrative
expense according to 11 U.S.C. § 503.	act offer the dams opicy jump, rod may the direction payment by an deministrative
Name of Creditor (the person or other entity to whom the Debtor owes money or property): Jeffrey Chen, Shirley Zheng	☐ Check this box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent:	Court Claim Number:
Jeffrey Chen, Shirley Zheng	(If known) (3) den vily would
818 29th Av	/° [8]
San Francisco, CA 94121	Filed on: MAY - 8 2015
9	
Telephone number: 415-730-4541	
Email address: jeff6142001@yahoo.com	2
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.
K.	FILED - 90497
Telephone number:	District of Nevada
Email address:	Ameri-Dream, LLC
Amount of Claim as of Date Case Filed: \$ 2,400.00	
2. Hasis for Claim: Refundable Deposits of 5759 Crescent III (See instruction #2) Lease Agreement, Management Agreem 3. Last four digits of any number by which creditor identifies debtor: 3a	the principal amount of the claim. Attach a statement that itemizes interest or charges.  Landing St., LV NV 89113 (Deposits statement, Deposit Summary, ment attached)  Debtor may have scheduled account as:  3b. Uniform Claim Identifier (optional):
9 8 7 6	(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 ri attach required redacted documents, and provide the requested information.  Nature of property or right of setoff:    Real Estate   N	Amount of arrearage and other charges, as of the time case
Value of Property: S	Amount of Secured Claim: \$
	Variable
(when case was filed)  5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any p	Amount Unsecured: \$
the priority and state the amount.	are or the claim into one or the tollowing caregories, check the tolk specifying
☐ Domestic support obligations under  11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).  \$12,475*) carned within 14 the case was filed or the Dr	80 days before plan – 11 U.S.C. § 507 (a)(5).
☐ Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, familty, or household use = 11 U.S.C. § 507 (a)(7).  ☐ Taxes or penalties owed to governmental units = 11 U.  507 (a)(8).	r is earlier - Other - Specify applicable paragraph of 11 U.S.C. § 507 (a)(_).  \$ 2,400.00
*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)

Modified B10 (GCG) (4/13)