EXHIBIT "51"

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	DF NEVADA PROOF OF CLAIM
Name of Debtor Ameri-Dream Realty, LLC Case No. 15-10110-LEE	
NOTE: Do not use this form to make a claim for an administrative expense that are expense occarding to 11 U.S.C. § 503.	ises ofter the bonkruptcy 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) Wai Lee, Yu Chun Lee	Court Claim Number:
Name and address where notices should be sent:	aden and analy
Wai Lee, Yu Chun Lee 11696 S SPRUCEBERY CIR	(If known)
DRAPER, UT 84020-6857	Filed on: MAY 1 1 2015 .
2.3.1 2.1, 0.1 0.1020 0000	
Telephone number: 801-450-3119	
Email address: calvinrph1999@hotmail.com	
Name and address where payment should be sent (if different from above).	☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.
	FILED - 00534
	District of Nevada
Telephone number: Email address:	Ameri-Dream, LLC
1. Amount of Claim as of Date Case Filed: 5_1,650.00	
If all or part of the claim is secured, complete item 4.	
If all or part of the claim is entitled to priority, complete item 5.	
☐ 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
Basis for Claim: Refundable Deposits of 3178 Lapis	Beach Dr. Las Vegas, NV 89117 (Deposits statement, Lease
(See instruction #2) Agreement, Management Agreeme	int attached)
3. Last four digits of any number by which creditor identifies debtor: Ja	Debtor may have scheduled 3b. Uniform Claim Identifier (optional): account as:
2 2 0 9	
	(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 ught of setoff, was filed, included in secured claim, if any:
	Motor Vehicle
Describe:	Basis for perfection:
Practice:	
Value of Property: S	Amount of Secured Claim: \$
Annual Interest Rate	Variable Amount Unsecured: \$
	Amount Unsecured: 5
the priority and state the amount.	
☐ Demestic support obligations under 11 U.S.C. § 507 (a\(\chi\)\(\chi\)\(\chi\)\(\chi\)\(\chi\) 12.475°) carried within 11 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, whichever	r is earlier - Other - Specify applicable paragraph
services for personal, family, or	of 11 U S.C. § 507 (a)(). s 1,650.00
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 4-11% and every 3 years thereafter w	outh 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 "52"

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT (OF NEVADA	PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED		
NOTE: Do not use this form to make a claim for an administrative expense that ari 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): James Lui	Check this box to indicate that this claim	im amends a previously filed claim.
Name and address where notices should be sent:	Court Claim Number:	City Group
James Lui	·	1/known) States
1576 Bridlebrok Cr.		/ · · · · · · · · · · · · · · · · · · ·
Salt Lake City, UT 84117	Filed on:	MAY 1 1 2015
		\ /
Telephone number 801-455-8999		
Email address. JFLUI8@yahoo.com		
Name and address where payment should be sent (if different from above):	Check this box if you are aware that an this claim. Attach copy of statement givin	nyone else has filed a proof of claim relating to ng particulars.
	'	F1LED - 00535 District of Nevada
Telephone number:		Ameri-Dream, LLC
Email address: 1. Amount of Claim as of Date Case Filed: \$ 1,925.00		American
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.
Basis for Claim: Refundable Deposits of 7910 Palace M (See instruction #2) Agreement, Management Agreement a		17 (Deposits statement, Lease
		b. Uniform Claim Identifier (optional):
5 7 5 2	:	
	(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. 		nd other charges, as of the time case reured claim, if any:
	Motor Vehicle	s
Describe: Other	Basis for perfection:	
District		
Value of Property: S	, Amount of Secured Cla	nim: S
Annual Interest Rate %	Variable Amount Unsecured:	s
 Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any p the priority and state the amount. 	art of the claim falls into one of the follow	wing categories, check the hox specifying
Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B) \$12,475*) camed within 1	80 days before plan - 11 U S.C. § 507 (a	
the case was filed or the D W Up to \$2,775* of deposits toward business ceased, whicheve	r is earlier - Other - Specify applicable	
purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4). services for personal, family, or	of 11 U.S.C. § 507 (a)(s 1,925.00
household use – 11 U.S.C. § 507 (a)(7). Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(7).		
507 (a)(8).		
*Amounts are subject to adjustment on 4.1/16 and every 3 years thereafter s	rith respect to cases commenced on or after	the date of adjustment.
6. Credits. The amount of all payments on this claim has been credited for the	purpose of making this proof of claim. (See	instruction #6)

EXHIBIT "53"

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	:	
UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA	PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LEI		
NOTE: Do not use this form to make a claim for an administrative expense that an expense according to 11 U.S.C. § 503.	ises after the bankruptcy filing. You may	file a request for payment of an administrative
Name of Creditor (the person or other entity to whom the Debtor owes money or property): Wayne Hong Chan	Check this box to indicate that this	claim amends a previously filed claim.
Name and address where notices should be sent Wayne Hong Chan	Court Claim Number:	(If known) Esti City Group, U.S.
3762 Lone Mesa Dr Las Vegas, NV 89147	Filed on:	MAY 1 1 2015
Telephone number: 702-595-6321 Email address. chanahfat@gmail.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 g	t anyone else has filed a proof of claim relating to iving particulars.
		FILED - 00536
Telephone number		District of Nevada
Email address:		Ameri-Dream, LLC
Amount of Claim as of Date Case Filed: S 2,325.00	_	
If all or part of the claim is secured, complete item 4.		
If all or part of the claim is entitled to priority, complete item 5.		
Check this box if the claim includes interest or other charges in addition to	o the principal amount of the claim. Attac	ch a statement that itemizes interest or charges.
2. Busis for Claim: Refundable Deposits of , 8116 Sun	down Vista Av. Las Vegas N\	/ 89147 (Deposits statement, Deposit
(See instruction #2) Summary, Lease Agreement, Last 3. Last four digits of any number by which creditor identifies debtor: 34	Debtor may have scheduled	
	account as:	3b. Uniform Claim Identifier (optional):
2 4 0 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 mattach required reducted documents, and provide the requested information.		e and other charges, as of the time case a secured claim, if any:
	Motor Vehicle Basis for perfection:	s
Describe:		

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.

□ Variable

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

Value of Property: \$__

Annual Interest Rate_

(when case was filed)

☑ 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 □ Contributions to an employee benefit plan = 11 U.S.C. § 507 (a)(5). the case was filed or the Debtor's business ceased, whichever is earlier - Q Other - Specify applicable paragraph 11 U.S.C § 507 (a)(4)

of 11 U.S.C. § 507 (a)(__)

Amount Unsecured:

Amount of Secured Claim: S__

Amount entitled to priority: s 2,325.00

THE REPORT OF THE PROPERTY OF THE PARTY.

☐ 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.

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 "54"

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ш		6 (88	6 364	100.0		-			-

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA PROOF OF CLAIM
Name of Debior. Ameri-Dream Realty: LLC Case No. 15-10110-LE	
NOTE: Do not use this form to make a claim for an administrative expense that at expense according to 11 U.S.C. § 503.	rises 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) Thanh Tang	. Check this box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent:	Court Claim Number:
Thanh Tang	(If known) Sily Group
3 Palmwood	· Since Acc
Irvine, CA 92618	Filed on:
	WAY 11 to.
	\
Telephone number 714-293-8314 -	
Email address: thanhvtang@hotmail.com	Constitution if you was proved that any less has filled a great of claim relation to
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 - 00537
Telephone number:	District of Nevada
Email address.	Ameri-Dream, LLC
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	to the principal amount of the claim. Attach a statement that itemizes unterest or charges.
2. Basis for Claim: Refundable Deposits of 6070 Deve	ers Ct. Las Vegas, NV 89118 (Deposits statement, Lease Agreemen
(See instruction #2) Management Agreement attached	
Last four digits of any number by which creditor identifies debtor:	a. Debtor may have scheduled account as: 3b. Uniform Claim Identifier (optional):
5 0 8 0	
4. Secured Claim (Sec instruction #4)	(See instruction #3a) (See instruction #3b)
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.	Amount of arrearage and other charges, as of the time case might 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% ☐ 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). Uwages, salaries, or commit \$12,475*) earned within 1 the case was filed or the D	80 days before plan - 11 U.S.C. § 507 (a)(5).
Du Up to \$2,775* of deposits toward business ceased, whicheve purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4).	or is earlier - Other - Specify applicable paragraph
services for personal, family, or household use - 11 U.S.C. § 507 (aX7). Taxes or penalties owed to	§ 1,450.00
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 adoustment.
6. Credits. The amount of all payments on this claim has been credited for the	
The state of the s	Modified R10 (GCG) (4/13)

EXHIBIT "55"

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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): JLC General Corp	☐ Check this box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent: J L C General Corp PO Box 93441	Court Claim Number:
Las Vegas, NV 89193	Filed on: (MAY 1.1 2015)
Telephone number: 702-682-2668	
Email address: David.chan@cpa.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
traine and address where beginning anomy on some for any other anome.	this claim. Attach copy of statement giving particulars.
	FILED - 00538
Telephone number:	District of Nevada
Email address:	Ameri-Dream, LLC .
Amount of Claim as of Date Case Filed: S 1,200.00	
If all or part of the claim is secured, complete item 4.	
If all or part of the claim is entitled to priority, complete item 5.	
	the principal amount of the claim. Attach a statement that itemizes interest or charges
	e Way #2218, Las Vegas NV 89147 (Deposits statement, Deposit erty management agreement attached)
	b. Debtor may have scheduled account as: 3b. Uniform Claim Identifier (optional):
3 2 9 7	
1 0 10 10 10 10 10 10 10 10 10 10 10 10	(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 mattach required reducted documents, and provide the requested information 	Amount of arrearage and other charges, as of the time case ght of sctoff, was filed, included in secured claim, if any:
Nature of property or right of setoff: Real Estate Other	fotor Vehicle
Describe:	Basis for perfection:
Value of Property: S	Amount of Secured Claim: S
Annual Interest Rate% ☐ Fixed or ☐ V (when case was filed)	/ariable Amount Unsecured: \$
 Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any puthe priority and state the amount. 	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*) earned within 18 the case was filled or the De	0 days before plan - 11 U.S.C. § 507 (a)(5)
22 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 (a)()
services for personal, family, or bousehold use = 11 U.S.C. § 507 (a)(7).	s_1,200.00
governmental units – 11 U 507 (a)(8)	5.C. §
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w	
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 "56"

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Modified B10 (GCG) (4/13)

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UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	T OF NEVADA PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LE	ED
NOTE: Do not use this form to make a claim for an administrative expense that a expense according to 11 U.S.C. § 503.	arises 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) Lan Sui Zeng	Court Claim Number:
Name and address where notices should be sent	
Lan Sui Zeng PO Box 93441	(if known) Ship City Group, II
Las Vegas, NV 89193	Filed on: MAY 1 1 2015
Telephone number 702-682-2668 Email address: David.chan@cpa.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.
Telephone number:	FILED - 00539 District of Nevada
Email address: 1. Amount of Claim as of Date Case Filed: \$ 1,450.00	Ameri-Dream, LLC
2. Basis for Claim: Refundable Deposits of 8054 Pala (See instruction #2) Summary, Lease Agreement, Pro	ace Monaco Av, Las Vegas, NV 89117 (Deposits statement, Deposits perty management agreement attached) Ja. Debtor may have scheduled account as: Ja. Uniform Claim Identifier (optional):
9 4 8 0	(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 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 Other Describe:	Motor Vehicle Basis for perfection:
Value of Property: S	Amount of Secured Claim: \$
Annual Interest Rate	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) \$12,475*) carned within the case was filed or the l	180 days before plan = 11 U.S.C. § 507 (a)(5) - Debtor's
Up to \$2,775* of deposits toward business ceased, whichever purchase, lease, or rental of property or services for personal, family, or Services for personal, family, or Services for personal, family, or Services for personal family family, or Services for personal family	ver is earlier — Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(). \$ 1,450.00
household use - 11 U.S.C. § 507 (a)(7) Taxes or penalties owed governmental units - 11 (507 (a)(8))	
 Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter 	r 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 "57"

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1800	I MIL	ш	w	w	n	u	MIZ	m	ı

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Nam	TED STATES BANKRUPTCY COURT FOR THE DISTR	ICT OF NEVADA		PROOF OF CLAIM
	ne of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110	LLED		
	E: Do not use this form to make a claim for an administrative expense these according to 11 U.S.C. § 503.	hat avises after the bar	kruptcy filing. You ma	file a request for payment of an administrative
	e of Creditor (the person or other entity to whom the Debtor owes mone erty): Hao Ran He, Qi Ping Zhu, Qi Hong Zhu	100		claim amends a previously filed claim.
l'ele Ema	e und address where notices should be sent: Hao Ran He, Qi Ping Zhu, Qi Hong Zhu 8 Chander Pl Newton, MA 02464 phone number: 617-678-9968 sl address: JJHE@verison.net	Filed on.	:	Of knowns.
l'ele	e and address where payment should be sent (if different from above). phone number		oox if you are aware th ach copy of statement	at anyone else has filed a proof of claim relating to giving particulars. FILED - 00540 District of Nevada Ameri-Dream, LLC
2.	□ Check this box if the claim includes interest or other charges in additional control of the claim: Refundable Deposits of 1989 7			
	Control Co. Committee		the second second second	
-	(See instruction #2) (Deposits statement, Lease Ag	reement, Manag	ement Agreeme	nt attached)
3.	(See instruction #2) (Deposits statement, Lease Ag Last four digits of any number by which creditor identifies debtor:		ement Agreeme	
3.	(See instruction #2) (Deposits statement, Lease Ag	Ja. Debtor may account as:	ement Agreeme	nt attached)
i.	(See instruction #2) (Deposits statement, Lease Ag Lust four digits of any number by which creditor identifies debtor: 0 8 5 9 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property attach required reducted documents, and provide the requested information. Nature of property or right of setoff:	Ja. Debter may account as: (See inst	ement Agreeme have scheduled ruction #3a) Amount of arrears	(See instruction #3b) ge and other charges, as of the time case in secured claim, if any:
4.	(See instruction #2) (Deposits statement, Lease Ag Lust four digits of any number by which creditor identifies debtor: 0 8 5 9 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property attach required reducted documents, and provide the requested informal Nature of property or right of setoff:	Ja. Debter may account as: (See inst or a right of seloff, stion.	ement Agreeme have scheduled ruction (3a) Amount of arreara was filed, included	(See instruction #3b) ge and other charges, as of the time case in secured claim, if any:
h.	(See instruction #2) (Deposits statement, Lease Ag Lust four digits of any number by which creditor identifies debtor: 0 8 5 9 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on properly attach required reducted documents, and provide the requested information Nature of property or right of setoff: Describe: Value of Property: S Annual Interest Rate	Ja. Debter may account as: (See inst or a right of seloff, stion.	ement Agreeme have scheduled ruction #3a) Amount of arreara was filed, included Basis for perfection Amount of Secured	ont attached) 3b. Uniform Claim Identifier (optional): (See instruction #3b) ge and other charges, as of the time case in secured claim, if any: S Claim: S
	(See instruction #2) (Deposits statement, Lease Ag Lust four digits of any number by which creditor identifies debtor: 0 8 5 9 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property attach required reducted documents, and provide the requested information Nature of property or right of setoff: Describe: Value of Property: S	Ja. Debter may account as: (See inst or a right of seloff, ition. Motor Vehicle	ement Agreeme have scheduled ruction (3a) Amount of arreara was filed, included Basis for perfection Amount of Secured	ont attached) 3b. Uniform Claim Identifier (optional): (See instruction #3b) ge and other charges, as of the time case in secured claim, if any: S Claim: S

EXHIBIT "58"

				MM	
UNITED STATES	BANKRUPTCY COURT FOR THE DISTRIC	T _. OF NEVADA		PI	ROOF OF CLAIM · ·
Name of Debtor: Ar	meri-Dream Realty, LLC Case No. 15-10110-L	ED	1 1 4	2.0	
		`			
	form to make a claim for an administrative expense that 11 U.S.C. § 503.	orises after the ba	nkruptcy filing. You may fil	le a request for p	payment of an administrative
	person or other entity to whom the Debtor owes money of INC		box to indicate that this cl	aim amends a pr	eviously filed claim.
Name and address who	ere notices should be sent · !	Court Claim	Number:	', '	
ŽHIYIN				(If known)	City Co
	npson Ave	Filed on.			Caldell on a gold
Braintre	ee, MA 02184	Filed on.	٠.		() E
					MAY 1 1 2015
		i			\ /
Telephone number .	617-678-0872		3.		\ /
Emast address	Jeanettenzhu@gmail.com		• • •		
Name and address who	ere payment should be sent (if different from above):		box if you are aware that a ach copy of statement giv		filed a proof of claim relating to
		,		3,000	
		1 .		· 'FIL	ED - 00541
Websel and the second		.)			ct of Nevada
Telephone number Email address:				Ameri	-Dream, LLC .
	m as of Date Case Filed: \$ 1,550.00				
If all or part of the	ne claim is secured, compléte stem 4.		1		
				1	
	te claim is critified to priority, complete item 5.				
Check this bo	x if the claim includes interest or other charges in addition	n to the principal ar	mount of the claim. Attach	a statement that	itemizes interest or charges.
2. Basis for Claim	:Refundable Deposits of 9293 Ha	insworth Ave,	Las Vegas 89148		
(See instruction	The second secon	ement, Mana			
	of any number by which creditor identifies debtor:	3a. Debtor may account as:	have scheduled	3b. Uniform C	laim Identifier (optional):
	2 3 1 8				
1 6		(See inst	truction #3a)		ee instruction #3b)
Check the appro	(See instruction #4) priate box if the claim is secured by a lien on property or edacted documents, and provide the requested informatio		Amount of arrearage was filed, included in		ges, as of the time case f any:
Nature of prope	erty or right of setoff: Real Estate	☐ Motor Vehicle		•	
Dominit	· Other		Basis for perfection:	.'	
Describe:					
Value of Proper	rty: S		Amount of Secured Co	laim: S	
Annual Interest	Rate% Direct or I	□ Variable .		1	
(when case was	filed).		Amount Unsecured:		
	im Entitled to Priority under 11 U.S.C. § 507 (a). If an I state the amount.	y part of the claim	falls into one of the follo	wing categorie	s, check the box specifying
	poort obligations under 907 (a)(1)(A) or (a)(1)(B) Wages, salaries, or com \$12,475°) earned within the case was filed or the	180 days before	Contributions to an emp plan – 11 U.S.C. § 507 (
	 of deposits toward business ceased, whiche 		Other - Specify applical		Amount entitled to priority:
	se, or rental of property or		of 11 U S.C § 507 (a)(_).	s 1,550.00
	e 11 U S C. § 507 (a)(7). Taxes or penalties owod governmental units 11			-	
	507 (a)(8).				
*Amounts are sa	dyect to adjustment on 4.1716 and every 3 years thereafte	er with respect to co	wes commenced on or after	r the date of adj	swiment.
6. Credits. The am	tount of all payments on this claim has been credited for t	he purpose of mak	ing this proof of claim. (Se	e instruction #6	
					Modified B10 (GCG) (4/13

EXHIBIT "59"

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111	ж	w	(B) E	un	и	w	81	п	擂	u

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LEE	
NOTE: Do not use this form to make a claim for an administrative expense that an expense occarding 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): Thanh Tang, Alyssa Tang	Check this box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent:	Court Claim Number:
Thanh Tang, Alyssa Tang	
3 Palmwood	()
Irvine, CA 92618	Filed on. MAY 1 1 2015
Telephone number 714-293-8314	
Email address: thanhvtang@hotmail.com	
Name and address where payment should be sent (if different from above):	☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.
	F11.ED - 00542
	District of Nevada
Telephone number. 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.	
	the principal amount of the claim. Attach a statement that itemizes interest or charges.
Refundable Describe of 6000 Descri	
Basis for Claim: Refundable Deposits of 6030 Deve (See instruction #2) Management Agreement attached)	rs Ct. Las Vegas, NV 89118 (Deposits statement, Lease Agreement
	Debtor may have scheduled 3b. Uniform Claim Identifier (optional):
	account as:
5 0 8 0	(See instruction #3a) (See instruction #3b)
 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a fren 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 reducted documents, and provide the requested information.	
Nature of property or right of setoff:	Motor Vehicle Basis for perfection:
Value of Property: 5	Amount of Secured Claim: \$
Annual Interest Rate % ☐ Fixed or ☐ \(\frac{1}{2}\) (when case was filed)	Variable Amount Unsecured: 5
 Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any p the priority and state the amount. 	art of the claim falls into one of the following categories, check the box specifying
☐ Domestic support obligations under ITU S.C. § 507 (aχ1 χA) or (a)(1)(B). Uwages, salaries, or commis \$12,475*) earned within 18 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, whichever	r is earlier - Other - Specify applicable paragraph
purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4). services for personal, family, or	of 11 U.S.C. § 507 (a)(_). s 1,700.00
howsehold 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 w	oth 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	

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EXHIBIT "60"



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	FOF NEVADA PROOF OF CL	AIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LE	ED	
NOTE: Do not use this form to make a claim for an administrative expense that expense according to 11 U.S.C. § 503.	arises after the bankruptcy filling. You may file a request for payment of an a	dministrative
Name of Creditor (the person or other entity to whom the Debtor owes money or property): Hsing Fang Lee, Huitang Ma	City Grou	aien.
Name and address where notices should be sent: Hsing Fang Lee, Huitang Ma	Court Claim Number:	2015
4591 Tidal Cove Ct. Las Vegas, NV 89147	Filed on:	
Telephone number: 702-480-7234 . Email address: Mikecheung702@hotmail.com		
Name and address where payment should be sent (if different from above):	☐ Check this box if you are aware that anyone else has filed a proof of this claim. Attach copy of statement giving particulars.	
Telephone number:	FILED - 0050 District of Nev	eda
Email address:	American, i	
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	s to the principal amount of the claim. Attach a szatement that itemizes interes	t or charges.
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 Refundable Deposits of 6658 Win (See instruction #2) Agreement, Management Agreem Last four digits of any number by which creditor identifies debtor:	nd Whisper St. Las Vegas, NV 89148 (Deposits statemen	nt, Lease
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 Refundable Deposits of 6658 Win (See instruction #2) Agreement, Management Agreen	nd Whisper St. Las Vegas, NV 89148 (Deposits statement attached) Ja. Debtor may have scheduled account as: Jan. Uniform Claim Identifier	nt, Lease (optional):
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. Refundable Deposits of 6658 Win (See instruction #2) Agreement, Management Agreem J. Last four digits of any number by which creditor identifies debtor: 3 1 0 5 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or attach required reduced documents, and provide the requested information. Nature of property or right of setoff: Check	nent attached) Ja. Debtor may have scheduled necount as: (See instruction #3a) Amount of arrearage and other charges, as of the life was filled, included in secured claim, if any:	(optional):
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. Refundable Deposits of 6658 Win (See instruction #2) Agreement, Management Agreem. Last four digits of any number by which creditor identifies debtor: 3. Last four digits of any number by which creditor identifies debtor: 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or attach required reducted documents, and provide the requested information. Nature of property or right of setoff: Check the appropriate box if the claim is secured by a lien on property or attach required reducted documents, and provide the requested information.	Amount of arrearage and other charges, as of the time a right of setoff. Motor Vehicle As Vegas, NV 89148 (Deposits statement attached) 3b. Uniform Claim Identifier 3b. Uniform Claim Identifier (See instruction #3a) (See instruction #3 (See instruction #3a) (See instruction #3 Amount of arrearage and other charges, as of the time was filled, included in secured claim, if any:	(optional):
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. Refundable Deposits of 6658 Win (See instruction #2) Agreement, Management Agreem J. Last four digits of any number by which creditor identifies debtor: 3 1 0 5 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or attack required reducted documents, and provide the requested information Nature of property or right of setoff: Describe: Value of Property: S	Amount of setoff. The Mater Vehicle Mater Vehicle Mater Vehicle Ment attached) Ja. Letter May have scheduled a secured claim. Identifier the secured cl	(optional):
If all or part of the claim is entitled to priority, complete item 5. Given this box if the claim includes interest or other charges in addition. Refundable Deposits of 6658 Win (See instruction #2) Agreement, Management Agreem. Last four digits of any number by which creditor identifies debtor: 3 1 0 5 4. 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 Nature of property or right of setoff: Describe: Value of Property: S Annual Interest Rate	Amount of Secured Claim:	(optional):
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 2. Basis for Claim: Refundable Deposits of 6658 Win (See instruction #2) Agreement, Management Agreem 3. Last four digits of any number by which creditor identifies debtor: ☐ ☐ ☐ ☐ ☐ 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a attach required reduced documents, and provide the requested information Nature of property or right of setoff: ☐ Real Estate ☐ Other Describe: Value of Property: S Annual Interest Rate ☐ (when case was filed) 5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any 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 community the case was filed or the	Amount of Secured Claim: Amount of Secured	(optional): (optional): (ib) ne case
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 2. Bosis for Chaim: Refundable Deposits of 6658 Win (See instruction #2) Agreement, Management Agreem 3. Last four digits of any number by which creditor identifies debtor: ☐ 1	Amount of Secured Claim: Secured Claim: Amount of Secured Claim: Amount of Secured Claim: Amount of Secured Claim: Amount of Secured Claim: Secured Claim: Amount of Secured Claim: Amount of Secured Claim: Secured Claim: Amount of Secured Claim: Secured Cl	(optional): (optional): (ob) ne case specifying tled to priority:
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 Refundable Deposits of 6658 Win (See instruction #2) Agreement, Management Agreem	Amount of Secured Claim: Variable Amount Unsecured: Secured Claim: Secured Claim:	(optional): (optional): (b) ne case specifying

Modified B10 (GCG) (4/13)