EXHIBIT "51"

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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-LE	D	
NOTE: Do not use this form to make a claim for an administrative expense that a expense according to 11 U.S.C. § 503.	rises after the bankruptcy filing. You may f	file a request for payment of an administrative
Name of Creditor (the person or other entity to whom the Debtor owes money or property): LV830 LLC	Check this box to indicate that this c	laim amends a previously filed claim.
Name and address where notices should be sent:	Court Claim Number:	Carden City Group
Vegas Pro		(If known)
Attn: Tiffany Chau 6276 Spring Mountain Rd. #100	Filed on:	(MAY 1 2 2015)
Las Vegas, NV 89146		
(702) 217-9389		
Telephone number:		
Email address: Name and address where payment should be sent (if different from above):		anyone else has filed a proof of claim relating to
Same	this claim. Attach copy of statement gh	ving particulars.
Carrie	FILED	- 00702
Telephone number:		of Nevada
Email address:	Ameri-Dr	eam, LLC
1. Amount of Claim as of Date Case Filed: \$ 552.00		
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 t		
2. Basis for Claim: Rents from January, 2015, not paid, for 2300 E. Silverado	Ranch Blvd. #1011 property. (\$600.00 re	nt - 8% Ameri-Dream Commission = \$552.00)
(See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 3	a. Debtor may have scheduled	3b. Uniform Claim Identifier (optional):
	account as:	
	(See instruction #3a)	(See instruction #3b)
4. Secured Claim (See instruction #4)	Amount of arrearage	and other charges, as of the time case
Check the appropriate box if the claim is secured by a lien on property or a attach required reducted documents, and provide the requested information.	right of sciots, was filed, included in	secured claim, if any:
Nature of property or right of setoff: Real Estate Other	Motor Vehicle	
Describe:	Basis for perfection:	
Value of Property: 5	Amount of Secured C	Claim: S
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 the priority and state the amount. 	part of the claim falls into one of the full	owing categories, check the box specifying
Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). \$12,475*) earned within 1 the case was filed or the D	80 days before plan - 11 U.S.C. § 507	(n)(5).
Up to \$2,775° of deposits toward business ceased, whicheve purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4).		Amount entitled to priority: 552.00
services for personal, family, or household use – 11 U.S.C. § 507 (a)(7). Taxes or penalties ewed 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 aft	er 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. (S	ee instruction #6) Modified B10 (GCG) (4/13)

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 ofter the bankruptcy filing. You may fi	ile a request for payment of an administrative
Name of Creditor (the person or other entity to whom the Debtor owes money or property): Raymond Chan	☐ Check this box to indicate that this cl	aim amends a previously filed claim.
Name and address where notices should be sent:	Court Claim Number:	
Vegas Pro Attn: Tiffany Chau 6276 Spring Mountain Rd. #100 Las Vegas. NV 89146 (702) 217-9389 Telephone number:	Filed on:	(3) known) MAY 1 2 2015
Email address: 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
Same	this claim. Attach copy of statement gh FILED - 0070	ring particulars.
	. District of Nev	
Telephone number: Email address:	Ameri-Dream, I	LLC
I. Amount of Claim as of Date Case Filed: \$ 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	the principal amount of the claim. Attach	a statement that itemizes interest or charges.
Basis for Claim: Security deposit, key deposit, and pet deposit in (See instruction #2)	the amount of \$325.00 for 29 Go	ld Bar Ct. #D, Las Vegas, NV 89110.
Last four digits of any number by which creditor identifies debtor:	. Debtor may have scheduled account as:	3b. Uniform Claim Identifier (optional):
	(See instruction #3a)	(See instruction #3b)
 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a riattach required redacted documents, and provide the requested information. 		and other charges, as of the time case secured claim, if any: S
Nature of property or right of setoff: Real Estate Other	fotor Vehicle Basis for perfection:	
Describe:		
Value of Property: 5	Amount of Secured C	Tlaim: S
Annual Interest Rate% ☐ Fixed or ☐ \(\text{When case was filed}\)	/ariable Amount Unsecured:	\$
 Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any p the priority and state the amount. 	art of the claim falls into one of the follo	owing categories, check the box specifying
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). Taxes or penalties owed to governmental units – 11 U.SO7 (a)(8).	00 days before plan - 11 U.S.C. § 507 bbtor's ris earlier - Other - Specify application of 11 U.S.C. § 507 (a)((a)(5). Amount entitled to priority: 325.00
*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. (S	ee 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-LED					
NOTE: Do not use this form to make a claim for an administrative expense that or expense according to 11 U.S.C. § 503.	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): Raymond Chan	Check this box to indicate that this claim	m amends a previously filed claim.			
Name and address where notices should be sent:	Court Claim Number:	Carden City Graup			
Vegas Pro Attn: Tiffany Chau 6276 Spring Mountain Rd. #100 Las Vegas, NV 89146	Filed on:	MAY 1 2 2015			
(702) 217-9389 Telephone number:					
Email address:					
Name and address where payment should be sent (if different from above): Same	this claim. Attach copy of statement giving	yone else has filed a proof of claim relating to g particulars.			
Same	FILED - 00				
	District of Ne				
Telephone number:	Ameri-Dream.				
Email address: 1. Amount of Claim as of Date Case Filed: \$ 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	the principal amount of the claim. Attach a	statement that itemizes interest or charges.			
Basis for Claim: Security deposit and key deposit in the arr (See instruction #2)	ount of \$325.00 for 29 Gold Bar	Ct. #C, Las Vegas, NV 89110.			
	Debtor may have scheduled 3b. account as:	. Uniform Claim Identifier (optional):			
	(See instruction #3a)	(See instruction #3b)			
 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a ri attach required reducted documents, and provide the requested information. 		d other charges, as of the time case cured claim, if any:			
	fotor Vehicle	S			
Describe:	Basis for perfection:				
Value of Property: S	Amount of Secured Clai	in: \$			
Annual Interest Rate% ☐ Fixed or ☐ \(\) (when case was filed)	/ariable Amount Unsecured:	\$			
 Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any p the priority and state the amount. 	art of the claim falls into one of the follow	ing 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 16 the case was filed or the De		(5).			
	is earlier - Other - Specify applicable of 11 U.S.C. § 507 (a)				
. 507 (a)(8).					
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w					
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 "54"



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	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.	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): Raymond Chan	☐ Check this box to indicate that this claim amends a previously filed claim.					
Name and address where notices should be sent;	Court Claim Number:					
Vegas Pro Attn: Tiffany Chau 6276 Spring Mountain Rd. #100 Las Vegas, NV 89146	Filed on: MAY 1 2 2015					
(702) 217-9389						
Telephone number: Email address:						
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.					
Same	F1LED - 00705 District of Nevada					
Telephone number:	Ameri-Dream, LLC					
1. Amount of Claim as of Date Case Filed: \$ 425.00	1. Amount of Claim as of Date Case Filed: \$ 425.00					
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: Security deposit, key deposit, and pet deposit in (See instruction #2)	n the amount of \$425.00 for 29 Gold Bar Ct. #B, Las Vegas, NV 89110.					
Last four digits of any number by which creditor identifies debtor:	account as: 3b. Uniform Claim Identifier (optional):					
	(See instruction #3a) (See instruction #3b)					
 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a ri attach required reducted documents, and provide the requested information. 	Amount of arrearage and other charges, as of the time case ight of setoff, was filed, included in secured claim, if any:					
	Motor Vehicle Basis for perfection:					
Describe:						
Value of Property: S	Amount of Secured Claim: \$					
Annual Interest Rate% ☐ Fixed or ☐ V (when case was filed)	Variable Amount Unsecured: \$					
 Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any p the priority and state the amount. 	art of the claim falls into one of the following categories, check the box specifying					
Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). \$12,475*) earned within 14 the case was filed or the D	80 days before plan 11 U.S.C. § 507 (n)(5).					
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). 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)(_).					
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w	with respect to cases commenced on or after the date of adjustment.					
6. Credits. The amount of all payments on this claim has been credited for the	purpose of making this proof of claim. (See instruction #6)					

EXHIBIT "55"

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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 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): Raymond Chan	☐ Check this box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent:	Court Claim Number:
Vegas Pro Attn: Tiffany Chau 6276 Spring Mountain Rd. #100 Las Vegas, NV 89146 (702) 217-9389	Filed on:
Telephone number: Email address:	
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 dalm. Attach copy of statement giving particulars.
Same	FILED - 00706 District of Nevada Ameri-Dream, LLC
Telephone number: Email address:	
1. Amount of Claim as of Date Case Filed: \$ 725.00	_
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: Security deposit and key deposit in the am (See instruction #2)	ount of \$725.00 for 29 Gold Bar Ct. #A, Las Vegas, NV 89110.
3. Last four digits of any number by which creditor identifies debtor: 3a	Debtor may have scheduled 3b. Uniform Claim Identifier (optional): account as:
	(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 riettach required reducted documents, and provide the requested information. 	Amount of arrearage and other charges, as of the time case ght of setoff, was filed, included in secured claim, if any:
Nature of property or right of setoff:	fotor Vehicle Basis for perfection:
Value of Property: S	Amount of Secured Claim: \$
Annual Interest Rate% ☐ Fixed or ☐ \ (when case was filed)	/ariable Amount Unsecured: \$
	art of the claim falls into one of the following categories, check the box specifying
Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). 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). Taxes or penalties owed to governmental units - 11 U. 507 (a)(8).	btor's is earlier - O Other - Specify applicable paragraph of 11 U.S.C. § 507 (a). S.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)

Modified B10 (GCG) (4/13)

EXHIBIT "56"

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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 are expense occording to 11 U.S.C. § 503.	ises after the bankruptcy filing. You may file a request for payment of an administrative
Name of Creditor (the person or other entity to whom the Debtor owes money or	☐ Check this box to indicate that this claim amends a previously filed claim.
property): Phung Kim Nguyen/Kiet Tyan Name and address where notices should be sent:	Court Claim Number:
Phung kim Nguyen/Kiet Tran	(A) known) Sarden City Group
8722 Phonda Blake	Filed on:
Las Vegas, NV 89143	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Telephone number: (702) 353-333 Email address: PN 200 @ Yahoo (0m	
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.
· Cara	
Same	FILED - 00707 District of Nevada
Telephone number:	Ameri-Dream, LLC
Email address: 1. Amount of Claim as of Date Case Filed: \$ 450.	
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. Basis for Claim: Deposits for Venta (See instruction #2)	home 3728 Crest Horn Dr.
3. Last four digits of any number by which creditor identifies debtor: 3:	s. Debtor may have scheduled 3b. Uniform Claim Identifier (optional):
8504	account as:
	(See instruction #3a) (See instruction #3b)
Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lieu on property or a relation.	Amount of arrearage and other charges, as of the time case
attach required redacted documents, and provide the requested information.	S
Nature of property or right of setoff: Real Estate Of Other Describe:	Motor Vehicle Basis for perfection:
Value of Property: S	Amount of Secured Claim: \$
	Variable
(when case was filed)	Amount Unsecured: \$
the priority and state the amount.	eart of the claim falls into one of the following categories, check the box specifying
11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). \$12,475*) earned within 11 the case was filed or the D	
purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4). services for personal, family, or	r is earlier - Other - Specify applicable paragraph of 11 U.S.C. § 507 (a)(_).
household use - 11 U.S.C. § 507 (a)(7). Taxes or penalties owed to governmental units - 11 U. 507 (a)(8).	
 Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w 	with respect to cases commenced on or after the date of adjustment.

EXHIBIT "57"

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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 an expense occording to 11 U.S.C. § 503.	ises after the bankruptcy filing. You may file a request for payment of an administrative	
Name of Creditor (the person or other entity to whom the Debtor owes money or	☐ Check this box to indicate that this claim amends a previously filed claim.	
Property): Phung kim Ngwen/Kiet Tran Name and address where notices should be sent:	Court Claim Number:	
Phung kim Ngwen/Kiet Tran 8722 Rhonda Blake	(If known) Garden City Ga	
8722 Rhonda Blake	Filed on:	
Las Vegas, NV 89143	105	
Telephone number: (707) 353-3333 Email address: PN 200@ 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.	
Same	FILED - 00708	
24110	District of Nevada	
Telephone number: Email address:	Ameri-Dream, LLC	
1. Amount of Claim as of Date Case Filed: S	_	
If all or part of the claim is secured, complete item 4.		
If all or part of the claim is entitled to priority, complete item 5.		
☐ Check this box if the claim includes interest or other charges in addition to	the principal amount of the claim. Attach a statement that itemizes interest or charges.	
2. Basis for Claim: Depusits for Pental (See instruction #2)	home on 9123 Scallop Reef	
3. Last four digits of any number by which creditor identifies debtor: 3a. Debtor may have scheduled account as:		
8504	account ax	
	(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, was filed, included in secured claim, if any:		
attach required reducted 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 % ☐ Fixed or ☐ Variable		
(when case was filed) Amount Unsecured: 5. Amount of Claim Entitled to Priority under 11 U.S.C. 8 507 (a), If any part of the claim falls into one of the following categories, check the box specifying		
the priority and state the amount.		
☐ Domestic support obligations under ☐ Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit ☐ U.S.C. § 507 (a)(1)(A) or (a)(1)(B). \$12,475*) earned within 180 days before plan — 11 U.S.C. § 507 (a)(5). the case was filed or the Debtor's		
Up to \$2,775* of deposits toward business ceased, whichever is earlier — D Other - Specify applicable paragraph of 11 U.S.C. § 507 (a)(_).		
services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).		
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 "58"

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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 an expense occording to 11 U.S.C. § 503.	ses after the bankruptcy filling. You may fil	e a request for payment of an administrative	
Name of Creditor (the person or other entity to whom the Debtor owes money or property Siu Hang Lee / Eleanor Waikam	Check this box to indicate that this cla	im amends a previously filed claim.	
Name and address where notifies should be cent-			
Siu Hang Lee/Eleanor Waikam Lee		(of known) Garden City	
Siu Hang Lee/Eleanor Waikam Lee 175 mesa Verde Way	Filed on:	(1/4)	
San Carlos, CA 94070		(10/5 5)	
Telephone number (650) 283-2038 Email actress: 61-Pax@Shcglubal.net			
Emeil address: Q - Vax 6 ShC 1061. Net	00-141-1-1		
Name and address where payment should be sent (if different from above):	this daim. Attach copy of statement givi	rryone else has filed a proof of claim relating to ng particulars.	
	FILED - 00709		
	District of Nevada Ameri-Dream, LLC		
Telephone number: Email address:	Amen-Dream, LL		
1. Amount of Claim as of Date Case Filed: S 2700 (N)			
If all or part of the claim is secured, complete item 4.			
If all or part of the claim is emitted 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 Chaim: Deposits for Rental (See instruction #2)	home 4372 S	pooner Lake	
3. Last four digits of any number by which creditor identifies debtor: 3:	Debtor may have scheduled 3	h. Uniform Claim Identifier (optional):	
7 1 6 4 1	Sill Hang/ee		
T	(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.			
Nature of property or right of setoff:	dotor Vehicle	\$	
Describe:	Basis for perfection:		
Value of Property: S Amount of Secured Claim: S			
Annual Interest Rate %			
(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.			
☐ Domestic support obligations under ☐ Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). \$12,475*) carned within 180 days before plan — 11 U.S.C. § 507 (a)(5).			
the case was filed or the Debtor's Up to \$2,775* of deposits toward business ceased, whichever is earlier - Other - Specify applicable paragraph Amount entitled to priority:			
purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4). of 11 U.S.C. § 507 (a)(_).			
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	surpose of making this proof of claim. (See	instruction #6)	

EXHIBIT "59"

PROOF OF CLAIM
may file a request for payment of an administrative
this claim amends a previously filed claim.
(If known) Garden City Galles
- (MAY) 2-80/5 E
that anyone else has filed a proof of claim relating to ent giving particulars.
ED - 00710 et of Nevada Dream, LLC
Attach a statement that itemizes interest or charges.
0.5 peach flower
3b. Uniform Claim Identifier (optional):
(See instruction #3b)
arage and other charges, as of the time case led in secured claim, if any:
s

Modified B10 (GCG) (4/13)

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA PROOF OF CLAIM		
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED		
NOTE: Do not use this form to make a claim for an administrative expense that are expense according to 11 U.S.C. § 503.	ses after the bankruptcy filing. You may file a request for payment of an administrative	
Name of Creditor (the person or other entity to whom the Debtor owes money or	Check this box to indicate that this claim amends a previously filed claim.	
Name and address where notices should be sent:	Court Claim Number:	
Shi Chi Ou / Mei Huan Yu	(If known) Garden City Co.	
9497 Windborne Ave	Filed on: (Mar / 2 8/15	
LV NU 89147	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Telephone number (702) 767-9572 Email address: [4ntinhs, a@ Yahuo 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.	
Same	FILED - 00710	
Telephone number:	District of Nevada	
Email address:	Ameri-Dream, LLC	
1. Amount of Claim as of Date Case Filed; \$ 505.		
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.		
I Check this box if the claim includes interest or other charges in addition to	the principal amount of the claim. Attach a statement that stemizes interest or charges.	
2. Basis for Claim: De Posits — Ov Vento (See instruction #2)	al home 1000.5 peach flower	
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2. Basis for Claim: Deposits to Venta (See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 3s 4. Secured Claim (See instruction #4)	Debtor may have scheduled account as: Si Chi Ou (See instruction #3a) Amount of arrearage and other charges, as of the time case	
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2. Basis for Claim: Deposits to Vento (See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 3a 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 3 Other Describe:	Debtor may have scheduled account as: (See instruction #3a) Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: S Amount of Secured Claim: Amount of Secured Claim: S Amount of Secured Claim: S Amount of Secured Claim:	
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EXHIBIT "60"

III			運用
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INITED STATES DANGED TO COURT FOR THE DISTRICT OF	OF NEVADA PROOF OF CLAIM	
UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA FROOF OF CLAIM Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED		
NOTE: Do not use this form to make a claim for an administrative expense that are expense according to 11 U.S.C. § 503.	ses after the bankruptcy filing. You may file a request for payment of an administrative	
Name of Creditor (the person or other entity to whom the Debtor owes money or property): Name and address where notices should be sent:	Check this box to indicate that this claim amends a previously filed claim. Court Claim Number:	
Vegas PRO Attn: Tiffany Chau 6276 Spring Mountain Rd. #100	Filed on: (If known) (AAY 1 2 2015	
Las Vegas, NV 89146 Telephone number: 762) 217-9389	7.5.	
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.	
Same Telephone number: Email address:	FILED - 00712 District of Nevada Ameri-Dream, LLC	
1. Amount of Claim as of Date Case Filed: S 2/2 C.		
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: Deposits for Vental home 2509 Mistle Thrush.		
3. Last four digits of any number by which creditor identifies debtor: 3a. Debtor may have scheduled account as: KWa; C. Ma 3b. Uniform Claim Identifier (optional):		
	(See instruction #3a) (See instruction #3b)	
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required 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:		
	fotor Vehicle	
Describe:	Basis for perfection:	
Value of Property: S	Amount of Secured Claim: \$	
Annual Interest Rate% ☐ Fixed or ☐ V (when case was filed)	ariable Amount Unsecured: \$	
5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.		
☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit \$12.475*) earned within 180 days before plan — 11 U.S.C. § 507 (a)(5). Up to \$2,775* of deposits toward Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit \$12.475*) earned within 180 days before plan — 11 U.S.C. § 507 (a)(5). Wuges, salaries, or commissions (up to ☐ Contributions to an employee benefit \$12.475*) earned within 180 days before plan — 11 U.S.C. § 507 (a)(5). Which is a salaries of commissions (up to ☐ Contributions to an employee benefit \$12.475*) earned within 180 days before plan — 11 U.S.C. § 507 (a)(5). Which is a salaries of commissions (up to ☐ Contributions to an employee benefit \$12.475*) earned within 180 days before plan — 11 U.S.C. § 507 (a)(5). Which is a salaries of commissions (up to ☐ Contributions to an employee benefit \$12.475*) earned within 180 days before plan — 11 U.S.C. § 507 (a)(5). The case was filed or the Debtor's business ceased, whichever is earlier — ☐ Other — Specify applicable paragraph		
business ceased, whichever is earlier — Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(2). Texes 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 wi		
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)		