EXHIBIT "61"

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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 arises after the bankruptcy f expense according to 11 U.S.C. § 503.	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): CHEN, HSIU CHU Court Claim Number:	dicate that this claim amends a previously filed claim.			
Name and address where notices should be sent: CHEN, HSTU CHU	(If known) City Group			
1802 CALLE MADRID	- Committee of the comm			
ROWLAND HEIGHTS	(3) A 2015			
CA 91748	MAY 1 4 2013			
CH 1.776	\ ''s'' '.			
Telephone number: Email address:				
	are aware that anyone else has filed a proof of claim relating to of statement giving particulars.			
in the community of the	or statement graning particulars.			
Telephone number.	05-14-15 A09:15 IN			
Email address:				
1. Amount of Claim as of Date Case Filed: \$ 1,500,00	FILED - 00824			
If all or part of the claim is secured, complete stem 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 amount of the	he claim. Attach a statement that itemizes interest or charges.			
2. Basis for Claim: SECURITY DEPOSITS ON A LEASE AGREEMENT HELD IN DEBTA (See instruction #2)	cr's Trust Account,			
3. Last four digits of any number by which creditor identifies debtor: 3a. Debtor may have sche account as:	eduled 3b. Uniform Claim Identifier (optional):			
N/A N/A				
(See instruction #3	(See instruction #3b)			
	nt of arrearage and other charges, as of the time case ad, included in secured claim, if any:			
Nature of property or right of setoff: Real Estate Motor Vehicle	s			
□ Other Basis fo	or perfection:			
Describe:				
Value of Property: S Amoun	at of Secured Claim: \$			
Annual Interest Rate	at 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.				
	utions to an employee benefit 1 U.S.C. § 507 (a)(5).			
Up to \$2,775* of deposits toward business ceased, whichever is earlier -	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)(_). services for personal, family, or S.T. S.C. S.C. S.C. S.C. S.C. S.C. S.C.				
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.				
 Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter with respect to cases community 	enced on or after the date of adjustment.			

Modified B10 (GCG) (4/13)

EXHIBIT "62"

	US 1101 R 10	1188166
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INITED 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): Yang Yu	☐ Check this box to indicate that this claim amends a previously filed claim.				
Name and address where notices should be sent:	Court Claim Number:				
	(If known) & City Group				
Yang Yu	Filed on:				
1402 Bing Dr. San Jose, CA 95129	MAY 1 4 2015				
3aii 30se, CA 33123					
Telephone number: 408-777-0138					
Email address: yuyang1576@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.				
	05-14-15 A09:12 IN				
Telephone number: Email address:	·				
Amount of Claim as of Date Case Filed: \$ 1,700.00	4700 Onder Divife Mer.				
If all or part of the claim is secured, complete item 4.	1728 Cedar Bluffs Way				
If all or part of the claim is entitled to priority, complete item 5.	Las Vegas, NV 89128				
Check this box if the claim includes interest or other charges in addition to	the principal amount of the claim. Attach a statement that itemizes interest or charges.				
2. Basis for Claim: Security, Pet Deposit and CI (See instruction #2)	eaning Deposit				
	a. Debtor may have scheduled 3b. Uniform Claim Identifier (optional):				
8 2 4 0	account as:				
8 2 1 9	Yang Yu (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 rattach required reducted documents, and provide the requested information.	ight of setoff, was filed, included in secured claim, if any:				
	Motor Vehicle				
Describe:	Basis for perfection:				
Value of Property: S	Amount of Secured Claim: \$				
Annuel Interest Rate%. O Fixed or (when case was filed)	Variable Amount Unsecured:				
5. Amount of Claim Estitled 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				
11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). \$12,475*) earned within 10 the case was filed or the Do	ebtor's Amount entitled to priority:				
M Up to \$2,775° of deposits toward business ceased, whichever purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4).	ris earlier - U Chier - Specify applicable paragraph				
services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).					
governmental units – 11 U. 507 (a)(8).	3.0. g				
*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) (4/1:				

EXHIBIT "63"



NITED 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): Yang Yu	☐ Check this box to indicate that this claim amends a previously filed claim.				
Name and address where notices should be sent:	Court Claim Number:				
Yang Yu 1402 Bing Dr. San Jose, CA 95129	Filed on: (If known) MAY 1 4 2015				
Telephone number: 408-777-0138					
Email address: yuyang1576@yahoo.com					
Name and address where payment should be sent (if different from above):	☐ Check this box if you are aware that anyone eise has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.				
	05-14-15 A09:12 IN				
Telephone number: Email address:					
1. Amount of Claim as of Date Case Filed: \$ 1,300.00	6018 Blue Autumn St.				
If all or part of the claim is secured, complete item 4.	Las Vegas, NV 89031				
If all or part of the claim is entitled to priority, complete item 5.	Las vegas, IVV 05051				
D Check this box if the claim includes interest or other charges in addition to	the principal amount of the claim. Attach a statement that itemizes interest or charges.				
2. Basis for Claim: Security, Key and Cleaning (See instruction #2)	Deposit				
3. Last four digits of any number by which creditor identifies debtor: 3a	a. Debtor may have scheduled 3b. Uniform Claim Identifier (optional):				
8 2 1 9	Yang Yu				
	(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 redacted documents, and provide the requested information. 	Amount of arrearage and other charges, as of the time case ight of setoff, was filed, included in secured claim, if any:				
	Motor Vehicle				
Describe:	Basis for perfection:				
Value of Property: S	Value of Property: S Amount of Secured Claim: S				
Annual Interest Rate%					
5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.					
☐ Domestic support obligations under ☐ Wages, salaries, or commissions (up to ☐ Contributions to an employee benefit 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).					
the case was filed or the De 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 Amount entitled to priority:				
services for personal, family, or household use – 11 U.S.C. § 507 (a)(7). Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).	s_1,300.00				
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w	vith 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					

EXHIBIT "64"



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	NITED 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): Vana VII	☐ Check this box to indicate that this claim amends a previously filed claim.			
Property): Yang Yu Name and address where notices should be sent:	Court Claim Number:			
Yang Yu	(If known) Jack City Group			
1402 Bing Dr.	Filed on:			
San Jose, CA 95129	MAY 1 4 2015			
408-777-0138				
Telephone number: User State Telephone number: Email address: yuyang1576@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.			
,				
Telephone sumber	05-14-15 A09:13 IN			
Telephone number: Email address:				
1. Amount of Claim as of Date Case Filed: S 1,900.00	6359 Radley Creek Ct.			
If all or part of the claim is secured, complete item 4.	Las Vegas, NV 89148			
If all or part of the claim is entitled to priority, complete item 5.	Las vegas, INV 09140			
Check this box if the claim includes interest or other charges in addition to	the principal amount of the claim. Attach a statement that itemizes interest or charges.			
2. Basis for Claim: Security, Key and Cleaning	Deposit			
(See instruction #2)				
	Debtor may have scheduled account as:			
8 2 1 9	Yang Yu			
4. Company of the Com	(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 n attach required redacted documents, and provide the requested information. 	Amount of arrearage and other charges, as of the time case ght of setoff, was filed, included in secured claim, if any:			
Nature of property or right of setoff:	fotor Vehicle			
Describe:	Basis for perfection:			
Value of Property: S Amount of Secured Claim: S				
Annual Interest Rate%				
 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). the case was filed or the Debtor's				
Dup to \$2,775* of deposits toward business ceased, whichever is earlier - Other - Specify applicable paragraph				
services for personal, family, or household use – 11 U.S.C. § 507 (a)(7). Taxes or penalties owed to governmental units – 11 U.S.C. §				
services for personal, family, or household use – 11 U.S.C. § 507 (a)(7). Taxes or penalties owed to governmental units – 11 U.				
services for personal, family, or household use - 11 U.S.C. § 507 (a)77). Taxes or penalties owed to	S.C. §			

EXHIBIT "65"



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 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): Yang Yu	Check this box to indicate that this claim amends a previously filed claim.		
Name and address where notices should be sent:	Court Claim Number:		
Yang Yu	(If known) Staff City WOULD		
1402 Bing Dr. San Jose, CA 95129	Filed on: (MAY 1 4 2015)		
408-777-0138 Telephone number: yuyang1576@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.		
	05-14 15 100-17 11		
Telephone number:	05-14-15 A09:13 IN		
Email address:			
Amount of Claim as of Date Case Filed: \$ 1,235.00	7472 Mariposa Grove St.		
If all or part of the claim is secured, complete item 4.	Las Vegas, NV 89139		
If all or part of the claim is entitled to priority, complete item 5.			
	o the principal amount of the claim. Attach a statement that itemizes interest or charges.		
2. Basis for Claim: Security and Cleaning Depo	osit		
	a. Debtor may have scheduled 3b. Uniform Claim Identifier (optional):		
8 2 1 9	Yang Yu		
	(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 nattach 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		
Describe:	Basis for perfection:		
Value of Property: \$ Amount of Secured Claim: S			
Annual Interest Rate%			
 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 entegories, 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 Debtor's			
Up to \$2,775* of deposits toward business ceased, whichever purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4).	r is earlier - Other - Specify applicable paragraph Amount entitled to priority:		
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	Modified B10 (GCG) (4/13)		

EXHIBIT "66"



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	TITED 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 occording to 11 U.S.C. § 503.	ses after the bankruptcy filing. You may file	le a request for payment of an administrative		
Name of Creditor (the person or other entity to whom the Debtor owes money or property): Yang Yu	Check this box to indicate that this cla	aim amends a previously filed claim.		
Name and address where notices should be sent:	Court Claim Number:	oilu Con		
Yang Yu		(If known) Self (III) 010 Up		
1402 Bing Dr.	Filed on:	WAY 1 4 2015		
San Jose, CA 95129		MAT 1 4 2013		
Telephone number:				
Email address: yuyang1576@yahoo.com Name and address where payment should be sent (if different from above):	Check this box if you are aware that a	myone else has filed a proof of claim relating to		
reame and addless where payment should be sent (it different from above):	this claim. Attach copy of statement givin			
Talanhana auruhan	05-14-15	A09:13 IN		
Telephone number: Email address:				
1. Amount of Claim as of Date Case Filed: \$ 1,135.00	7471 Merced C	Grove		
If all or part of the claim is secured, complete item 4.	Ct.Las Vegas,			
If all or part of the claim is entitled to priority, complete item 5.	on Lub rogue,			
Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.				
2. Basis for Claim: Security and Cleaning Depo	sit			
(See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 3s	Debtor may have scheduled 31	b. Uniform Claim Identifier (optional):		
	account as:			
8 2 1 9	Yang Yu (See instruction #3a)	(Parintension #33)		
4. Secured Claim (See instruction #4)		(See instruction #3b) and other charges, as of the time case		
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.	tht of setoff, was filed, included in se			
	lotor Vehicle	s		
Describe:	Basis for perfection:			
-				
Value of Property: S Amount of Secured Claim: S				
Annual Interest Rate%				
 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 ☐ Contributions to an employee benefit plan — 11 U.S.C. § 507 (a)(5).				
Up to \$2,775* of deposits toward business cased, whichever is earlier — Other – Specify applicable paragraph business cased, whichever is earlier — Other – Specify applicable paragraph				
services for personal, family, or				
household use = 11 U.S.C. § 507 (a)(7). Takes 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) Modified B10 (GCG) (4/13)		

EXHIBIT "67"

Ameri-Dream, LLC



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT O	TITED 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 aris expense occording to 11 U.S.C. § 503.	es after the bankruptcy filing. You may file a re	equest 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 ar	mends a previously filed claim.			
Property): Yang Yu Name and address where notices should be sent:	Court Claim Number:				
	(If lon	novem) Agen City Group			
Yang Yu	Filed on:	(3)			
1402 Bing Dr.	rued on.	MAY 1 4 2015			
San Jose, CA 95129		\ /			
Telephone number: 408-777-0138					
Email address: yuyang15/6@yanoo.com					
Name and address where payment should be sent (if different from above):	Check this box if you are aware that anyon this claim. Attach copy of statement giving pa				
	05-14-15 A09	:13 IN			
Telephone number: Email address:					
Amount of Claim as of Date Case Filed: S 1,300,00					
If all or part of the claim is secured, complete item 4.	547 Swiss Cottag	•			
If all or part of the claim is entitled to priority, complete item 5.	Las Vegas, NV 89	91/8			
Check this box if the claim includes interest or other charges in addition to	the principal amount of the claim. Attach a stat	tement that itemizes interest or charges.			
2. Basis for Claim: Security and Cleaning Depos	sit				
	Debtor may have scheduled 3b. U	Uniform Claim Identifier (optional):			
8 2 1 9	Yang Yu				
	(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 rigattach required reducted documents, and provide the requested information. 		other charges, as of the time case ed claim, if any:			
Nature of property or right of setoff: ☐ Real Estate ☐ M	otor Vehicle	5			
Describe:	Basis for perfection:				
Value of Property: S					
Annual Interest Rate% ☐ Fixed or ☐ V (when case was filed)					
 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).					
Up to \$2,775° of deposits toward business ceased, whichever purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4).	s earlier - Other - Specify applicable par of 11 U.S.C. § 507 (a)().				
services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).	_	s_1,300.00			
governmental units – 11 U.S 507 (a)(8).	L. 9				
*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 p					

EXHIBIT "68"

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			HR H	48.0	8 IB III	ш

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 a 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): Livia Brady nee Grabowski	☐ Check this box to indicate that this claim amends a previously filed claim.			
Name and address where notices should be sent:	Court Claim Number:			
Livia Brady nee Grabowski PO Box 1	((f known)			
Casada NSW 2170 Australia	Filed on:			
Tele: +61417600881 FILED - 00832				
Email: livia@rojone.com.au District of Nevada	(MAY 1 4 2015),			
Telephone number: Ameri-Dream, LLC				
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 fifed a proof of claim relating to			
	this claim. Attach copy of statement giving particulars.			
Same	!			
	05-14-15 A09:26 IN			
Telephone number: Email address:				
1. Amount of Claim as of Date Case Filed: \$ 1,070.00				
If all or part of the claim is secured, complete item 4.				
If all or part of the claim is entitled to priority, complete item 5.				
	to the principal amount of the claim. Attach a statement that itemizes interest or charges.			
2. Basis for Claim: Security deposit 8086 Allensf	ord Ave. See attached			
	a. Debtor may have scheduled 3b. Uniform Claim Identifier (optional):			
4. Secured Claim (See instruction #4)	(See instruction #3a) (See instruction #3b) 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 r attach required redacted documents, and provide the requested information.				
Nature of property or right of setoff: ☐ Real Estate ☐ Other	Motor Vehicle			
Describe:	Basis for perfection:			
Value of Property: S Amount of Secured Claim: S				
Annual Interest Rate	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 11 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, whicheve purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4).				
services for personal, family, or 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)				

fodified B10 (GCG) (4/13)

EXHIBIT "69"

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05-14-15 A09:26 IN

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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-LI	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 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): LIVIA Bridge nee Grabowshi	Check this box to indicate that this claim amends a previously filed claim.						
Name and address where notices should be sent:	Court Claim Number:						
Livia Brady nee Grabowski	(If known)						
PO Box 1	Filed on:						
Casula NSW 2170	1						
Australia							
Tel: +61417600881	1						
Telephone number: Email address: livia@rojone.com.au							
Name and address where payment should be sem (if different from above): same as 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.						
Ballie as above	FILED - 00833						
	District of Nevada						
Telephone number:	Ameri-Dream, LLC						
Email address: 1. Amount of Claim as of Date Case Filed: S 12 100.00							
Basis for Claim: Security deposit + pet deposit - 8443 Classique Ave. #102 (See instruction #2) Last four digits of any number by which creditor identifies debtor: 3a. Debtor may have scheduled 3b. Uniform Claim Identifier (optional):							
	nccount 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 much required reducted documents, and provide the requested information. 	Amount of arrearage and other charges, as of the time case right of setoff, was filed, included in secured claim, if any:						
Transfer or Property or Transfer	Motor Vehicle						
Describe:	Basis for perfection:						
Value of Property: S Amount of Secured Claim: S							
Annual Interest Rate % D Fixed or D	Variable						
(when case was filed)	Amount Unsecured: \$						
 Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any i 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). USC. § 507 (a)(1)(A) or (a)(1)(B).	days before plan - 11 U.S.C. § 507 (a)(5).						
Up to \$2,775° of deposits toward business ceased, whicheve purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4).							
household use – 11 U.S.C. § 507 (a)(7). Taxes or penalties owed to governmental units – 11 U. 507 (a)(8).	0						
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w	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) (4/1)						

EXHIBIT "70"

• • • • • • • • • • • • • • • • • • • •	I DECEMBE OF COMPANY O							
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): US Oriental Investments, LLC	☐ Check this box to indicate that this claim amends a previously filed claim.							
Name and address where notices should be sent:	Court Claim Number:							
US Oriental Investments, LLC c/o Xiao Rong Li c/o Kathy Chen 4771 Torrence Ln. Las Vegas, NV 89103	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 claim. Attach copy of statement giving particulars.							
Same FILED - 00834 District of Nevada Telephone number: Ameri-Oream, LLC	05-14-15 A09:26 IN							
Email address:	<u></u>							
1. Amount of Claim as of Date Case Filed: \$ 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.								
	to the principal amount of the claim. Attach a statement that itemizes interest or charges.							
2. Basis for Claim: Security deposit for 8101 W. I (See instruction #2)	Flamingo Rd. #1166. See attached							
3. Last four digits of any number by which creditor identifies debtor;	a. 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 rettach required redacted documents, and provide the requested information. 	Amount of arrearage and other charges, as of the time case ight of setoff, was filed, included in secured claim, if any:							
Nature of property or right of setoff:	Motor Vehicle Basis for perfection:							
Describe:								
Value of Property: S	Amount of Secured Claim: \$							
Annual Interest Rate% ☐ Fixed or ☐ (when case was filled)	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. 	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 entegories, check the box specifying the priority and state the amount.							
Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). \$12,475*) earned within 10 the case was filed or the D	s before plan - 11 U.S.C. § 507 (a)(5).							
Up to \$2,775* of deposits toward urchase, 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	r is earlier – Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(_).							
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)

HARTE A CERTIFERENCE CON A REPORT OF A DECEMBER OF A SECOND