EXHIBIT “1”

B10 (Official Form 10) (04/13)

UNITED STATES BANKRUPTCY COURT District of Nevada

PROOF OF CLAIM

Name of Debtor: AMERI-DREAM REALTY LLC

Case Number: 15-10110

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):
SCOTT KORKOSZ

FILED
U.S. Bankruptcy Court
District of Nevada
2/1/2015
Mary A. Schott, Clerk
COURT USE ONLY

Name and address where notices should be sent.
SCOTT KORKOSZ
39 E AGATE AVE #303
LAS VEGAS, NV 89123

Telephone number: 702-469-2217 email: scottkorkosz@yahoo.com

☐ Check this box if this claim amends a previously filed claim.

Court Claim Number: (*If known*)
Filed on:

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

Telephone number: email:

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

1. **Amount of Claim as of Date Case Filed:** $ 750.00
If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5.
☐ Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.

2. **Basis for Claim:** rent deposit (See instruction #2)

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

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

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

4. **Secured Claim** (See instruction #4)
Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information
Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other
Describe:
Value of Property: $
Annual Interest Rate (when case was filed) % ☐ Fixed or ☐ Variable

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

Basis for perfection:

Amount of Secured Claim: $

Amount Unsecured: $ 750.00

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 $12,475*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. §507(a)(4).	☐ Contributions to an employee benefit plan – 11 U.S.C. §507(a)(5).	**Amount entitled to priority:**
☑ 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.S.C. §507(a)(8).	☐ Other – Specify applicable paragraph of 11 U.S.C. §507(a)(_).	$

**Amounts are subject to adjustment on 4/01/16 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 “2”

B10 (Official Form 10) (04/13)

RECEIVED
AND FILED

UNITED STATES BANKRUPTCY COURT

PROOF OF CLAIM

2015 FEB 9 PM 12:21

U.S. BANKRUPTCY COURT
MARY A. SCHOTT, CLERK

Name of Debtor:	Case Number:
AMERI-DREAM REALTY LLC 4875 NEVSO DR, LAS VEGAS, NV 89103	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):
JUAN & JAYMEE PELAYO

Name and address where notices should be sent: 1136 TEAL POINTOR
HENDERSON, NV 89074

Telephone number: 5623351233 email: JUANPELAYO55@GMAIL.COM

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

Telephone number: email:

The Garden City Group, Inc.
FEB - 9 2015

COURT USE ONLY

☐ Check this box if this claim amends a previously filed claim.
Court Claim Number: _____ (If known)
Filed on: _____

☐ 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 - 00025
District of Nevada
Ameri-Dream, LLC

1. **Amount of Claim as of Date Case Filed:** $ 1500.00

If all or part of the claim is secured, complete item 4.

If all or part of the claim is entitled to priority, complete item 5.

☐ Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.

2. **Basis for Claim:** UNPAID SECURITY DEPOSIT
(See instruction #2)

3. Last four digits of any number by which creditor identifies debtor:	3a. Debtor may have scheduled account as:	3b. Uniform Claim Identifier (optional):
8714	_____ (See instruction #3a)	_____ (See instruction #3b)

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

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

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

Basis for perfection: _____

Value of Property: $ 180,000

Amount of Secured Claim: $ _____

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

Amount Unsecured: $ _____

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

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

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

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

Amount entitled to priority:
$ 1500

☑ 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.S.C. § 507 (a)(8).

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

*Amounts are subject to adjustment on 4/01/16 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 “3”

B10 (Official Form 10) (04/13)

UNITED STATES BANKRUPTCY COURT District of Nevada

PROOF OF CLAIM

Name of Debtor: AMERI-DREAM REALTY LLC

Case Number: 15-10110

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):
LIYUE YANG

FILED
U.S. Bankruptcy Court
District of Nevada
2/10/2015
Mary A. Schott, Clerk
COURT USE ONLY

Name and address where notices should be sent:
LIYUE YANG
712 W HELLMAN AVE
MONTEREY PARK, CA 91754

Telephone number: 4088267177 email: dongyang7793@hotmail.com

☐ Check this box if this claim amends a previously filed claim.

Court Claim Number: (*If known*)
Filed on:

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

Telephone number: email:

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

1. Amount of Claim as of Date Case Filed: $ 5297.00

If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5.

☐ Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.

2. Basis for Claim: tenant desposit (See instruction #2)

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

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

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

4. Secured Claim (See instruction #4)
Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.
Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other
Describe:
Value of Property: $
Annual Interest Rate (when case was filed) % ☐ Fixed or ☐ Variable

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

Basis for perfection:

Amount of Secured Claim: $

Amount Unsecured: $ 5297.00

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 $12,475*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. §507(a)(4).	☐ Contributions to an employee benefit plan – 11 U.S.C. §507(a)(5).	**Amount entitled to priority:**
☐ 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.S.C. §507(a)(8).	☐ Other – Specify applicable paragraph of 11 U.S.C. §507(a)(_).	$

**Amounts are subject to adjustment on 4/01/16 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 “4”

B10 (Official Form 10) (04/13)

UNITED STATES BANKRUPTCY COURT District of Nevada

PROOF OF CLAIM

Name of Debtor: AMERI-DREAM REALTY LLC	Case Number: 15-10110

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):
TZUMAN PAN

FILED
U.S. Bankruptcy Court
District of Nevada
2/10/2015
Mary A. Schott, Clerk
COURT USE ONLY

Name and address where notices should be sent:
TZUMAN PAN
712 W. HELLMAN AVE
MONTEREY PARK, CA 91754

Telephone number: 626-5921197 email: Ceciliacpa@aol.com

☐ Check this box if this claim amends a previously filed claim.

Court Claim Number: (*If known*)
Filed on: ____

☐ 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.

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

FILED - 00027
District of Nevada
Ameri-Dream, LLC

The Garden City Group, Inc. FEB 10 2015

Telephone number: email:

1. **Amount of Claim as of Date Case Filed:** $ 2960.00
If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5.
☐ Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.

2. **Basis for Claim:** tenants deposits and fees (See instruction #2)

3. Last four digits of any number by which creditor identifies debtor:	3a. Debtor may have scheduled account as:	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 redacted documents, and provide the requested information.
Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other
Describe:
Value of Property: $____
Annual Interest Rate (when case was filed) ___% ☐ Fixed or ☐ Variable

Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any:
$ ____
Basis for perfection: ____
Amount of Secured Claim: $____
Amount Unsecured: $ 2960.00

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 $12,475*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. §507(a)(4).	☐ Contributions to an employee benefit plan – 11 U.S.C. §507(a)(5).	Amount entitled to priority:
☐ 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.S.C. §507(a)(8).	☐ Other – Specify applicable paragraph of 11 U.S.C. §507(a)(_).	$____

**Amounts are subject to adjustment on 4/01/16 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 “5”

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): JL Green Realty, LLC

Name and address where notices should be sent:
5829 Cousins pl.
Rancho Cucamonga CA 91737

Telephone number: (909) - 489-8880
Email address: pektang57@yahoo.com

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

Court Claim Number: _____ *(If known)*

Filed on: _____

The Garden City Group, Inc.
MAR 12 2015

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

Telephone number:
Email address:

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

FILED - 00068
District of Nevada
Ameri-Dream, LLC

1. Amount of Claim as of Date Case Filed: $ 2350.00

If all or part of the claim is secured, complete item 4.

If all or part of the claim is entitled to priority, complete item 5.

☐ Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.

2. Basis for Claim: Security Deposit, Cleaning Deposit, Key Deposit, Referral Commission & Fees For Mortgage
(See instruction #2)

3. Last four digits of any number by which creditor identifies debtor:	**3a. Debtor may have scheduled account as:**	**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 redacted documents, and provide the requested information.

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

Describe: _____

Value of Property: $ _____

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

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

Basis for perfection: _____

Amount of Secured Claim: $ _____

Amount Unsecured: $ _____

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

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

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

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

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

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

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

Amount entitled to priority:
$ 2350.00

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

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

Modified B10 (GCG) (4/13)

EXHIBIT “6”

B10 (Official Form 10) (04/13)

UNITED STATES BANKRUPTCY COURT District of Nevada

PROOF OF CLAIM

Name of Debtor: AMERI-DREAM REALTY LLC

Case Number: 15-10110

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):
Dominic Li

FILED
U.S. Bankruptcy Court
District of Nevada
3/21/2015
Mary A. Schott, Clerk
*COURT USE ONLY

Name and address where notices should be sent:
Dominic Li
12917 Greystone ave N
hugo, MN 55038

Telephone number: 6127012389 email: dominic.h.li@hotmail.com

☐ Check this box if this claim amends a previously filed claim.

Court Claim Number: (*If known*)
Filed on:

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

FILED - 00097
District of Nevada
Ameri-Dream, LLC

Telephone number: email:

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

1. Amount of Claim as of Date Case Filed: $ 1730.00

If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5.

☐ Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.

2. Basis for Claim: security deposit held by Debtor (See instruction #2)

3. Last four digits of any number by which creditor identifies debtor: 8599

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

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

4. Secured Claim (See instruction #4)

Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.

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

Describe:

Value of Property: $

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

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

Basis for perfection:

Amount of Secured Claim: $

Amount Unsecured: $ 0.00

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 $12,475*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. §507(a)(4).	☐ Contributions to an employee benefit plan – 11 U.S.C. §507(a)(5).	**Amount entitled to priority:**
☑ 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.S.C. §507(a)(8).	☐ Other – Specify applicable paragraph of 11 U.S.C. §507(a)(_).	$ 1730.00

**Amounts are subject to adjustment on 4/01/16 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 “7”

B10 (Official Form 10) (04/13)

UNITED STATES BANKRUPTCY COURT District of Nevada

PROOF OF CLAIM

Name of Debtor: AMERI-DREAM REALTY LLC	Case Number: 15-10110

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):
Dominic Li

FILED
U.S. Bankruptcy Court
District of Nevada
- 3/22/2015
Mary A. Schott, Clerk
COURT USE ONLY

Name and address where notices should be sent:
Dominic Li
12917 Greystone ave N
hugo, MN 55038

Telephone number: 6127012389 email: dominic.h.li@hotmail.com

☐ Check this box if this claim amends a previously filed claim.

Court Claim Number: (*If known*)
Filed on:

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

FILED - 00096
District of Nevada
Ameri-Dream, LLC

Telephone number: email:

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

1. **Amount of Claim as of Date Case Filed:** $ 1730.00
If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5.
☐ Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.

2. **Basis for Claim:** security deposit held by Debtor (See instruction #2)

3. Last four digits of any number by which creditor identifies debtor: 8599	3a. Debtor may have scheduled account as: (See instruction #3a)	3b. Uniform Claim Identifier (optional): (See instruction #3b)

4. **Secured Claim** (See instruction #4)
Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.
Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other
Describe:
Value of Property: $
Annual Interest Rate (when case was filed) % ☐ Fixed or ☐ Variable

Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: $
Basis for perfection:
Amount of Secured Claim: $
Amount Unsecured: $ 0.00

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.**

			Amount entitled to priority:
☐ Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).	☐ Wages, salaries, or commissions (up to $12,475*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. §507(a)(4).	☐ Contributions to an employee benefit plan – 11 U.S.C. §507(a)(5).	
☑ Up to $2,775* of deposits toward purchase, lease, or rental of property or services for personal, 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).	☐ Other – Specify applicable paragraph of 11 U.S.C. §507(a)(_).	$ 1730.00

**Amounts are subject to adjustment on 4/01/16 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 “8”

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): Viktoria Arizbell Piñon Teran

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

Court Claim Number: _____ (If known)

Filed on: _____

Name and address where notices should be sent:
Viktoria Arizbell Piñon Teran
4909 Cinnamon Spice Ct.
N. Las Vegas, NV 89031

Telephone number: 702-815-4712
Email address: viktoriapina@gmail.com

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

Telephone number:
Email address:

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

1. **Amount of Claim as of Date Case Filed:** $ 440

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:** Wages - Salary
(See instruction #2)

3. **Last four digits of any number by which creditor identifies debtor:** 1087

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

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

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

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

Describe: _____

Value of Property: $_____

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

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

Basis for perfection: _____

Amount of Secured Claim: $_____

Amount Unsecured: $_____

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

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

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

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

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

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

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

Amount entitled to priority: $ 440.00

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

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

EXHIBIT “9”

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): Jung-Tsung Liu

Name and address where notices should be sent:
Jung-Tsung Liu
1051 Boise Dr.
Campbell, CA 95008
Telephone number: 408-688-3088
Email address: jung.liu@yahoo.com

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

Court Claim Number: _____ *(If known)*

Filed on: _____

Garden City Group, LLC
APR - 7 2015

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

Telephone number:
Email address:

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

FILED - 00127
District of Nevada
Ameri-Dream, LLC

1. **Amount of Claim as of Date Case Filed:** $ ~~2,870~~ 2,870.00

If all or part of the claim is secured, complete item 4.

If all or part of the claim is entitled to priority, complete item 5.

☐ Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges

2. **Basis for Claim:** 1 month rent + 1 month secured Deposit
(See instruction #2)

3. **Last four digits of any number by which creditor identifies debtor:** 6615

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

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

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

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

Describe: _____

Value of Property: $_____

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

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

Basis for perfection: _____

Amount of Secured Claim: $_____

Amount Unsecured: $_____

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

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

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

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

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

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

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

Amount entitled to priority:
$ 1,435.00

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

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

EXHIBIT “10”

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): Thomas & Flora Smith

Name and address where notices should be sent:
10829 Dobbs Ave
Las Vegas, Nevada 89166

Telephone number: 702-655-0952
Email address: driftintom@yahoo.com

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

Court Claim Number: _____ *(If known)*

Filed on: _____

Garden City Group, LLC
APR – 9 2015

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

Same As Above

Telephone number:
Email address:

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

FILED - 00133
District of Nevada
Ameri-Dream, LLC

1. Amount of Claim as of Date Case Filed: $ 1,395.00

If all or part of the claim is secured, complete item 4.

If all or part of the claim is entitled to priority, complete item 5.

☐ Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.

2. Basis for Claim: _____
(See instruction #2)

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

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

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

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

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

Describe: _____

Value of Property: $_____

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

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

Basis for perfection: _____

Amount of Secured Claim: $_____

Amount Unsecured: $_____

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

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

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

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

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

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

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

Amount entitled to priority:
$ 1,395.00

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

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

Modified B10 (GCG) (4/13)