EXHIBIT "31"

B10 (Official Form 10) (04/13)			
UNITED STATES BANKRUPT	CY COURT		PROOF OF CLAIM
Name of Debtor:		Case Number:	nihu Con
AMERI-DREA	m REALTY LLC	BK-S-15- 10110-LED	MAR 3 0 2015
	claim for an administrative expense that arises ment of an administrative expense according to		- (MAII 50 50 5
Name of Creditor (the person or other er	tity to whom the debtor owes money or proper	ty):	COURT HEE ONLY
Name and address where notices should	be sent:		COURT USE ONLY Check this box if this claim amends a
11523 Sun RAJ	COURT		previously filed claim.
SAN DIEGO, C			Court Claim Number:
Telephone number: \$58-231-88	81 email: GAKY@HAWKIN.	s-Z4u. Com	Filed on:
Name and address where payment shoul	d be sent (if different from above):		Check this box if you are aware that anyone else has filed a proof of claim
Same	E As Above		relating to this claim. Attach copy of statement giving particulars.
Telephone number:	email:		
1. Amount of Claim as of Date Case I	iled: \$ 7450 =		
If all or part of the claim is secured, com	plete item 4.		LED - 00104
If all or part of the claim is entitled to pr	iority, complete item 5.		rict of Nevada ri-Dream, LLC
Check this box if the claim includes in	nterest or other charges in addition to the princi	pal amount of the claim: Attach	
2. Basis for Claim: SECURIT	Y DEPOSITS IN TRUST	ALC ASSOCIATES	D WITH_
2. Basis for Claim: SECURIT (See instruction #2) PROPE	Y DEPOSITS IN TRUST RTY MANAGEMENT	Or 189 BELMON	T CANYON PLACE
2. Basis for Claim: SECURIT (See instruction #2) Props 3. Last four digits of any number by which creditor identifies debtor:	Y DEPOSITS IN TRUST RTY MANAGEMENT 3a. Debtor may have scheduled account a	Or 189 BELMON	7 CANYON PLACE HEXDARSON NY
(See instruction #2) Props 3. Last four digits of any number	RTY MANAGEMENT	or 189 BELM on	7 CANYON PLACE HEXDERSON NY
3. Last four digits of any number by which creditor identifies debtor: 82.19	3a. Debtor may have scheduled account a	See instruction #3b) Amount of arrearage and	T CANYON PLACE HENDERSON, NY other charges, as of the time case was filed,
(See instruction #2) Propes 3. Last four digits of any number by which creditor identifies debtor: 82.19 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is	3a. Debtor may have scheduled account a (See instruction #3a) secured by a lien on property or a right of	s: 3b. Uniform Claim Identi	T CANYON PLACE HENDERSON, NY other charges, as of the time case was filed,
(See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 82.19 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is setoff, attach required redacted document	3a. Debtor may have scheduled account a (See instruction #3a)	s: 3b. Uniform Claim Identi (See instruction #3b) Amount of arrearage and included in secured claim	T CANYON PLACE HENDERSON, NY other charges, as of the time case was filed,
(See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 82.19 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is setoff, attach required redacted document	3a. Debtor may have scheduled account a (See instruction #3a) secured by a lien on property or a right of	See instruction #3b) Amount of arrearage and	T CANYON PLACE HENDERSON, NY other charges, as of the time case was filed,
(See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 82.19 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is setoff, attach required redacted documer Nature of property or right of setoff:	3a. Debtor may have scheduled account a (See instruction #3a)	s: 3b. Uniform Claim Identi (See instruction #3b) Amount of arrearage and included in secured claim	T CANYON PLACE HENDERSON, NY Inter (optional): I other charges, as of the time case was filed, if any: S
(See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 82.19 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is setoff, attach required redacted documents. Nature of property or right of setoff: Describe:	3a. Debtor may have scheduled account a (See instruction #3a) secured by a lien on property or a right of its, and provide the requested information. Real Estate	See instruction #3b) (See instruction #3b) Amount of arrearage and included in secured claim	T CANYON PLACE HENDERSON, NY Inter (optional): I other charges, as of the time case was filed, if any: S
(See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 82.19 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is setoff, attach required redacted documer Nature of property or right of setoff: Describe: Value of Property: S	3a. Debtor may have scheduled account a (See instruction #3a) secured by a lien on property or a right of its, and provide the requested information. Real Estate	See instruction #3b) Amount of arrearage and included in secured claim Basis for perfection: Amount of Secured Claim Amount Unsecured:	T CANYON PLACE HENDERSON, NY Inter (optional): I other charges, as of the time case was filed, if any: S
(See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 82.19 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is setoff, attach required redacted documer Nature of property or right of setoff: Describe: Value of Property: S	3a. Debtor may have scheduled account a (See instruction #3a) secured by a lien on property or a right of its, and provide the requested information. Real Estate Motor Vehicle Other ed or Variable	See instruction #3b) Amount of arrearage and included in secured claim Amount of Secured Claim Amount Unsecured: the claim falls into one of the fellows filed or the comployee be	T CA NYOW PLACE HENDERSON, NY other charges, as of the time case was filed, , if any: S illowing categories, check the box specifying tions to an melit plan —
(See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 82.19 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is setoff, attach required redacted documer Nature of property or right of setoff: Describe: Value of Property: S	3a. Debtor may have scheduled account a (See instruction #3a) secured by a lien on property or a right of its, and provide the requested information. Real Estate Motor Vehicle Other d or Variable Wages, salaries, or commissions (up earned within 180 days before the case debtor's business ceased, whichever is e 11 U.S.C. § 507 (a)(4).	See instruction #3b) Amount of arrearage and included in secured claim Amount of Secured Claim Amount Unsecured: the claim falls into one of the fellows filed or the artier —	T CA NYON PLACE Filer (optional): HENDERS ON, NY other charges, as of the time case was filed, , if any: S
(See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 82.19 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is setoff, attach required redacted documer. Nature of property or right of setoff: Describe: Value of Property: S	3a. Debtor may have scheduled account a (See instruction #3a) secured by a lien on property or a right of its, and provide the requested information. Real Estate Motor Vehicle Other d or Variable Wages, salaries, or commissions (up earned within 180 days before the case debtor's business ceased, whichever is e 11 U.S.C. § 507 (a)(4).	See instruction #3b) Amount of arrearage and included in secured claim Basis for perfection: Amount of Secured Claim Amount Unsecured: the claim falls into one of the form the claim falls into one of the claim falls into one of the form the claim falls into one of	T CA NYOW PLACE HENDERSON, NY Inter (optional): I other charges, as of the time case was filed, I, if any: S

EXHIBIT "32"

	,		
UN	TED STATES BANKRUPTCY COURT FOR THE DISTRICT	T OF NEVADA	PROOF OF CLAIM
Nan	ne of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LE	ED	
	E: Do not use this form to make a claim for an administrative expense that use according to 11 U.S.C. § 503.	arises after the ba	nkruptcy filing. You may file a request for payment of an administrative
prop	te of Creditor (the person or other entity to whom the Debtor owes money or erry) Christopher & Kristin Ownby te and address where notices should be sent: Kristin Ownby 10573 Penns Creek Cowt Las Vegas, NV 89135	Court Claim	Number: (If known) MAR 3 1 2015
Ema	phone number: 102-377-375 address: Kd053Ø@gmail.com e and address where payment should be sent (if different from above):		box if you are aware that anyone else has filed a proof of claim relating to
		this claim. At	tach copy of statement giving particulars.
			FILED - 00110 District of Nevada
	phone number:		Ameri-Dream, LLC
Ema 1.	Amount of Claim as of Date Case Filed: S 1.575		
	If all or part of the claim is secured, complete item 4.		
	If all or part of the claim is section, complete item 5		
2.	Basis for Claim: Residential home rental (See instruction #2)		,
3.		3a. Debtor may account as:	
		OS13 Fenn (See ins	s Creek Ct. 89135 truction #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 attach required reducted documents, and provide the requested information	a right of setoff,	Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any:
		Motor Vehicle	SBasis for perfection:
	Value of Property: S		Amount of Secured Claim: S
	Annual Interest Rate% □ Fixed or □ (when case was filed)	1 Variable	Amount Unsecured: \$
5.	Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any the priority and state the amount.	part of the claim	falls into one of the following categories, check the box specifying
		180 days before Debtor's ver is earlier – (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: s_1,575
	*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter	with respect to co	ases commenced on or after the date of adjustment.
6	Credits. The amount of all payments on this claim has been credited for the	e purpose of mak	
			Modified B10 (GCG) (4/13)

EXHIBIT "33"

11001000	HEADER IN		H	THE RELEASE	ш	10110	П	Ш	81
	ши	88	Ш		Ш	BH	ı	Ш	n
			Ш		Ш	Ш	П	Н	н

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LEE	D
NOTE: Do not use this form to make a claim for an administrative expense that are 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): Bo Tang	☐ Check this box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent	Court Claim Number:
Bo Tang	(If known)
1559 Klamath Dr.	Filed on: (3 APR 20 2015)
Sunnyvale, CA 94087	
Telephone number: (650) 1793-30/4 Email address: Shertyu 2002@ Yakov. 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 as above	. FILED - 00187
	District of Nevada
Telephone number: Email address:	Ameri-Dream, LLC
1. Amount of Claim as of Date Case Filed: S 1575, 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: Deposits of rental property at: (See instruction #2)	: 10573 Penns Creek Ct. Las Vegas, NV 89135
	ia. Debtor may have scheduled account as: 3b. Uniform Claim Identifier (optional):
8 2 1 9	(See instruction #3b) (See instruction #3b)
 Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right. 	Amount of amount and other shares as of the time area
attach required redacted documents, and provide the requested information.	
attach required redacted documents, and provide the requested information. Nature of property or right of setoff: Real Estate N	motor Vehicle was filed, included in secured claim, if any:
attach required redacted documents, and provide the requested information.	right of setoff, was filed, included in secured claim, if any:
attach required redacted documents, and provide the requested information. Nature of property or right of setoff:	motor Vehicle was filed, included in secured claim, if any:
attach required redacted documents, and provide the requested information. Nature of property or right of setoff:	was filed, included in secured claim, if any: S Motor Vehicle Basis for perfection:
attach required redacted documents, and provide the requested information. Nature of property or right of setoff:	Motor Vehicle Basis for perfection: Amount of Secured Claim: S Variable
attach required redacted documents, and provide the requested information. Nature of property or right of setoff: Describe: Value of Property: S Annual Interest Rate (when case was filed) 5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any particle support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). Wages, salaries, or commissing the case was filed or the Described by the priority and state the amount.	was filed, included in secured claim, if any: S Motor Vehicle Basis for perfection: Amount of Secured Claim: S Variable Amount Unsecured: part of the claim falls into one of the following categories, check the box specifying issions (up to plan – 11 U.S. C. § 507 (a)(5).
attach required redacted documents, and provide the requested information. Nature of property or right of setoff: Describe: Value of Property: S Annual Interest Rate (when case was filed) 5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any particle support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). Y (Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal family, or	was filed, included in secured claim, if any: S
attach required redacted documents, and provide the requested information. Nature of property or right of setoff: Describe: Value of Property: S Annual Interest Rate	was filed, included in secured claim, if any: S
attach required redacted documents, and provide the requested information. Nature of property or right of setoff: Real Estate Other Describe: State Other Value of Property: S Annual Interest Rate % Fixed or Venerous as filed) 5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any particle support obligations under 11 U.S.C. § 507 (a) (1)(A) or (a)(1)(B). MUp 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	was filed, included in secured claim, if any: S

EXHIBIT "34"

B10 (Official Form 10) (04/13)				
UNITED STATES BANKR	UPTCY COURT District	of Nevada	PROOF OF	CLAIM
Name of Debtor: AMERI-DREAM REALTY LLC		Case Number: 15-10110	FILE	ED
	o claim for an administrative expense t syment of an administrative expense ac		U.S. Bankru District of	ptcy Court Nevada
Name of Creditor (the person or other entity ELIZABETH HORN	y to whom the debtor owes money or p	oroperty):	4/2/2 Mary A. Sch COURT US	ott, Clerk
Name and address where notices should be ELIZABETH HORN 9630 BIGHORN RANCH AVE	sent:	Castlen City Group	Check this box if this cle amends a previously file	
LAS VEGAS NV 89148 Telephone number: 4126806525	email: liz_s_horn@hotmail.com	APR - 2 2015	Court Claim Number:	(If known) Filed on:
Name and address where payment should b FILED - District of Ameri-Drea	00124 Nevada		Check this box if you are that anyone else has file of claim relating to this Attach copy of statement particulars.	d a proof claim,
Telephone number: email:	· · · · · · · · · · · · · · · · · · ·			
Amount of Claim as of Date Case File If all or part of the claim is secured, compl Cheek this box if the claim includes in	ete item 4. If all or part of the claim is		h a statement that itemizes interest	or charges.
2. Basis for Claim: Security Depos	(See instruction #2)			
Last four digits of any number by which creditor identifies debtor: 9630	3a. Debtor may have scheduled acc as:	ount 3b. Uniform Claim Identif	lier (optional):	
300	(See instruction #3a)	(See instruction #3b)		
Secured Claim (See instruction #4) Check the appropriate box if the claim is setoff, attach required redacted document. Nature of property or right of setoff:	s, and provide the requested information	n of included in secure	s	time case was filed,
Describe:		Basis for perfect	108:	
Value of Property: \$	led) _% D Fixed or D Variable	Amount of Secur	red Claim: S	•
		Amount Unsecu	red: S <u>1625.00</u>	·
5. Amount of Claim Entitled to Priority and state the amount.	under 11 U.S.C. §507(a). If any par	t of the claim falls into one of the foll	owing categories, check the box	specifying the priority
Domestic support obligations under U.S.C. §507(a)(1)(A) or (a)(1)(B).	earned within 180 days befo		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 services for personal, family, or household use - 11 U.S.C. §507(a)(*)	or §507(a)(8).	covernmental units = 11 U.S.C	Other - Specify applicable paragraph of 11 U.S.C. §507(a)(_).	5
*Amounts are subject to adjustment on 4/	01/16 and every 3 years thereafter wit	h respect to cases commenced on or aft	er the date of adjustment.	
6. Credits. The amount of all payments of	n this claim has been credited for the p	urpose of making this proof of claim.	See instruction #6)	

EXHIBIT "35"

UN	TTED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA	PROOF OF CLAIM
Na	ne of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LEI	D	
	TE: Do not use this form to make a claim for an administrative expense that ar ense according to 11 U.S.C. § 503.	rises after the bankruptcy filing. You may fi	ie a request for payment of an administrative
	ne of Creditor (the person or other entity to whom the Debtor owes money or	☐ Check this box to indicate that this cl	aim amends a previously filed claim.
L	Dongbin Zhang	Court Claim Number:	
Na	ne and address where notices should be sent:		(If known) ART City Group
	Dongbin Zhang		(1) Linewith Safter 27 (E)
	17 Tioga Pl. Irvine, CA 92602	Filed on:	APR 1 3 2015
	Irvine, CA 92602		
Tele	ephone number: 949-439-7840 all address: donzhang 5555 @yahus.com		
	ne and address where payment should be sent (if different from above):	Check this box if you are aware that a this daim. Attach copy of statement give	enyone else has filed a proof of claim relating to ing particulars.
		FIL	ED - 00152
			ict of Nevada
	phone number.	Amer	i-Dream, LLC
	Amount of Claim as of Date Case Filed: \$_\$\frac{1}{1675.50}		•
	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 universal amount of the electric Attach	a statement that itemines interest or charges
_			1
2	(See instruction #2)	y apposit, key per /	Cleaning apposit, Lust munth rept deposit
3.	Last four digits of any number by which creditor identifies debtor: 3a		b. Uniform Claim Identifier (optional):
	8 6 0 0	Dunghin Zhang	
		(See instruction #38)	(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 ristach required reducted documents, and provide the requested information.	Amount of arrearage a ght of setoff, was filed, included in s	and other charges, as of the time case ocured claim, if any:
		Motor Vehicle	s
	Describe:	Basis for perfection:	
	Value of Property: \$	Amount of Secured Cla	uim: \$
		Variable	3
	(when case was filed)	Amount Unsecured:	\$
5.	Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any pathe priority and state the amount.	art of the claim falls into one of the follow	ving categories, check the box specifying
	☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). ☐ Wages, saleries, or commiss \$12,475*) earned within 18	0 days before plan - 11 U.S.C. § 507 (a)	
	Up to \$2,775* of deposits toward business ceased, whichever	is earlier - Q Other - Specify applicable	
	purchase, lease, or rental of property or services for personal, family, or bousehold use = 11 U.S.C. \$ 507 (a)(4).	of 11 U.S.C. § 507 (a)(\$ 1675.00
	household use = 11 U.S.C. § 507 (a)(7). ☐ Taxes or penalties owed to governmental units 11 U.S. 507 (a)(8).	S.C. §	
	*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter wit	ish 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	surpose of making this proof of claim (See	instruction #6)

EXHIBIT "36"

protoment our roptom sy				
UNITED STATES BANKRUPT	CY COURT District of Nevada		PROOF OF CLAIM	
Name of Debtor:		Case Number:		
AMERI-DREAM REALTY.LLC		BK-S-15-10110-LED	City Group	
7 117 21 12 13 14 14 15 15 17 12 12 1		DIVO TO TO TO LED	\\ \text{\$\pi_{\mathred} \$\pi_{\mathre	
			APR - 6 2015	
	claim for an administrative expense that arises ment of an administrative expense according to			
	tity to whom the debtor owes money or proper	ty):	1 \	
WILLIE R. WINTERS JR			COURT USE ONLY	
Name and address where notices should	be sent:		Check this box if this claim amends a	
800 TRUMPINGTON COURT LAS VEGAS, NV 89178	800 TRUMPINGTON COURT			
LAS VEGAS, NV 89178			Court Claim Number:	
Walesham worker and an area and			(If known)	
Telephone number: (702) 589-6559 email. rsnbelief@yahoo.com			Filed on: 02/17/2015	
Name and address where payment should	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 			
		D - 00118	relating to this claim. Attach copy of	
		t of Nevada Dream, LLC	statement giving particulars.	
Telephone number:	email:	Dreim, LLC		
1. Amount of Claim as of Date Case F	iled: \$ 2	600.00		
If all as and of the above is seemed asset	alata ita d			
If all or part of the claim is secured, com				
If all or part of the claim is entitled to pri				
Check this box if the claim includes in	terest or other charges in addition to the princi	pal amount of the claim. Attach	a statement that itemizes interest or charges.	
Basis for Claim: Rental deposi (See instruction #2)	t, Application fee, & First months rent		·	
3. Last four digits of any number by which creditor identifies debtor:	3u. Debtor may have scheduled account a	s: 3b, Uniform Claim Ident	ifier (optional):	
	(See instruction #3a)	(See instruction #3b)		
16-16-6-1-6-1-1			other charges, as of the time case was filed,	
 Secured Claim (See instruction #4) Check the appropriate box if the claim is 	secured by a lien on property or a right of	included in secured claim		
	ts, and provide the requested information.		s2.600.00	
	□Real Estate □Motor Vehicle □Other	Basis for perfection:		
Describe:			2,600.00	
Value of Property: \$	-	Amount of Secured Clain	s: \$	
Annual Interest Rate% DFixe (when case was filed)	ed or DVariable	Amount Unsecured:	s	
5. Amount of Claim Entitled to Priori the priority and state the amount.	ty under 11 U.S.C. § 507 (u). If any part of	the claim falls into one of the fo	Mowing categories, check the box specifying	
☐ Domestic support obligations under I U.S.C § 507 (a)(1)(A) or (a)(1)(B).	 Wages, salaries, or commissions (up earned within 180 days before the case w debtor's business ceased, whichever is et 11 U.S.C. § 507 (a)(4). 	vas filed or the employee be	nefit plan -	
■ Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or househo use – 11 U.S.C. § 507 (a)(7).	Taxes or penalties owed to governme 11 U.S.C. § 507 (a)(8).	ntal units –	ragraph of	
*Amounts are subject to adjustment on 4	/01/16 and every 3 years thereafter with respe	ct to cases commenced on or afte	r the date of adjustment.	
6. Credits. The amount of all payments	on this claim has been credited for the purpos	e of making this proof of claim. (See instruction #6)	

EXHIBIT "37"



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.	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): Julian Ho Ting Lam	☐ Check this box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent:	Court Claim Number:
Julian Ho Ting Lam	(If known) Calden City Group
7838 Soda Canyon Las Vegas, NV 89139	Filed on: MAY - 8 2015
Telephone number: 702 - 838 - 8899 Email address: Julianiam@aol.com	
Name and address where payment should be sent (if different from above):	☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.
•	. FILED - 00391
Telephone number:	District of Nevada
Email address:	Ameri-Dream, LLC
Amount of Claim as of Date Case Filed: S \425	
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: Deposit on rental proper (See instruction #2)	ty 800 Trumpington
3. Last four digits of any number by which creditor identifies debtor: 3a	Debtor may have scheduled 3b. Uniform Claim Identifier (optional):
6938	Ulian Ha Ting Lam (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 right attach required reducted documents, and provide the requested information. 	Amount of arrearage and other charges, as of the time case
	fotor Vehicle
Describe:	Basis for perfection:
Value of Property: S	Amount of Secured Claim: \$
Annual Interest Rate	'ariable Amount Unsecured: \$
 Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any pe 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) Wages, salaries, or commis \$12,475*) earned within 18 the case was filed or the De	0 days before plan - 11 U.S.C. § 507 (a)(5). btor'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). 	is earlier - 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). Taxes or penalties owed to governmental units – 11 U.S. 507 (a)(8).	
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w	ith 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 "38"

i HIU	11111		ш			
Ш	Ш	II N	ш	Ш	Ш	

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 ari expense according to 11 U.S.C. § 503.	ses after the bankruptcy filing. You may file a request for payment of an administrative
Name of Creditor (the person or other entity to whom the Debtor owes money or property): Nancy Karn	☐ Check this box to indicate that this claim amends a previously filed claim. Court Claim Number:
Name and address where notices should be sent:	Group A
Nancy Karn	(If known)
Nancy Karn 7641 Tortola Bay Ln Las Vegas, NV 89128	Filed on: (3 APR 1 4 2015
Telephone number. Email address: Karnna@interact.ccsd.r	et
Name and address where payment should be sent (if different from above):	☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.
	FILED - 00155
Telephone number:	District of Nevada Ameri-Dream, LLC
Email address:	
1. Amount of Claim as of Date Case Filed: S 1,230,00	
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.	
5	the principal amount of the claim. Attach a statement that itemizes interest or charges.
2. Basis for Claim: Sec wity deposit tor (See instruction #2)	ental property
Last four digits of any number by which creditor identifies debtor:	Debtor may have scheduled 3b. Uniform Claim Identifier (optional):
7 4 9 4	
	(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:
Nature of property or right of setoff: Real Estate O M	Motor Vehicle
Describe: Rental house	Basis for perfection:
Value of Property: S	Amount of Secured Claim: S
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 ☐ Wages, salaries, or commis 11 U.S.C § 507 (a)(1)(A) or (a)(1)(B) S12,475*) earned within 18 the case was filed or the De	30 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).	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 w	ith respect to cases commenced on or after the date of adjustment.
Credits. The amount of all payments on this claim has been credited for the	purpose of making this proof of claim. (See instruction #6)

Modified B10 (GCG) (4/13)

EXHIBIT "39"



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 according to 21 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): CHEN, HSIU CHU	☐ Check this box to indicate that this claim amends a previously filed claim.	
Name and address where notices should be sent:	Court Claim Number:	
CHEN, HSIU CHU	(If known) City Group	
1802 CALLE MADRID	Filed on:	
ROWLAND HEIGHTS	WAY 1 4 2015	
CA 91748		
_		
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 this claim. Attach copy of statement giving particulars.	to
	this come. Attach copy of statement giving particulars.	
Telephone number.	05-14-15 A09:15 IN	
Email address:		
1. Amount of Claim as of Date Case Filed: S 500,00	F1LED - 00824	
If all or part of the claim is secured, complete item 4.	District of Nevada	
If all or part of the claim is entitled to priority, complete item 5.	Ameri-Dream, LLC	
☐ Check this box if the claim includes interest or other charges in addition to	the principal amount of the claim. Attach a statement that itemizes interest or charges.	
2. Basis for Claim: SECURITY DEPOSITS ON A LEASE AGREEME (See instruction #2)	NT HELD IN DEBTOR'S TRUST ACCOUNT.	
	Debtor may have scheduled 3b. Uniform Claim Identifier (optional): account as:	
NA	N A	
	(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	Amount of Secured Claim: \$	
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 following categories, check the box specifying	-
☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). \$12,475*) earned within 18 the case was filed or the De	00 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).	ris earlier - 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).	s 1,500.00	_
governmental units – 11 U. 507 (a)(8).	S.C. §	
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w	ith 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	A DE PER

EXHIBIT "40"

Ш	Ш	Ш		Ш	H		ı
	Ш	Ш	Ш.	Ш	ł		ł

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	Check this box to indicate that this	claim amends a previously filed claim.
property): Karen Elizabeth Johnson	Court Claim Number: Case	#: 15-10110-Led
Name and address where notices should be sent:		(If known) City Group
Karen Johnson 5454 Ramirez St. N. Las Vegas, NV 89031	Filed on:	(38° 3°C)
N. Las Vegas, NV 89031	1-9-15	APR 2 8 2015
Telephone number: 702-243- Lele30 Email address: Kacenjohnson 825 Egmail.com		
Name and address where payment should be sent (if different from above):	☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.	
		FILED - 00227 District of Nevada
Telephone number:		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: Security deposits, Key, pct.		
(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 (Sec 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 Other Basis for perfection:		
Describe: all dopoeds should be in a trust		
Value of Property: S 1 8 2 5.		
Annual Interest Rate% □ Fixed or □ Variable Amount Unsecured: \$		
5. Amount of Claim Entitled to Priority, under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.		
□ Domestic support obligations under □ Wages, salaries, or commissions (up to □ Contributions to an employee benefit 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). \$12,475 •) earned within 180 days before plan − 11 Ū.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 — Up ther — Specify applicable paragraph purchase, lease, or rental of property or \$11 U.S.C. \$507 (a)(4).		
purchase, lease, or rental of property or \$10-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)		