#### EXHIBIT "1"

B10 (Official Form 10) (04/13)			•	
UNITED STATES BANKR	UPTCY COURT District of Ne	vada	PROOF OF	CLAIM
Name of Debtor: Case Number: AMERI-DREAM REALTY LLC 15-10110			FILE	D .
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):  Richard F. Chun		U.S. Bankruptcy Court District of Nevada		
		5/14/2015 Mary A. Schott, Clerk COURT USE ONLY		
Name and address where notices should be Richard F. Chun 21061 Granite Wells Drive Walnut, CA 91789 Telephone number: 6263776657	email: chun225@yahoo.com		Check this box if this cla amends a previously filed claim.  Court Claim Number:	50 (If known)
Name and address where payment should b		evada	Check this box if you are that anyone else has filed proof of claim relating to claim. Attach copy of sta giving particulars.	la. ·
Telephone number: email:				7.000
	ete item 4. If all or part of the claim is entitled to iterest or other charges in addition to the princip			or charges.
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is setoff, attach required reducted documents Nature of property or right of setoff: Describe: Rental Property Value of Property: S 230000.00 Annual Interest Rate (when case was file	s, and provide the requested information.  Real Estate Motor Vehicle O	included in secured	S 0.00	ime case was filed,
	under 11 U.S.C. §507(a). If any part of the c	laim falls into one of the follow	ing categories, check the box sp	ecifying the priority
and state the amount.  Domestic support obligations under 1 U.S.C. §507(a)(1)(A) or (a)(1)(B).	Wages, salaries, or commissions (up to earned within 180 days before the cas or the debtor's business ceased, which U.S.C. §507(a)(4).	e was filed	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 of services for personal, family, or household use −11 U.S.C. §507(a)(7.		ntal units = 11 U.S.C.	Other – Specify applicable paragraph of 11 U.S.C. §507(a)(_).	\$2400.00
*Amounts are subject to adjustment on 4/0	01/16 and every 3 years thereafter with respect	to cases commenced on or after t	he date of adjustment.	
6. Credits. The amount of all payments on	this claim has been credited for the nurpose of	making this proof of claim (See	instruction #6)	

### EXHIBIT "2"

B10 (Official Form 10) (04/13)				
UNITED STATES BANKRUPTCY COURT	DISTRICT OF NEVADA			PROOF ONYCLON
Name of Debtor: Ameri-Dream Realty, LLC	- 1	se Number: -10110-LED		MAY _ E 201E
NOTE: Do not use this form to make a claim fo You may file a request for payment of Name of Creditor (the person or other entity to w	an administrative expense according	to 11 U.S.C. § 503.	cy filing.	MAI -5 2015
YIQIN WANG				COURT USE ONLY
Name and address where notices should be sent:				neck this box if this claim amends a
YIQIN WANG c/o Michael M Lin. Esq. 5288 Spring Mtn Rd., Ste 103 Las Vegas, NV 89146			Court	usly filed claim.  Claim Number:
Telephone number: 702-871-9888	email; linlawgroup@gmail.com		Filed	on:
Name and address where payment should be sent Telephone number:	(if different from above): email:	_	any rela	eck this box if you are aware that one else has filed a proof of claim sting to this claim. Attach copy of ement giving particulars.
1. Amount of Claim as of Date Case Filed:	3607.00			
If all or part of your claim is secured, complete it	em 4			
If all or part of your claim is entitled to priority, o	complete item 5.			
Check this box if claim includes interest or ot	her charges in addition to the principa	al amount of claim. A	ttach a statement th	at itemizes interest or charges.
Basis for Claim: property deposit no (See instruction #2)	ot returned			
Last four digits of any number by which creditor identifies debtor:	stor may have scheduled account as	: 3b. Uniform C	laim Identifier (op	tional):
(See ins	truction #3a)	(See instruction	#3b)	
<ol> <li>Secured Claim (See instruction #4)</li> <li>Check the appropriate box if the claim is secured attach required redacted documents, and provide</li> </ol>			rearage and other cured claim, if any	charges, as of the time case was filed,
Nature of property or right of setoff: Real E Describe:	state Motor Vehicle Other	Basis for perfe	ection:	s
Value of Property: \$		Amount of Se		s
Annual Interest Rate: % Fixed or (when case was filed)	Variable	Amount Unse	cured:	s
5. Amount of Claim Entitled to Priority under the priority and state the amount.	er 11 U.S.C. §507(a). If any part of	the claim falls into o	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 commission camed within 180 days before the cithe debtor's business ceased, which U.S.C. §507(a)(4).	ase was filed or	Contributions to employee benefit p 11 U.S.C. §507(a)(	lan -
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 gove 11 U.S.C. §507(a)(8).		Other - Specify applicable paragrap 11 U.S.C. §507 (a)	oh of
*Amounts are subject to adjustment on 4/01/16 a	nd every 3 years thereafter with respo	ect to cases commence	ed on or after the do	ne of adjustment.
6. Credits. The amount of all payments on this	claim has been credited for the purpo	ose of making this pro	of of claim. (See in	struction #6)

## EXHIBIT "3"

B10 (Official Form 10) (04/13)				
UNITED STATES BANKR	UPTCY COURT District of Ne	evada	PROOF OF C	CLAIM
Name of Debtor: Case Number: AMERI-DREAM REALTY LLC 15-10110			FILE	D .
NOTE: Do not use this form to make a claim for an administrative expense that arises after the hankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.			U.S. Bankrupt District of N	cy Court levada
Name of Creditor (the person or other entity to whom the debtor owes money or property): KAREN CHUN		5/14/20 Mary A. Scho COURT USE	tt, Clerk	
Name and address where notices should be KAREN CHUN 21061 GRANITE WELLS DR WALNUT, CA 91789			Court Claim Number:	
Telephone number: 7143253101  Name and address where payment should Karen Chun		U.E	Check this box if you are	
1856 Sea Rocket Ln  Carlsbad, CA 92011 Telephone number: 7143253101	Dist	ILED - 00937 trict of Nevada ri-Dream, LLC	that anyone else has filed proof of claim relating to claim. Attach copy of state giving particulars.	this
Amount of Claim as of Date Case File     If all or part of the claim is secured, compl	lete item 4. If all or part of the claim is entitled to interest or other charges in addition to the princip	, , ,	a statement that itemizes interest or	charges.
Last four digits of any number by which creditor identifies debtor:	3a. Dehtor may have scheduled account as:	3b. Uniform Claim Identific	er (optional):	,.
	10530 Tuni Pueblo Ct (See instruction #3a)	(See instruction #3b)		** *,
setoff, attach required redacted documents		included in secure	ge and other charges, as of the tirl claim, if any:  S 0.00	me case was filed,
Nature of property or right of setoff: Describe: Rental Property Value of Property: S 200000.00	▼ Real Estate □ Motor Vehicle □ (	Basis for perfectio		
Annual Interest Rate (when case was fil	led) 3,25%  Fixed or Variable		d Claim: S2534.00	
		Amount Unsecure		
<ol><li>Amount of Claim Entitled to Priority and state the amount.</li></ol>	under 11 U.S.C. §507(a). If any part of the c	laim falls into one of the follo	wing categories, check the box spo	ecifying the priority
Domestic support obligations under U.S.C. §507(a)(1)(A) or (a)(1)(B).	Wages, salaries, or commissions (up to carned within 180 days before the case or the debtor's business ceased, which U.S.C. §507(a)(4).	e was filed	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)(7)	*	ntał units – 11 U.S.C.	Other - Specify applicable paragraph of 11 U.S.C. §507(a)(_).	S2534.00
*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 or	n this claim has been credited for the purpose of	making this proof of claim. (Se	e instruction #6)	• •

### EXHIBIT "4"

	RUPTCY COURT Dis	strict of Nevada		PROOF O	F CLAIM .
me of Debtor: Case Number: 15-10110			FILED		
NOTE: Do not use this form to make You may file a request for p	e a claim for an administrative exp payment of an administrative exp	pense that arises after the bankrupt ense according to 11 U.S.C. § 503.	tcy filing.	U.S. Bankru District of	ıptcy Court f Nevada
ame of Creditor (the person or other entity to whom the debtor owes money or property):    S/14/2015     Mary A. Schott, C     COURT USE ON		hott, Clerk			
Name and address where notices should be HLST GLOBAL LLC	be sent:		10	Check this box if this cl amends a previously fil	
Kathy Chen			1		
4771 Torrence		1	. ,	Court Claim Number:	(If know
Las Vegas, NV 89103		, ,	. ,	Court Claim Number: .	Filed on:
Telephone number. email:			1		
Name and address where payment should	be sent (if different from above)	FILED - 00932	Para Para	Check this box if you a that anyone else has file of claim relating to this Attach copy of statemen particulars.	ed a proof .
		District of Nevada	٠.		
		Ameri-Dream, LLC			
Telephone number: email:					
Check this box if the claim includes  Basis for Claim: Non-disbursed ren	interest or other charges in addition			atement that itemizes interest	or charges.
Check this box if the claim includes	interest or other charges in addition	on to the principal amount of the cla #2)	aim. Attach a st		or charges.
Check this box if the claim includes  Basis for Claim: Non-disbursed ren  Last four digits of any number by which creditor identifies	interest or other charges in additions and sec_dep_ (See instruction  3a. Debtor may have schedu	on to the principal amount of the cla #2)	aim. Attach a si		or charges.
Check this box if the claim includes Basis for Claim: Non-disbursed ren Last four digits of any number by which creditor identifies debtor:  4. Secured Claim (See instruction #4) Check the appropriate box if the claim is scioff, attach required redacted documen	as:  Secured by a lien on property or its, and provide the requested info	on to the principal amount of the cliff2)  led account  3b. Uniform Cla  (See instruction in a right of included armation.	aim. Attach a si tim Identifier ( #3b)	optional): and other charges, as of the	
Check this box if the claim includes Basis for Claim: Non-disbursed ren Last four digits of any number by which creditor identifies debtor:  4. Secured Claim (See instruction #4) Check the appropriate box if the claim is scioff, attach required redacted documen Nature of property or right of setoff: Describe: January 2015 non-disbursers.	interest or other charges in additions and see dep_ (See instruction as:    3a. Debtor may have schedulas:   (See instruction #3a)     (See instruction #3a)     s secured by a lien on property or its, and provide the requested info   Real Estate   Motor William Motor William   Motor William Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor William   Motor Will	on to the principal amount of the classical design of	aim. Attach a st aim Identifier ( #3b) t of arrearage d in secured cl	optional): and other charges, as of the aim, if any:	
Check this box if the claim includes  2. Basis for Claim: Non-disbursed ren  3. Last four digits of any number by which creditor identifies debtor:  4. Secured Claim (See instruction #4) Check the appropriate box if the claim is seioff, attach required redacted documen Nature of property or right of setoff: Describe: January 2015 non-disburse Value of Property: S 1950.00	interest or other charges in additions and sec dep_ (See instruction as:    3a. Debtor may have schedulas:   (See instruction #3a)     secured by a lien on property or the secured by a lien or pro	on to the principal amount of the classification (See instruction a right of include ormation.  Chicle Other Basis for the classification of the classification (See instruction of the classification).	aim. Attach a st aim Identifier ( #3b) t of arrearage d in secured cl	and other charges, as of the aim, if any:  \$ 1950.00  Money held in trust	
Check this box if the claim includes  2. Basis for Claim: Non-disbursed ren  3. Last four digits of any number by which creditor identifies debtor:  4. Secured Claim (See instruction #4) Check the appropriate box if the claim is scioff, attach required redacted documen Nature of property or right of setoff: Describe: January 2015 non-disburse	interest or other charges in additions and sec dep_ (See instruction as:    3a. Debtor may have schedulas:   (See instruction #3a)     secured by a lien on property or the secured by a lien or pro	on to the principal amount of the classical design of	aim. Attach a st  aim Identifier (  #3b)  t of arrearage d in secured cl  or perfection:	and other charges, as of the aim, if any:  S 1950.00  Money held in trust	
Check this box if the claim includes  2. Basis for Claim: Non-disbursed ren  3. Last four digits of any number by which creditor identifies debtor:  4. Secured Claim (See instruction #4) Check the appropriate box if the claim is scioff, attach required redacted documen Nature of property or right of setoff: Describe: January 2015 non-disburse Value of Property: S 1950.00  Annual Interest Rate (when case.was f	interest or other charges in additions and see dep_ (See instruction as:    3a. Debtor may have schedules:     (See instruction #3a)     (See instruction #3a)     s secured by a lien on property or its, and provide the requested info     Real Estate	on to the principal amount of the classical design of	aim. Attach a staim. Attach a	and other charges, as of the aim, if any:  S1950.00  Money held in trust  Claim: S1950.00  S0.00	time case was filed,
Check this box if the claim includes  2. Basis for Claim: Non-disbursed ren  3. Last four digits of any number by which creditor identifies debtor:  4. Secured Claim (See instruction #4) Check the appropriate box if the claim is seioff, attach required redacted documen Nature of property or right of setoff: Describe: January 2015 non-disburse Value of Property: S 1950.00	interest or other charges in additions and see dep_ (See instruction as:    3a. Debtor may have schedules:     (See instruction #3a)     (See instruction #3a)     s secured by a lien on property or its, and provide the requested info     Real Estate	on to the principal amount of the classical design of	aim. Attach a staim. Attach a	and other charges, as of the aim, if any:  S1950.00  Money held in trust	time case was filed,
Check this box if the claim includes  2. Basis for Claim: Non-disbursed ren  3. Last four digits of any number by which creditor identifies debtor:  4. Secured Claim (See instruction #4) Check the appropriate box if the claim is setoff, attach required redacted documen Nature of property or right of setoff: Describe: January 2015 non-disburse Value of Property: S 1950.00  Annual Interest Rate (when case was f	interest or other charges in additions and see dep_ (See instruction as:    3a. Debtor may have schedules:   (See instruction #3a)     (See instruction #3a)     s secured by a lien on property or its, and provide the requested info   Real Estate   Motor velocity   Motor velocit	on to the principal amount of the classical design of	aim. Attach a staim. Attach a	and other charges, as of the aim, if any:  S1950.00  Money held in trust	time case was filed,
Check this box if the claim includes  2. Basis for Claim: Non-disbursed ren  3. Last four digits of any number by which creditor identifies debtor:  4. Secured Claim (See instruction #4) Check the appropriate box if the claim is scioff, attach required redacted documen Nature of property or right of setoff: Describe: January 2015 non-disburse Value of Property: S 1950.00  Annual Interest Rate (when case was form of the second of the	interest or other charges in additions and see dep_ (See instruction as:    3a. Debtor may have schedules:   (See instruction #3a)     (See instruction #3a)     s secured by a lien on property or its, and provide the requested information and provide and provide the requested in the	on to the principal amount of the classification in the principal amount of the classification in the classifi	aim. Attach a staim. Identifier ( #3b)  It of arrearage d in secured claim of Secured Cont Unsecured:	and other charges, as of the aim, if any:  \$1950.00	time case was filed, specifying the priority Amount entitled to

## EXHIBIT "5"

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		ши		128		100	ш	ш
III BIHI I		ш		100	1 II BI E	E IIII.	ш	ill
THE REST			ши		11 11 11	a indi	ш	ш
							ш	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 an expense occording to 11 U.S.C. § 503.	ses after the bankruptcy filing. You may file a request for payment of an administrative			
Name of Creditor (the person or other entity to whom the Debtor owes money or	☐ Check this box to indicate that this claim amends a previously filed claim.			
property): Michael Xu, leah Xy	Court Claim Number:			
Name and address where notices should be sent:	Court Carm Manuel.			
11318 N Stone Creek Dr.	(If known)			
Dunlap 12 61525	Filed on:			
Juning	MAR 2 0 2015			
Telephone number: 309 253 - 4550				
Email address: MAYA SI 60 GMail Com				
Email address: My xu 81 @ 9 mail · 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			
11318 N Stone Creek Dr.	this claim. Attach copy of statement giving particulars.			
Dunlap 1L 61525	FILED - 00081			
	District of Nevada			
Telephone number: 309 253 - 4550	Ameri-Dream, LLC			
1. Amount of Claims as of Date Case of led: \$ 2945.				
If all or part of the claim is secured, complete item 4.				
If all or part of the claim is entitled to priority, complete item 5.				
, , , , , , , , , , , , , , , , , , , ,	the principal amount of the claim. Attach a statement that itemizes interest or charges.			
2. Basis for Claim: VEPSSITS & FEN TU (110) (See instruction #2)	rty (Security, Key, and Cleaning deposits)			
	n. Debtor may have scheduled 3b. Uniform Claim Identifier (optional):			
Ameri-Dream Realty LLC				
	(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 an attach required reducted documents, and provide the requested information.	Amount of arrearage and other charges, as of the time case ight of setoff, was filed, included in secured claim, if any:			
	Motor Vehicle			
Other	Basis for perfection:			
Describe: Deposits of rental property	<del>}</del>			
Value of Property: S	Amount of Secured Claim: 5 2 9 45			
Annual Interest Rate % □ Fixed or □	Variable			
(when case was filed)	Amount Unsecured: \$			
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).  Use of the case was filed or the D	80 days before plan = 11 U.S.C. § 507 (a)(5).			
☑ Up to \$2,775* of deposits toward business ceased, whicheve	r is earlier - Other - Specify applicable paragraph  Amount entitled to priority:			
services for personal, family, or	of 11 U.S.C. § 507 (a)(_).			
governmental units – 11 U.S.C. g 507 (a)(7).				
507 (a)(8).				
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter v				
<ol><li>Credits. The amount of all payments on this claim has been credited for the</li></ol>	purpose of making this proof of claim. (See instruction #6)			

## EXHIBIT "6"

*******					
UNITED ST	ATES BANKRUPTCY COURT FOR THE	DISTRICT	OF NEVADA		PROOF OF CLAIM
Name of Deb	tor: Ameri-Dream Realty, LLC Case No. 1	5-10110-LEE	)		
	se this form to make a claim for an administrative e ling to 11 U.S.C. § 503.	expense that ar	ises after the ba	nkruptcy filing. You may	file a request for payment of an administrative
property):	or (the person or other entity to whom the Debtor or	wes money or	Court Claim		claim amends a previously filed claim.
	ess where notices should be sent.				(If known) State City Group Lies
	y wong Glendora Valley Legas, NV 89178		Filed on:		MAR 1 8 2015
Telephone nur Email address	562-881-3158 Jaimy W168@ Yahi	vo cour			
Name and add	ess where payment should be sent (if different from 2 as above	above):		box if you are aware tha tach copy of statement g	at anyone else has filed a proof of claim relating to giving particulars.
,				i	FILED - 00078
Telephone nur	ber:				District of Nevada Ameri-Dream, LLC
Email address	of Claim as of Date Case Filed: \$ 2650		<u> </u>		
1		, 00			
If all or p	art of the claim is secured, complete item 4.				
If all or ;	art of the claim is entitled to priority, complete item	5.			
	this box if the claim includes interest or other charge		the principal a		
	Claim: Seatrity Deposits i	WAS /	roldin	g in Brok	er Trust Account.
$\overline{}$	digits of any number by which creditor identifies	debtor: 3s	a. Debtor may account as:	have scheduled	3b. Uniform Claim Identifier (optional):
		-	(0:-		
4 6 4	Cl. 1 (Co. instruction #4)		(See ins	truction #3a)	(See instruction #3b)
Check th	Claim (See instruction #4) e appropriate box if the claim is secured by a lien on uired redacted documents, and provide the requester		ight of setoff,		ge and other charges, as of the time case n secured claim, if any:
Nature o	f property or right of setoff: Real Est  Other	tate 🗅 N	Motor Vehicle	Basis for perfection:	
Describe					
Value of	Property: S			Amount of Secured	Claim: s_2650.00
	nterest Rate% ☐ Fixed se was filed)	or 🗆 '	Variable	Amount Unsecured:	: \$
	of Claim Entitled to Priority under 11 U.S.C. § 50 ity and state the amount.	07 (a). If any p	art of the claim	falls into one of the fo	llowing categories, check the box specifying
	S.C. § 507 (a)(1)(A) or (a)(1)(B). \$12,475*) e	ries, or commis arned within 18 s filed or the De	30 days before	☐ Contributions to an en plan = 11 U.S.C. § 50	
purch		ased, whichever		Other – Specify applie of 11 U.S.C. § 507 (a)	
	nold use = 11 U.S.C. 6 507 (a)(7). Taxes or pe	nalties owed to al units - 11 U.			•
.*Amoun	s are subject to adjustment on 4/1/16 and every 3 yes	ars thereafter w	ith respect to co	ases commenced on or a	fter the date of adjustment.
6. Credits.	The amount of all payments on this claim has been of	redited for the	purpose of mak	ing this proof of claim. (	See instruction #6)

### EXHIBIT "7"

		19410   1960   WILSON   19810   WA JUL 198   1980
UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA	PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LE	D .	
OTE: Do not use this form to make a claim for an administrative expense that a expense occording to 11 U.S.C. § 503.	rises after the bankruptcy filing. You may file	e a request for payment of an administrative
ame of Creditor (the person or other entity to whom the Debtor owes money or operty):	☐ Check this box to indicate that this cla	im amends a previously filed claim.
DEL XIAN	Court Claim Number:	
BFI QIAN C/O Ruby Chang		(If known) Sen City Group
3045 Lindell Rd	Filed on	(3)
Las Vegas. NV 89146		APR 1 7 2015
elephone number: 702 - 677 - 02 & 2		
mail address: Oa 2 engre Pachell. Net		
ame and address where payment should be sent (if different from above):	☐ Check this box if you are aware that a this claim. Attach copy of statement givin	nyone else has filed a proof of claim relating to ng particulars.
Aorie.	FILED	D - 00164
		of Nevada
elephone number: mail address:	Ameri-D	ream, LLC
Amount of Claim as of Date Case Filed: \$ 4794.40  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.		
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.  A Check this box if the claim includes interest or other charges in addition to the charge in add	_	ymets to me MT-Bank ret
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.  A Check this box if the claim includes interest or other charges in addition to the charge of the claim:  Basis for Claim: Broker Keep my Tenant Secure (See instruction #2)	in. Debtor may have scheduled 31	
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.  Marcheck this box if the claim includes interest or other charges in addition to the charges in addition to	wity dep + Rental pa	ymets to me AT - Bank ret
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.  **A Check this box if the claim includes interest or other charges in addition to the claim: **Broker Keep my Tenant Sec (See instruction #2)*  Last four digits of any number by which creditor identifies debtor: 3	ia. Debtor may have scheduled account as:  (See instruction #3a)	ymets to me HAT - Bank retained by the service optional):  (See instruction #3b)
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 claim: **Basis for Claim: **Broker Keep my Tenant Sec (See instruction #2)*  Last four digits of any number by which creditor identifies debtor: 3	ia. Debtor may have scheduled account as:  (See instruction #3a)  Amount of arrearage a	his Ch's to me LAT - Bank retained.  b. Uniform Claim Identifier (optional):  (See instruction #3b)  and other charges, as of the time case
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 claim: **Boker Keep my Tenant Sec (See instruction #2)*  Last four digits of any number by which creditor identifies debtor:   **B 2 / 9  Secured Claim (See instruction #4)  Check the appropriate box if the claim is secured by a lien on property or a statch required redacted documents, and provide the requested information.  Nature of property or right of setoff: **M Real Estate	ia. Debtor may have scheduled account as:  (See instruction #3a)  Amount of arrearage a was filed, included in set.	b. Uniform Claim Identifier (optional):  (See instruction #3b)  und other charges, as of the time case ecured claim, if any:
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 charges in addition to t	(See instruction #3a)  Amount of arrearage a was filed, included in set  Motor Vehicle  Basis for perfection:	ymets to me LAT - Bank retained by the second of the continual of the second of the se
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.  **Echeck this box if the claim includes interest or other charges in addition to the claim: **Echeck Keep my Tenant Sec (See instruction #2)*  Last four digits of any number by which creditor identifies debtor:  **B 2 / 9  Secured Claim (See instruction #4)  Check the appropriate box if the claim is secured by a lien on property or a statch required redacted documents, and provide the requested information.  Nature of property or right of setoff: **A Real Estate	(See instruction #3a)  Amount of arrearage a was filed, included in set  Motor Vehicle  Basis for perfection:	ymets to me HAT - Bank retained by the Claim Identifier (optional):  (See instruction #3b)  Ind other charges, as of the time case ecured claim, if any:  S 4794, 49
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 claim: **Broker Keep my Tenant Sec (See instruction #2)*  Last four digits of any number by which creditor identifies debtor: 3  **B 2 / 9  Secured Claim (See instruction #4)  Check the appropriate box if the claim is secured by a lien on property or an attach required redacted documents, and provide the requested information.  Nature of property or right of setoff: **A Real Estate	ia. Debtor may have scheduled account as:  (See instruction #3a)  Amount of arrearage a was filed, included in set was filed, included in set was filed.  Basis for perfection:  Wegas NV 89148  Amount of Secured Cla	See instruction #3b)  (See instruction #3b)  and other charges, as of the time case ecured claim, if any:  Supply 40  Sup
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.  **A. Check this box if the claim includes interest or other charges in addition of the claim:  **Basis for Claim:** **Broker Keep my Tenant Sec (See instruction #2)*  **Last four digits of any number by which creditor identifies debtor:  **B. 2	ia. Debtor may have scheduled account as:  (See instruction #3a)  Amount of arrearage a was filed, included in set was filed, included in set was filed.  Amount of Secured Classification was a filed.  Amount of Secured Classification was filed.	ymets to me 147 - Bank retained by 1's Ck's 70 me.  b. Uniform Claim Identifier (optional):  (See instruction #3b)  and other charges, as of the time case ecured claim, if any:  5 4794, 49  s belowing categories, check the box specifying
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 claim: **Broker Keep my Texant Sec (See instruction #2)*  Last four digits of any number by which creditor identifies debtor: 3  **B 2 1 9  Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a attach required redacted documents, and provide the requested information.  Nature of property or right of setoff: **ARRADE Las** Value of Property: \$ 350,000.**  Annual Interest Rate (when case was filed)  Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any if the priority and state the amount.  Domestic support obligations under 11 U.S.C. § 507 (a). If any if the priority and state the amount.  Wages, salaries, or commissing the priority and state the amount.  Wages, salaries, or commissing the priority and state the amount.	ia. Debtor may have scheduled account as:  (See instruction #3a)  Amount of arrearage a was filed, included in set was filed, inc	wymets to me hat - Bank retained by the control of
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 claim: **Broker Keep my Texant Sec (See instruction #2)**  Last four digits of any number by which creditor identifies debtor: 3  **B 2	ia. Debtor may have scheduled account as:  (See instruction #3a)  Amount of arrearage a was filed, included in set was filed, inc	wing categories, check the box specifying  by the second of the time case  s 4794, 49  s 4  wing categories, check the box specifying  oyec benefit a)(5).  Amount entitled to priority:
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 claim: **Broker Keep my Texant Sec (See instruction #2)*  Last four digits of any number by which creditor identifies debtor: 3  **B 2 / 9  Secured Claim (See instruction #4)* Check the appropriate box if the claim is secured by a lien on property or a statuch required reducted documents, and provide the requested information.  Nature of property or right of setoff: **ARE Estate**  Describé: **233 Rusty Plank Are Las*  Value of Property: \$ 350,000.**  Annual Interest Rate (when case was filed)  Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any if 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 11 U.S.C. § 507 (a)(4).	(See instruction #3a)  Amount of arrearage a was filed, included in set was	Nymets to me 14 - Bank retained by Mis Ck's 70 me.  b. Uniform Claim Identifier (optional):  (See instruction #3b)  and other charges, as of the time case ecured claim, if any:  5 4794, 49  s being categories, check the box specifying oyee benefit (1)(5).  Amount entitled to priority:
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.  **A Check this box if the claim includes interest or other charges in addition to the claim: **Booker Keep my Tenant Sec (See instruction #2)*  Last four digits of any number by which creditor identifies debtor: 3  **B 2 / 9  Secured Claim (See instruction #4)* Check the appropriate box if the claim is secured by a lien on property or a statuch required redacted documents, and provide the requested information.  Nature of property or right of setoff: **A Real Estate	Amount of Secured Cla  Variable  Amount Unsecured:  Amount Unsecured:  part of the claim falls into one of the follow issions (up to lebtor's er is earlier — Other — Specify applicable of 11 U.S.C. § 507 (a)  O.S.C. §	Nymets to me 147 - Bank refs.  h. Uniform Claim Identifier (optional):  (See instruction #3b)  and other charges, as of the time case ecured claim, if any:  S. 4794, 40  wing categories, check the box specifying over benefit (1/5).  Amount entitled to priority:  S. 4794, 40  Amount entitled to priority:  S. 4794, 40

## EXHIBIT "8"

in the second se	
UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LED	
NOTE: Do not use this form to make a claim for an administrative expense that or expense according to 11:U.S.C. § 503.	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): Xxxxy LM  Name and address where notices should be sent:	Court Claim Number:  (If known) Caden City Group
Xiang Lu 110 John Krik Ct.	Filed on: (If known) SP 1 3 2015
Campbell, CA 95008 Telephone, number: 408-786-6873	
Email address: Xinny MD gmall. Com  Name and address where payment should be sent (if different from above):	Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.
Telephone number:	FILED - 00745 District of Nevada Ameri-Dream, LLC
Email address:	
1. Amount of Claim as of Date Case Filed: S [200.00.	-
If all or part of the claim is secured, complete item 4:	•
If all or part of the claim is entitled to priority, complete item 5.	
☐ Check this box if the claim includes interest or other charges in addition t	to the principal amount of the claim. Attach a statement that itemizes interest or charges.
2. Basis for Claim: Security deposit of the	u rental real estate
(See instruction #2) 3. Last four digits of any number by which creditor identifies debtor: 3	ia. Debtor may have scheduled 3b. Uniform Claim Identifier (optional):
8219	scount as:
<u> </u>	(See instruction #3a) (See instruction #3b)
Secured Claim (See instruction #4)     Check the appropriate box if the claim is secured by a lien on property or a attach required reducted documents, and provide the requested information.	Amount of arrearage and other charges, as of the time case right of scioff, was filed, included in secured claim, if any:
and the state of t	Motor Vehicle
Describe: 5208 Shadow Valley St. LAS Veg	NV 89148 Basis for perfection:
Value of Property: S 180,000,00	Amount of Secured Claim: s 1200.00
August Interest Rate 4.0 % Fixed or (when case was filed)	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  11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B):  Up to \$2,775* of deposits toward  Wages, salaries, or comm \$12,475*) camed withing the case was filed or the business ceased, whichever	180 days before plan − 11 U.S.C. § 507 (a)(5).  Debitor, s  er is carlier − □ Other − Specify applicable paragraph  Amount entitled to priority:
purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).  11 U.S.C. § 507 (a)(4).  12 Taxes or penalties owed governmental units – 11 1 507 (a)(8).	
*Añóunts 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	

Modified B10 (GCG) (4/13)

# 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	F 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 according to 11 U.S.C. § 503.	es 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): Hweichen Lily Chang & Yin Fang Wang	☐ Check this box to indicate that this claim amends a previously filed claim.			
Name and address where notices should be sent:	Court Claim Number:			
Hweichen Lily Chang & Yin Fang	(If known) widen City Group			
Wang	Filed on:			
260-08 Kensington Pl.	MAY 1 4 2015			
Great Neck, NY 11020				
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			
Same	this claim. Attach copy of statement giving particulars.			
Same	FILED - 00866			
	District of Nevada			
Telephone number: Email address:	Ameri-Dream, LLC			
1. Amount of Claim as of Date Case Filed: \$ 850.00				
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	he principal amount of the claim. Attach a statement that itemizes interest or charges.			
2. Basis for Claim: Security deposit for 6161 Mean				
(See instruction #2)				
3. Last four digits of any number by which creditor identifies debtor: 3a,	Debtor may have scheduled 3b. Uniform Claim Identifier (optional):			
	(See instruction #3a) (See instruction #3b)			
<ol> <li>Secured Chaim (See instruction #4)         Check the appropriate box if the claim is secured by a lien on property or a rig attach required reducted documents, and provide the requested information.     </li> </ol>	Amount of arrearage and other charges, as of the time case at of setoff, was filed, included in secured claim, if any:			
	otor Vehicle			
Describe:	Basis for perfection:			
Describe:				
Value of Property: S	Amount of Secured Claim: \$			
Annual Interest Rate% ☐ Fixed or ☐ V. (when case was filed)	riable			
	t of the claim falls into one of the following categories, check the box specifying			
the priority and state the amount.	tente en Constitution de la cons			
Domestic support obligations under  11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).  \$12,475*) earned within 180 the case was filed or the Del	days before plan - 11 U.S.C. § 507 (a)(5).			
Up to \$2,775* of deposits toward business ceased, whichever	s earlier - Other - Specify applicable paragraph Amount entitled to priority:			
purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4).	of 11 U.S.C. § 507 (a)(_).			
household use - 11 U.S.C. § 507 (a)(7).				
governmental units – 11 U.S 507 (a)(8).	C. §			

Modified B10 (GCG) (4/13)

#### EXHIBIT "10"

05-14-15 A09:16 IN



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): Qian Yan Li	☐ Check this box to indicate that this claim amends a previously filed claim.			
Name and address where notices should be sent:	Court Claim Number:			
Vegas Pro	(If known) sen City Grow			
Attn: Tiffany Chau	Filed on:			
6276 Spring Mountain Rd. #100 Las Vegas, NV 89146	MAY 14 mm			
(702) 217-9389				
Telephone number:				
Email address:				
Name and address where payment should be sent (if different from above):	☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.			
Same	FILED - 00881			
	District of Nevada			
Telephone number:	Ameri-Dream, LLC			
Email address:  1. Amount of Claim as of Date Case Filed: \$ 3,156.00				
	<del></del>			
If all or part of the claim is secured, complete item 4.				
If all or part of the claim is entitled to priority, complete item 5.				
	the principal amount of the claim. Attach a statement that itemizes interest or charges.			
2. Basis for Claim: This claim pertains to a residence at 4370	Golden Ring Lane. See attached statement for further details.			
(See instruction #2)				
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)			
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 ri attach required reducted documents, and provide the requested information.	ight of setoff, was filed, included in secured claim, if any:			
	Motor Vehicle			
Describe: January 2015 and February 2015 rent	payments Basis for perfection:			
Value of Property: S 1,906.00	Amount of Secured Claim: \$_1,906.00			
Annual Interest Rate% O Fixed or O Variable  (when case was filed) Amount Unsecured: \$				
<ol> <li>Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any p the priority and state the amount.</li> </ol>	art of the claim falls into one of the following categories, check the box specifying			
☐ Domestic support obligations under ☐ Wages, salaries, or commit ☐ U.S.C. § 507 (a)(1)(A) or (a)(1)(B).  \$12,475*) carned within 18 the case was filed or the D	80 days before plan - 11 U.S.C. § 507 (a)(5). ebtor's			
Up to \$2,775* of deposits toward business ceased, whichever purchase, lease, or rental of property or services for personal, family, or D Taxes or penalties owed to	of 11 U.S.C. § 507 (a)			
household use - 11 U.S.C. § 507 (a)(7).  1 lakes to Petiatics owed to governmental units - 11 U. 507 (a)(8).				
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter w	with respect to cases commenced on or after the date of adjustment			
	ran respect to cases commenced on or agier me time of augusticine.			