#### EXHIBIT "1"

B10 (Official Form 10) (04/13)				
UNITED STATES BANKR	UPTCY COURT District of Ne	vada	PROOF OF	CLAIM
Name of Debtor: AMERI-DREAM REALTY LLC		Case Number:   15-10110	FILE	D
	r claim for an administrative expense that arise. Tyment of an administrative expense according		U.S. Bankrup District of I	
Name of Creditor (the person or other entity WEN CHUN WANG	y to whom the debtor owes money or property):		2/19/2 Mary A. Scho COURT USI	ott, Clerk
Name and address where notices should be WEN CHUN WANG 92 CLAREMONT AVE SANTA CLARA, CA 95051	sent:		Check this box if this cla amends a previously filed	d claim.
Telephone number: 3107958634	email: JUICYWANG@GMAIL.COM		Court Claim Number:	(If known) Filed on:
Name and address where payment should b	FILED - 00041 District of Nevada Ameri-Dream, LLC	FEB 1 9 2015	Check this box if you are that anyone else has filed of claim relating to this c Attach copy of statement particulars.	la proof laim.
1. Amount of Claim as of Date Case File	d: \$1300.00			
	ete item 4. If all or part of the claim is entitled t	, ,		
	terest or other charges in addition to the princip	nal amount of the claim. Attach a	statement that itemizes interest of	r charges.
2. Basis for Claim:tenant security de		<del> </del>		
Last four digits of any number by which creditor identifies debtor:     8219	3a. Debtor may have scheduled account as:  wenchun wang (See instruction #3a)	3b. Uniform Claim Identifier (See instruction #3b)	· (optional):	
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: Value of Property: S	, and provide the requested information.  Real Estate Motor Vehicle (	included in secured	S	ime case was filed, -
5. Amount of Claim Entitled to Priority and state the amount.	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
Domestic support obligations under I U.S.C. §507(a)(1)(A) or (a)(1)(B).	Wages, salaries, or commissions (up to earned 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 – II 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	*	ntal units - 11 U.S.C.	Other - Specify applicable paragraph of 11 U.S.C. §507(a)(_).	51300.00
	01/16 and every 3 years thereafter with respect			
6. Credits. The amount of all payments or	this claim has been credited for the purpose of	making this proof of claim. (See	instruction #6)	

### EXHIBIT "2"

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA	PROOF OF CLAIM
Name of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LE	D	
NOTE: Do not use this form to make a claim for an administrative expense that a expense according to 11 U.S.C. § 503.	rises after the bankruptcy filing. You m	ay file a request for payment of an administrative
Name of Creditor (the person or other entity to whom the Debtor owes money or property): Wen Chun Wang	Court Claim Number:	is claim amends a previously filed claim.
Name and address where notices should be sent:  Wen Chun Wang		(If known) Jed City Group
92 Claremont Are	Filed on:	APR 2 0 2015
Santa Clara. 64.95051		
Telephone number: 3/0 . 795 . 86 3 4		
Email address: JUICY WAN & @ gmail : UM  Name and address where payment should be sent (if different from above):	Check this box if you are aware the this claim. Attach copy of statement	nat arryone else has filed a proof of claim relating to giving particulars.
		FILED - 00190
	D	istrict of Nevada
Telephone number. Email address:	Ar	neri-Dream, LLC
1. Amount of Claim as of Date Case Filed: S 300 . 99		
	_	
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 of the claim includes interest or other charges in addition to		ach a statement that itemizes interest or enarges.
2 Basis for Claim: temant Security depos (See instruction 82)	<u> </u>	
	Debtor may have scheduled account as:	3b. Uniform Claim Identifier (optional):
8 2 19	Nen Chun Wang	
4 Second City (Section 18)	(See instruction #3s)	(See instruction #3b) ge and other charges, as of the time case
<ol> <li>Secured Claim (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>		in secured cloim, if any:
Nature of property or right of setoff:   ☐ Real Estate ☐ M ☐ Other	fator Vehicle Besis for perfection	
Describe:		
Value of Property: S	Amount of Secured	Claim: S
Annual Interest Rate% © Fixed or © Vi (when case was filed)	ariable Amount Unsecured:	s 0
<ol> <li>Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any pa the priority and state the amount.</li> </ol>	ert of the cinim falls into one of the fo	llowing categories, check the box specifying
☐ Domestic support obligations under  11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).  Wages, salaries, or commiss \$12,475*) carned within 180 the case was filed or the Deb	D days before plan - II U.S.C. § 50' btor's	7 (a)(5).
60 Up to \$2,775* of deposits toward business ceased, whichever in purchase, lease, or rental of property or 11 U S.C. § 507 (a)(4).	is earlier - Other - Specify applic of 11 U.S.C. § 507 (a)	cable paragraps
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)		\$ /300.004
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter wit	th respect to cases commenced on or at	fier the date of adjustment.
	The state of the s	

# EXHIBIT "3"

AMER 1 - DREAM REALTY LLC 4875 NEVSO DR. 4875 NEVSO DR. 4875 NEVSO DR. 4876 NEVSO DR. 5876 NEVSO NEV BROOK NEVSO NEVS	B10 (Official Form 10) (04/13)			
MARY - DREAM REALTY LLC 4875 NEVSO DR.  US VEGAS, NV 89103  NOTE Do not use this form in make a claim for an administrative expense that arises after the backriges filling. You may file a request fip pagement of an administrative expense coording to 11 USC § 590.  Name and address where notices should be sent.  ELAINE NG  Horse and address where notices should be sent.  ELAINE NG  HOS THE AVEIUE APT # 12 A  BROOKLYN, N 11232  creat.  (SAME AS ABOVE)  Telephone number:  (II number:  (SAME AS ABOVE)  Telephone number:  (II number:  (SAME AS ABOVE)  Telephone number:  (II number:  (I	UNITED STATES BANKRUPTO	CY COURT		PROOF OF CLAIM
NOTE Do not use this form in make a claim for an administrative expense continue to the backriptory filting. You may filt a required for payment of an administrative expense according to 1 (U.S.C. § 301.)  Name of Creditor (the persons other easily to whom the debior owes money or property):  ELAINE NG  Roar and address where notices should be sent.  ELAINE NG  AND THE AS ABOVE  Telephone number:  (SATHE AS ABOVE)  FILLED -00045  Telephone number:  (SATHE AS ABOVE)  Telephone number:  (S	Name of Debtor:  AMERI-DREAM RE 4875 NEVSO DA LAS VEGAS NV	ALTY LLC		
Name and address where notices should be sent:  ELAINE NG 4015 7th Act 1230  enail.  1230  Court Claim Number:  (1/1	NOTE: Do not use this form to make a c may file a request for payn Name of Creditor (the person or other ent	laim for an administrative expense that arises of nent of an administrative expense according to 1	U.S.C. § 503.	V Same of the same of
Telephone number:    Comparison   Comparison	ELAINE NG	W- ADT#IDA	hoo com	Check this box if this claim amends a previously filed claim.
File D - 00045   District of Nevada Ameri-Dream, LLC	(SAME AS A	tBOVE)	Saiden City Group	relating to this claim Attach copy of
Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that themizes interest or charges.		,,-	FEB 2 5 2013	/
3a. Debtor may have scheduled account as:  82/9  4. Secured Claim (See instruction #3a)  4. Secured Claim (See instruction #3b)  Amount of arrearage and other charges, as of the time case was file included in secured claim, if any:  Check the appropriate box if the claim is secured by a filen on property or a right of setoff, attach required redacted documents, and provide the requested information.  Nature of property or right of setoff:	OCheck this box if the claim includes in	terest or other charges in addition to the principal		tach a statement that itemizes interest or charges.
## Secured Claim (See instruction #3a)  4. Secured Claim (See instruction #3b)  5. Amount of arrearage and other charges, as of the time case was filed included in secured claim, if any:  6. See instruction #3b)  6. Amount of arrearage and other charges, as of the time case was filed included in secured claim. If any:  7. Secured Claim (See instruction #3b)  8. Amount of arrearage and other charges, as of the time case was filed included in secured claim. If any:  8. Amount of arrearage and other charges, as of the time case was filed included in secured claim. If any:  9. Amount of arrearage and other charges, as of the time case was filed included in secured claim. If any:  9. Amount of arrearage and other charges, as of the time case was filed included in secured claim. If any:  9. Amount of arrearage and other charges, as of the time case was filed included in secured claim. If any:  9. Amount of arrearage and other charges, as of the time case was filed included in secured claim. If any:  9. Amount of arrearage and other charges, as of the time case was filed included in secured claim. If any:  9. Amount of arrearage and other charges, as of the time case was filed included in secured claim. If any:  9. Amount of arrearage and other charges, as of the time case was filed included in secured claim. If any:  9. Amount of arrearage and other charges, as of the time case was filed included in secured claim. If any:  9. Amount of arrearage and other charges, as of the time case was filed included in secured claim. If any:  9. Amount of arrearage and other charges, as of the time case was filed included in secured claim. If any:  9. Amount of arrearage and other claim and included in secured claim. If any:  9. Amount of arrearage and other claim, if any:  9. Amount of arrearag	Basis for Claim: SECURIT (See instruction #2) (744)	Y DEPOSIT FROM TEN SPOTTED EAGLE)	4NT (IN ESC) 6/19/2	eon) LEASING 1014 - \$130/2015
Amount of arrearage and other charges, as of the time case was file included in secured claim, if any:  Check the appropriate box if the claim is secured by a fien on property or a right of setoff, attach required redacted documents, and provide the requested information.  Sature of property or right of setoff: Real Estate Motor Vehicle Other Basis for perfection:  Value of Property: S				dentifier (optional):
Describe:  Value of Property: \$	Check the appropriate box if the claim is	secured by a lien on property or a right of	Amount of arrearage	claim, if any:
Amount Interest Rate		Real Estate OMotor Vehicle OOther	Basis for perfection:	
The priority and state the amount.  Differential Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B)  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)(8).  *Amounts are subject to adjustment on 4/01/16 and every 3 years thereafter with respect to cases commenced on or ofter the date of adjustment.	Annual Interest Rate % Of its	ed or ①Variable		
U.S.C. § 507 (a)(1)(A) or (a)(1)(B)  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)  Tother—Specify applicable paragraph of 11 U.S.C. § 507 (a)(8).  Tother—Specify applicable paragraph of 11 U.S.C. § 507 (a)(8).  *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.		ity under 11 U.S.C. § 507 (a). If any part of th	e claim falls into one of t	the following categories, check the box specifying
purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(8).  services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).  *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.		earned within 180 days before the case wa debtor's business ceased, whichever is ear	filed or the employ	ee benefit plan - C. § 507 (a)(5). Amount entitled to priority:
	purchase, lease, or rental of property or services for personal, family, or househo	11 U.S.C. § 507 (a)(8).	applica	ble paragraph of
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)	*Amounts are subject to adjustment on a	1/01/16 and every 3 years thereafter with respect	to cases commenced on o	or after the date of adjustment.
	6. Credits. The amount of all payments	s on this claim has been credited for the purpose	of making this proof of ci	arm. (See instruction #6)

### EXHIBIT "4"

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT O	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): ELAINE NG	☐ Check this box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent	Court Claim Number:
ELAINE NG	(If known) Sin Group, LC
4015 7th AVENUE APT#12A BROOKLYN, NY 11232	Filed on:
BROOKLYN, NY 11232	( MAY \ 2 2 2 2
- A17 100 90/0 1	
Telephone number: 917 - 605 - 9868   Email address: alaine y/cn & yahoo.com  Name and address where payment should be sent (if different from above):	
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 - 00674
Telephone number: Email address:	District of Nevada Ameri-Dream, LLC
1. Amount of Claim as of Date Case Filed: S 1, 3 25,00	
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.	
	o the principal amount of the claim. Attach a statement that itemizes interest or charges.
2. Basis for Claim: SECURITY DEPOSIT. FROM TEN (See instruction #2) ( 6.19 2014 - 5/30/2015	MANT (IN ESCHOW) 744 SPOTTED EAGLE
6/11/2	. Debtor may have scheduled 3b. Uniform Claim Identifier (optional):
8 2 1 9	account as:
	(See instruction #3a) (See instruction #3b)
4. Secured Claim (See instruction #4)	Amount of arrearage and other charges, as of the time case
Check the appropriate box if the claim is secured by a lien on property or a ri attach required redacted documents, and provide the requested information.	ight of setoff, was filed, included in secured claim, if any:
	Motor Vehicle
Describe:	Basis for perfection:
Value of Property: S	Amount of Secured Claim: S
Annual Interest Rate% ☐ Fixed or ☐ `` (when case was filed)	Variable Amount Unsecured: \$
	art of the claim falls into one of the following categories, check the box specifying
Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). \$12,475*) earned within 1	80 days before plan - 11 U.S.C. § 507 (a)(5).
the case was filed or the D  Up to \$2,775* of deposits toward business ceased, whicheve  purchase, lease, or rental of property or	A mount entitled to priority:
services for personal, family, or Taxes or penalties owed to governmental units - 11 U.S.C. § 507 (a)(7).	
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter v	with respect to cases commenced on or after the date of adjustment.

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

Modified B10 (GCG) (4/13)

## EXHIBIT "5"

HERRIN	A COLOR LINES	1001	IEILIER:	WIRM	ANT INC
9191		Ш			11 (1)
	18H H 18H	Ш	шш		ша

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): Hong Feng Hu	Check this box to indicate that this claim amends a previously filed claim.					
Name and address where notices should be sent:	Court Claim Number:					
Hong Feng. Hu	(If known)					
9422 Alderbury St.	Filed on:					
9422 Alderbury St. Cypress, CA 96630						
Telephone number: 714-995-9257 Email address: hhu 8 @ yahoo, Com						
Name and address where payment should be sent (if different from above):	☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.					
	FILED - 00295					
Telephone number:	District of Nevada					
Email address:  1. Amount of Claim as of Date Case Filed: S / 8 75	. Ameri-Dream, LLC					
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: <u>Deposit on rental property 90</u> (See instruction #2)	028 Wine Cellar					
3. Last four digits of any number by which creditor identifies debtor: 3a	Debtor may have scheduled 3b. Uniform Claim Identifier (optional):     account as:					
<u> 7 9 5 1                                </u>	long Feng Hu					
	(See instruction #3a) (See instruction #3b)					
<ol> <li>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.     </li> </ol>	Amount of arrearage and other charges, as of the time case ght of setoff, was filed, included in secured claim, if any:					
, , , , , , , , , , , , , , , , , , , ,	Motor Vehicle					
Describe:	Basis for perfection:					
Value of Property: S	Amount of Secured Claim: S					
Annual Interest Rate% ☐ Fixed or ☐ V (when case was filed)	/ariable Samount Unsecured: \$ 1875					
	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	0 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).	is earlier - Other - Specify applicable paragraph					
services for personal, family, or	of 11 U.S.C. § 507 (a)(_).					
household use = 11 U.S.C. § 507 (a)(7).  Takes of pertaines ower to governmental units = 11 U.5 507 (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)					

## EXHIBIT "6"

LINESTI B	HOUR BET	I I (TALE SI I I I I I	an mn nn	
S III WEED O	BALLE ILE	A IHA KIMI	an ne ne	
THE RESERVE		1 IHH & IKI	JIBI JIKI JIB	1018 O O O O
1 LURIJERU U		H KUU E WU	AU 1801 126	

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.	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	Check this box to indicate that this claim amends a previously filed claim.				
property): Hong Feng Hu Name and address where notices should be sent:	Court Claim Number:				
Hong Feng Hu	(If known) atten City Group				
Hong Feng Hu 9422 Alderbury St. Cypress, CA 90630	Filed on:				
Cypress, CA 90630	MAI 1 1 2015				
•					
Telephone number: 714-995-9257 Email address: hhu8@yohoo.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.				
	this dain. Attach copy of statement grang particulars.				
· ·	FILED - 00602				
Telephone number:	District of Nevada				
Email address:	' Ameri-Dream, LLC				
1. Amount of Claim as of Date Case Filed: \$\\ 1875					
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: Deposit on rental property	9028 Wine Cellar				
(See instruction #2)	1028 Wille CCIIGY				
3. Last four digits of any number by which creditor identifies debtor:	ia. Debtor may have scheduled  3b. Uniform Claim Identifier (optional): account as:				
7 9 5 1	Hong Feng Hu				
<u> </u>	(See instruction #3a) (See instruction #3b)				
<ol> <li>Secured Claim (See instruction #4)         Check the appropriate box if the claim is secured by a lien on property or a rattach required reducted documents, and provide the requested information.     </li> </ol>	Amount of arrearage and other charges, as of the time case right of sctoff, was filed, included in secured claim, if any:				
	Motor Vehicle				
□ Other	Basis for perfection:				
Describe:	*				
Value of Property: \$	Amount of Secured Claim: \$				
Annual Interest Rate% ☐ Fixed or ☐ (when case was filed)	Variable Amount Unsecured: \$ 1875				
<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>	part of the claim falls into one of the following categories, check the box specifying				
☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).  ☐ Wages, salaries, or commi \$12,475*) earned within 1 the case was filed or the D	80 days before plan - 11 U.S.C. § 507 (a)(5).				
DUp to \$2,775* of deposits toward business ceased, whicheve purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4).	er is earlier — Other - Specify applicable paragraph  Amount entitled to priority:				
services for personal, family, or	1813				
household use – 11 U.S.C. § 507 (a)(7).  Solution of periantes ower it governmental units – 11 U.S.C. § 507 (a)(8).					
*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter v	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					

### EXHIBIT "7"

10000		Ш	Ш	I		ш	Ш	I	Ш	H	Ш	Ш
		Ш	Ш	ı	ш	н	Ш	ı	Ш	1	ш	Ш
	Ш	Ш	Ш	ı	Ш	М	Ш	Ш	Ш	ı	Ш	ш

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF NEVAL	DA 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 agises after the expense according to 11 U.S.C. § 503.	bankruptcy filing. You may file a request for payment of an administrative
property): Mark T. AGUILAR	his box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent:	im Number:
480 Higgins Drive	-15-101 10-LED (15 known)
LATTER W. MANULONA 21113 Filed on:	senary 5, 2015 (MAR 202015)
Telephone number: 410-533-7807 Email address:	
	his box if you are aware that anyone else has filed a proof of claim relating to Attach copy of statement glying particulars.
480 Hagins Dr. 2013	ť
000000000000000000000000000000000000000	ESTHER AGUILAR
Telephone number: 410-533-7807 Email address: aglafanceomanst.net	
1. Amount of Claim as of Date Case Filed: S 3, 400.00	Tal Standard de
If all or part of the claim is secured, complete item 4.	FILED - 00084
If all or part of the claim is entitled to priority, complete item 5.	District of Nevada Ameri-Dream, LLC
☐ Check this box if the claim includes interest or other charges in addition to the princip	
2. Basis for Claim: Security deposit from tenant (1)	
3. Last four digits of any number by which creditor identifies debtor: 3a. Debtor a account	nay have scheduled 3b. Uniform Claim Identifier (optional):
	instruction #3a) (See instruction #3b)
<ol> <li>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.     </li> </ol>	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:	
Describe:	Basis for perfection:
Value of Property: S	Amount of Secured Claim: S
Annual Interest Rate% ☐ Fixed or ☐ Variable (when case was filed)	Amount Unsecured: \$
<ol> <li>Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the cl the priority and state the amount.</li> </ol>	aim 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 commissions (up to \$12,475*) earned within 180 days before the case was filed or the Debtor's	re plan – 11 U.S.C. § 507 (a)(5).
purchase, lease, or rental of property or business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).	Other − Specify applicable paragraph of 11 U.S.C. § 507 (a)(_).  Amount entitled to priority:  \$ 3,400 00
services for personal, family, 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).	3
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. §	

## EXHIBIT "8"

UNI	ITED STATES BANKRUPTCY COURT FOR THE DISTRICT	OF NEVADA		PROOF OF CLAIM
Nan	ne of Debtor: Ameri-Dream Realty, LLC Case No. 15-10110-LE	D		
	E: Do not use this form to make a claim for an administrative expense that a ense according to 11 U.S.C. § 503.	rises ofter the ba	nkruptcy filing. You may	file a request for payment of an administrative
	te of Creditor (the person or other entity to whom the Debtor owes money or erty):	1		claim amends a previously filed claim.
	e and address where notices should be sent:	Court Claim	Number:	City
477	Scott Koekosz 39 E Abate #303 Las Vegas NV 89122	Filed on:		MAR 1 3 2015
	phone number: 702-469-2217			
Nan	ne and address where payment should be sent (if different from above):		box if you are aware the tach copy of statement p	at anyone else has filed a proof of claim relating to giving particulars.
Tele	phone number:			FILED - 00072 District of Nevada Ameri-Dream, LLC
Ema	Amount of Claim as of Date Case Filed: S /000 —	1		
2.	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:  SECURITY DEPOSIT C	. 0	unount of the claim. Atta	nch a statement that itemizes interest or charges.
3.	(See instruction #2)  Last four digits of any number by which creditor identifies debtor:	3a. Debtor may account as:	y have scheduled	3b. Uniform Claim Identifier (optional):
	<del>-</del>	(See ins	struction #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 redacted documents, and provide the requested information.			ge and other charges, as of the time case in secured claim, if any:
	Nature of property or right of setoff: ☐ Real Estate ☐ Other	Motor Vehicle	Basis for perfection	
	Describe:			
	Value of Property: S		Amount of Secured	Claim: S
	Annual Interest Rate% ☐ 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 the priority and state the amount.	part of the clain		
	☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).  ☐ Wages, salaries, or comm \$12,475*) earned within 1	180 days before	☐ Contributions to an er plan – 11 U.S.C. § 50	
	Let us \$2,775* of deposits toward business ceased, whicheve purchase, lease, or rental of property or 11 U.S.C. § 507 (a)(4).		Other - Specify appli 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.C. § 507 (a)(8).			\$_ <i>[</i> (ac)
	*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter	with respect to c	ases commenced on or a	after the date of adjustment.
6.	Credits. The amount of all payments on this claim has been credited for the	e purpose of mak	ing this proof of claim.	(See instruction #6)

Modified B10 (GCG) (4/13)

# EXHIBIT "9"

B10 (Official Form 10) (04/13)		
UNITED STATES BANKRUPTCY COURT		PROOF OF CLAIM
Name of Debtor:	Case Number:	City Grave
AMERI-DREAM REALTY LLC	BK-S-15- 10110-LED	MAR 3 0 2015
NOTE: Do not use this form to make a claim for an administrative expense that arismay file a request for payment of an administrative expense according		
Name of Creditor (the person or other entity to whom the debtor owes money or proper GARY J. HAWKING	erty):	COLUMN INC. ONLY
Name and address where notices should be sent:  11523 Sun Ray Court San DIEGO, CA 92131		COURT USE ONLY  Check this box if this claim amends a previously filed claim.  Court Claim Number:  (If known)
Telephone number: 858-231-8881 email: GAKY@HAWKIN	us-Z4u. Com	Filed on:
Name and address where payment should be sent (if different from above):  Same As Above		Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.
Telephone number: email:		
1. Amount of Claim as of Date Case Filed: \$ 1450 5		
If all or part of the claim is secured, complete item 4.		ED - 00104
If all or part of the claim is entitled to priority, complete item 5.		ict of Nevada -Dream, LLC
Check this box if the claim includes interest or other charges in addition to the prin	cipal amount of the claim: Attach a	statement that itemizes interest or charges.
2. Basis for Claim: SECURITY DEPOSITS IN TRUST (See instruction #2) PROPERTY MANAGEMENT	AC ASSOCIATED	WITH PLACE
THE THE THE THE TENT	( 18) BEG 4007	HONDERSON, NY
3. Last four digits of any number by which creditor identifies debtor:	as: 3b. Uniform Claim Identifi	er (optional):
82.19 (See instruction #3a)	(See instruction #3b)	ther 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 setoff, attach required redacted documents, and provide the requested information.	included in secured claim, i	
	Barla for confusions	3
Nature of property or right of setoff: O Real Estate O Motor Vehicle O Other Describe:	Basis for perfection:	
Value of Property: S	Amount of Secured Claim:	s
Annual Interest Rate%	Amount Unsecured:	· s
5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the priority and state the amount.	f the claim falls into one of the foll	owing categories, check the box specifying
☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).  ☐ Wages, salaries, or commissions (u earned within 180 days before the case debtor's business ceased, whichever is 11 U.S.C. § 507 (a)(4).	was filed or the employee bene	efit plan –
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).	nental units - Other - Spa applicable par 11 U.S.C. § 50	agraph of
*Amounts are subject to adjustment on 4/01/16 and every 3 years thereafter with resp	pect 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 purpo	ose of making this proof of claim. (S	ee instruction #6)

#### EXHIBIT "10"

B10 (Official Form 10) (04/13)			
UNITED STATES BANKRUPT	CY COURT		PROOF OF CLAIM
Name of Deblor: AMERI-DREA		BK-S-15- 10110-LED	MAR 3 0 2015
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.		MAIT 50 date	
Name of Creditor (the person or other entity to whom the debtor owes money or property):  GARY J. HAWKING		):	
Name and address where notices should be sent:			COURT USE ONLY  Check this box if this claim amends a
11523 Sun RAY. COURT SAN DIEGO, CA 92131			previously filed claim.  Court Claim Number:
Telephone number: 858-231-8881 email: GAKY@HAWKINS-ZHU. Com			(If known) Filed on:
Name and address where payment should be sent (if different from above):		Check this box if you are aware that	
Same	As Above		anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.
Telephone number:	email:		
1. Amount of Claim as of Date Case F	iled: \$ /450 =		
if all or part of the claim is secured, complete item 4. FILED - 00104			
If all or part of the claim is entitled to priority, complete item 5.  District of Nevada  Ameri-Dream, LLC			
Check this box if the claim includes in	terest or other charges in addition to the principa	amount of the claim. Attach a	statement that itemizes interest or charges.
SECURIT	Y DEPOSITS IN TENST A	Mc Account	11
2. Basis for Claim: OCCORIT	TOPETONIO DIE TROST I	IC ISSOCIATED	, with
(See instruction #2) Prope	Y DEPOSITS IN TRUST I	Or 189 BELMONT	CANYON PLACE
Last four digits of any number by which creditor identifies debtor:	RTY MANAGEMENT (  3a. Debtor may have scheduled account as:		HEX DERSON, NY
3. Last four digits of any number			HEX DERSON, NY
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 as:	3b. Uniform Claim Identif	ier (optional): HODES SOV, NY  other charges, as of the time case was filed,
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.	3a. Debtor may have scheduled account as:  (See instruction #3a) secured by a lien on property or a right of	3b. Uniform Claim Identif	ier (optional): HEDES SOV, NY other charges, as of the time case was filed, if any:
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 documen Nature of property or right of setoff:	3a. Debtor may have scheduled account as:  (See instruction #3a)  secured by a lien on property or a right of its, and provide the requested information.	3b. Uniform Claim Identif  (See instruction #3b)  Amount of arrearage and included in secured claim,	other charges, as of the time case was filed, if any:
3. Last four digits of any number by which creditor identifies debtor:  8219  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:	3a. Debtor may have scheduled account as:  (See instruction #3a)  secured by a lien on property or a right of its, and provide the requested information.  Real Estate  Motor Vehicle  Other	3b. Uniform Claim Identif  (See instruction #3b)  Amount of arrearage and included in secured claim,  Basis for perfection:	other charges, as of the time case was filed, if any:  S
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 documen Nature of property or right of setoff: Describe:  Value of Property: S	3a. Debtor may have scheduled account as:  (See instruction #3a)  secured by a lien on property or a right of its, and provide the requested information.  Real Estate  Motor Vehicle  Other	3b. Uniform Claim Identif  (See instruction #3b)  Amount of arrearage and included in secured claim,  Basis for perfection:  Amount of Secured Claim  Amount Unsecured:	other charges, as of the time case was filed, if any:  S
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 documen Nature of property or right of setoff: Describe:  Value of Property: S	3a. Debtor may have scheduled account as:  (See instruction #3a)  secured by a lien on property or a right of its, and provide the requested information.  Real Estate	3b. Uniform Claim Identif  (See instruction #3b)  Amount of arrearage and included in secured claim,  Basis for perfection:  Amount of Secured Claim  Amount Unsecured:  e claim falls into one of the following still the complex of the complex	other charges, as of the time case was filed, if any:  S
3. Last four digits of any number by which creditor identifies debtor:  8219  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:  Value of Property: S	3a. Debtor may have scheduled account as:  (See instruction #3a)  secured by a lien on property or a right of its, and provide the requested information.  Real Estate	3b. Uniform Claim Identification (See instruction #3b).  Amount of arrearage and included in secured claim,  Basis for perfection:  Amount of Secured Claim  Amount Unsecured:  c claim falls into one of the following still file or the interproper benefiter—  11 U.S.C. § 5	other charges, as of the time case was filed, if any:  S
3. Last four digits of any number by which creditor identifies debtor:  8219  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:  Value of Property: S	3a. Debtor may have scheduled account as:  (See instruction #3a)  secured by a lien on property or a right of its, and provide the requested information.  Real Estate	3b. Uniform Claim Identification (See instruction #3b) \(^1\)  Amount of arrearage and included in secured claim,  Basis for perfection:  Amount of Secured Claim  Amount Unsecured:  c claim falls into one of the following siled or the liter — 11 U.S.C. § 5  all units —	other charges, as of the time case was filed, if any:  S