JAMESTOWN SUN | FRIDAY, JULY 18, 2025 | CLASSIFIEDS | A11

PUBLIC NOTICE

Preferred Capi- 0 tal Stock Aggregate Write-ins for 0 Other Than Special Surplus Funds Surplus Notes Gross Paid in and 0 62,419,922 Contributed Surplus Unassigned 164,388,545 funds (šurplus) Total Capital and 230,308,467 Surplus Total Liabilities, 349 845 321 Capital And Surplus NORTH DAKOTA BUSINESS

ONLY FOR THE YEAR 2024

OTATE OF NODTH DAK		
Earned Total Accident and Health Direct Losses Incurred	0	
Total Accident and Health Direct Premiums	0	
Total Direct Losses ncurred	-2,330	
Total Direct Premiums Earned	17,867	

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

I, Jon Godfread, Commissioner of Insurance of the State of North Da-kota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office

IN TESTIMONY WHEREOF. I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025

(SEAL). JON GODFREAD

JON GODFREAD Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement ex-

hibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and

WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GOD-**FREAD,** Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and represen-tatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025

(SEÁL) JON GODFREAD Commissioner of Insurance

(Jul. 11 & 18 & 25, 2025)

35181 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the

01	uic
Executive Risk In In the state of Del	
Total Assets Total Liabilities Aggregate	8,167,862,888 6,227,470,483
write-ins for special surplus funds	0
Common Capital Stock	5,000,000
Preferred Capi- tal Stock	0
Aggregate Write-ins for Other Than Special Surplus	0

PUBLIC NOTICE

(SEAL) JON GODFREAD Commissioner of Insurance (Jul. 11 & 18 & 25, 2025) 22748 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the Pacific Employers Insurance Company In the state of Pennsylvania Total Assets Total Liabilities 1,005,805,278 83,341,707 Aggregate write-ins 0 for special surplus funds Common Capital 6,000,000 Stock Preferred Capi-0 tal Stock Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes 0 Gross Paid in 334,229,512 and Contributed Surplus Unassigned funds (surplus) 582,234,059 Tota

Total Capital and	922,463,571
Surplus	
Total Liabilities,	
Capital	1.005.805.278
And Surplus	, , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , , ,

NORTH DAKOTA BUSINESS ONLY

FOR THE YEAR 2024 Total Direct

STATE OF NORTH D		
Losses Incurred		
Health Direct		
and	0	
Total Accident		
Earned		
Premiums		
Health Direct		
and	0	
Total Accident	•	
Incurred		
Losses	-51,462	
	E1 400	
Earned Total Direct		
Earned	9,920	
Premiums	9,925	

DAKOTA

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE I, Jon Godfread, Commissioner of Insurance of the State of North Da-kota, do hereby certify that the fore-going is a true Abstract of Statement, as officially filed by the Company in as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have

hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL)

JON GODFREAD

Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

COMPANY'S CERTIFICATE OF AUTHORITY WHEREAS, the above corporation

duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and WHEREAS, the said company has

filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GOD FREAD, Commissioner of Insurance of the State of North Dakota, pursu-ant to the provisions of said laws, do ant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and represen-tatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEÁL)

JON GODFREAD Commissioner of Insurance

(Jul. 11 & 18 & 25, 2025)

PUBLIC NOTICE

business of insurance and WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid

said, NOW THEREFORE, I, JON GOD-FREAD, Commissioner of Insurance of the State of North Dakota, pursu-ant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and represen-tatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026.

A.D. 2026. IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL)

JON GODFREAD Commissioner of Insurance

(Jul. 11 & 18 & 25, 2025)

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0
516,957,352
1,418,435,053
1,940,392,405
8,167,862,888

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

Total Direct 13.997 Premiums Earned Total Direct Losses -9.458Incurred Total Accident and 0 Health Direct Premiums Earned Total Accident and 0 Health Direct Losses Incurred

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

OF INSURANCE I, Jon Godfread, Commissioner of Insurance of the State of North Da-kota, do hereby certify that the fore-going is a true Abstract of Statement, as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have becaute out my head and offixed

hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SFAL

JON GODFREAD

Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY WHEREAS, the above corporation

duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of business of this State regarding the business of insurance and WHEREAS, the said company has

filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GOD-FREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025

10030 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the Westchester Fire Insurance Company In the state of Pennsylvania Total Assets Total Liabilities 261,108,006 203,693,312 Aggregate write-ins for special 0 surplus funds Common Capital 5,000,100 Stock Preferred Capi-0 tal Stock Aggregate Write-ins for 0 Other Than Special Surplus

0

40,959,563

11,455,031

261,108,006

Funds

and

Surplus Notes

Gross Paid in

Contributed

Surplus Unassigned

Surplus Total Liabilities,

And Surplus

Capital

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

funds (surplus) Total Capital and 57,414,694

Total Direct Premiums 707,850 Total Direct 16.838 Losses Incurred Total Accident and 0 Health Direct Premiums Earned Total Accident 0 Health Direct Losses Incurred

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

I, Jon Godfread, Commissioner of Insurance of the State of North Da-kota, do hereby certify that the fore-going is a true Abstract of Statement, as officially filed by the Company in

this office. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025

JON GODFREAD

Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF

AUTHORITY WHEREAS, the above corporation

duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the

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