North Dakota Insurance Legals

FOR THE YEAR ENDING					
DECEMBER 31, 2023					
of the					
EquiTrust Life Insurance Company					
In the state of Arizona					
Total Assets	\$27,192,992,566				
Total Liabilities	\$24,774,619,565				
Aggregate write-ins for					
special surplus funds	0				
Common Capital Stock	\$3,000,000				
Preferred Capital Stock	0				
Aggregate write-ins for					
Other than special surplus	0				
Surplus Notes	0				
Gross paid in and contributed surplus	\$784,666,773				
Unassigned funds (Surplus)	\$1,630,706,228				
Total Capital and Surplus	\$2,418,373,001				
Total Liabilities, Capital And Surplus	\$27,192,992,566				
NORTH DAKOTA BUSINESS ONLY					
FOR THE YEAR 202	3				
Total Direct Premiums Earned	\$18,136,449				
Total Direct Losses Incurred	\$4,721,978				
Total Accident and Health Direct					
Premiums Earned	0				
Total Accident and Health Direct					
Losses Incurred	0				
STATE OF NORTH DAKOTA					
OFFICE OF THE COMMISSIONER					
OF INSURANCE					

I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Comp

In STESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL). JON GODFREAD

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, 2023 conformable to the requirements of the laws of this State regarding the business

or 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, NOW THEREFORE, I, JON GODFREAD, Commissioner provisions of said laws, do hereby certify that the above named 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. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2024

JON GODFREAD

oner of Insurance (May 8-15-22, 2024)

ABSTRACT OF STATEMENT
FOR THE YEAR ENDING
DECEMBER 31, 2023
of the
Travelers Indemnity Company of America (The)

In the state of Connecticut	
Total Assets	\$818,865,114
Total Liabilities	\$634,921,785
Aggregate write-ins for	
special surplus funds	\$332,706
Common Capital Stock	\$5,250,000
Preferred Capital Stock	0
Aggregate write-ins for	
Other than special surplus	0
Surplus Notes	0
Gross paid in and contributed surplus	\$47,400,000
Unassigned funds (Surplus)	\$130,960,623
Texal Control and Consider	6102 042 220

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023 Total Direct Losses Incurred
Total Accident and Health Direct
Premiums Earned Total Accident and Health Direct STATE OF NORTH DAKOTA

\$818,865,114

Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Com Into Strice.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL).

JON GODFREAD 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, 2023 conformable to the requirements of the laws of this State regarding the business 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, NOW THEREFORE, I, JON GODFREAD, Commissioner provisions of said laws, do hereby certify that the above named 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. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my

oner of Insurance (May 8-15-22, 2024)

ION CODEREAD

FOR THE YEAR ENDING DECEMBER 31, 2023

Total Liabilities Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate write-ins for Other than special surplus Surplus Notes \$25,000,000 Gross paid in and contributed surplus \$66,521,984 \$130,478,003 \$1,214,615,649 Unassigned funds (Surplus)
Total Capital and Surplus
Total Liabilities, Capital And Surplu

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023 Total Direct Premiums Earned Total Direct Losses Incurred Total Accident and Health Direct Premiums Earned Total Accident and Health Direct STATE OF NORTH DAKOTA

I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Com In STESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL). JON GODFREAD

> 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, 2023 conformable to the requirements of the laws of this State regarding the business

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, NOW THEREFORE, I, JON GODFREAD, Commissioner provisions of said laws, do hereby certify that the above named provisions of said taws, an nereby 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. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my

hand and seal at Bismarck this first day of May, A.D., 2024 JON GODFREAD

ner of Insurance (May 8-15-22, 2024)

State Farm Mutual Automobile Insurance Company In the state of Illinois

FOR THE YEAR ENDING

DECEMBER 31, 2023

Total Liabilities \$86,036,223,003 cial surplus funds \$111,418,257,388 Aggregate write-ins for Other than special surplus \$10,000,000 Surplus Notes ss paid in and contributed surplu Unassigned funds (Surplus) Total Capital and Surplus

\$220,788,078,183 NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023 Total Direct Premiums Earned Total Direct Losses Incurred Total Accident and Health Direct Premiums Earned \$4,216,940 Total Accident and Health Direct

\$3,806,709 STATE OF NORTH DAKOTA

I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Com-Int STETIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL).

JON GODFREAD

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, 2023 conformable to the requirements of the laws of this State regarding the business

or 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, NOW THEREFORE, I, JON GODFREAD, Commissioner provisions of said laws, do hereby certify that the above named 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. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my

hand and seal at Bismarck this first day of May, A.D., 2024 JON GODFREAD

ioner of Insurance (May 8-15-22, 2024)

24740

FOR THE YEAR ENDING DECEMBER 31, 2023 Travelers Property Casualty Company of America In the state of Connecticut

Total Liabilities Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock \$155,551 Aggregate write-ins for Other than special surplus Surplus Notes Gross paid in and contributed surplu \$378.052.652 \$93,664,908 \$476,913,111 \$1,038,376,167

FOR THE YEAR 2023 Total Direct Premiums Earned
Total Direct Losses Incurred
Total Accident and Health Direct Premiums Earned

Total Accident and 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 Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Compa In TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL).

> STATE OF NORTH DAKOTA
> OFFICE OF THE COMMISSIONER
> OF INSURANCE
> COMPANY'S CERTIFICATE OF AUTHORITY

JON GODFREAD

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, 2023 conformable to the
requirements of the laws of this State regarding the business

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 incompliance with the requirements of incompliance. provisions of said laws, do hereby certify that the above named mpany 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. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my

hand and seal at Bismarck this first day of May, A.D., 2024 ION CODEREAD

oner of Insurance (May 8-15-22, 2024)

63274

23353 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023

Meridian Security Insurance Company In the state of Indiana Total Assets Total Liabilities \$137,608,122 Aggregate write-ins for special surplus funds Common Capital Stock \$5,000,000 Preferred Capital Stock Aggregate write-ins for Other than special surplus Gross paid in and contributed surplus \$25,609,636 Unassigned funds (Surplus) \$1,592,753 Total Capital and Surplus Total Liabilities, Capital And Surplu Total Direct Premiums Earned

Premiums Earned
Total Accident and Health Direct Losses Incurred
STATE OF NORTH DAKOTA

\$1,570,199

Total Direct Losses Incurred

Total Accident and Health Direct

OFFICE OF THE COMMISSIONER
OF INSURANCE
I, Jon Godfread, Commissioner of Insurance of the State of
North Dakota, do hereby certify that the foregoing is a true
Abstract of Statement, as officially filed by the Company in IN TESTIMONY WHEREOF. I have hereunto set my hand

and affixed the seal of this office at Bismarck, the first day of flay, A.D. 2024 (SEAL). r 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, 2023 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 with the requirements of insurance law aforesaid. NOW THEREFORE, I. JON GODFREAD, Commissio 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 until the 30th day of April, A.D. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my

hand and seal at Bismarck this first day of May, A.D., 2024 (SEAL) JON GODFREAD (May 8-15-22, 2024)

ABSTRACT OF STATEMENT

DECEMBER 31, 2023	
of the	
The Cincinnati Indemnity Company	
In the state of Ohio	
Total Assets	\$183,224,735
Total Liabilities	\$53,249,536
Aggregate write-ins for	
special surplus funds	0
Common Capital Stock	\$3,600,000
Preferred Capital Stock	0
Aggregate write-ins for	
Other than special surplus	0
Surplus Notes	0
Gross paid in and contributed surplus	\$21,600,000
Unassigned funds (Surplus)	\$104,775,199
Total Capital and Surplus	\$129,975,199
Total Liabilities, Capital And Surplus	\$183,224,735
NORTH DAKOTA BUSINESS O	NLY
FOR THE YEAR 2023	
TO LIDY OF THE L	61 002 200

Total Direct Premiums Earned Total Direct Losses Incurred Total Accident and Health Direct Premiums Earned Total Accident and 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 Dakota, do hereby certify that the foregoing is a true
Abstract of Statement, as officially filed by the Company in IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL).

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

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, 2023 conformable to the requirements of the laws of this State regarding the business WHEREAS, the said company has filed in this office a duly

certified copy of its charter with certificate of organization in NOW THEREFORE, I. JON GODFREAD, Com company is fully empowered through its authorized agents and representatives, to transact its appropriated business of IN TESTIMONY WHEREOF, I have hereunto set m

(May 8-15-22, 2024)

23280 ABSTRACT OF STATEMENT

	of the			
	SAFECO Insurance Company of America			
	In the state of New Hampshire			
	Total Assets	\$7,256,669,93		
	Total Liabilities	\$5,012,606,45		
	Aggregate write-ins for			
	special surplus funds	\$25,141,05		
	Common Capital Stock	\$5,000,00		
	Preferred Capital Stock			
	Aggregate write-ins for			
	Other than special surplus			
	Surplus Notes			
	Gross paid in and contributed surplus	\$733,869,02		
	Unassigned funds (Surplus)	\$1,480,053,40		
	Total Capital and Surplus	\$2,244,063,48		
	Total Liabilities, Capital And Surplus	\$7,256,669,93		
NORTH DAKOTA BUSINESS ONLY				
FOR THE YEAR 2023				

Total Direct Losses Incurred \$8,272,653 Total Accident and Health Direct Premiums Earned
Total Accident and Health Direct Losses Incurred
STATE OF NORTH DAKOTA
STATE COMMISSION

Total Direct Premiums Earned

OFFICE OF THE COMMISSIONER
OFFICE OF INSURANCE
I, Jon Godfread, Commissioner of Insurance of the State of
North Dakota, do hereby certify that the foregoing is a true
Abstract of Statement, as officially filed by the Company in IN TESTIMONY WHEREOF. I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL).

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

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, 2023 conformable to the requirements of the laws of this State regarding the business

WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in NOW THEREFORE, L. JON GODFREAD, Com and representatives, to transact its appropriated business of IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2024

(May 8-15-22, 2024)

25127 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023

State Auto Property & Casualty Insurance Company
In the state of Iowa
Total Assets \$343
Total Liabilities \$158 \$343 974 785 Aggregate write-ins for special surplus funds Common Capital Stock \$5,077,200 Preferred Capital Stock Aggregate write-ins for Other than special surplus Gross paid in and contributed surplus \$144,184,034 Unassigned funds (Surplus) Total Capital and Surplus
Total Liabilities, Capital And Surplu \$185,654,529

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023 Total Direct Premiums Earned Total Direct Losses Incurred \$2,653,564 Total Accident and Health Direct

Premiums Earned
Total Accident and 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 Dakota, do hereby certify that the foregoing is a true
Abstract of Statement, as officially filed by the Company in

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL).

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

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 year ending December 31, 2023 conformable to the

WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in NOW THEREFORE, I. JON GODFREAD, Comp 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 IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2024

(May 8-15-22, 2024)

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023

Fidelity & Guaranty Life Insurance Company In the state of Iowa Total Assets \$56 365 632 169 Total Liabilities Aggregate write-ins for special surplus funds Common Capital Stock \$3,000,000 Preferred Capital Stock Aggregate write-ins for Other than special surplus Surplus Notes Gross paid in and contributed surplus \$2,148,811,290 \$1,263,289,505 \$2,009,473,406

Total Direct Premiums Earned Total Direct Losses Incurred \$12,430,572 Total Accident and Health Direct Premiums Earned
Total Accident and Health Direct Losses Incurred
STATE OF NORTH DAKOTA

OFFICE OF THE COMMISSIONER
OFFICE OF THE COMMISSIONER
OF INSURANCE
I, Jon Godfread, Commissioner of Insurance of the State of
North Dakota, do hereby certify that the foregoing is a true
Abstract of Statement, as officially filed by the Company in IN TESTIMONY WHEREOF. I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL).

ssioner of Insurance
STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF 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, 2023 conformable to the requirements of the laws of this State regarding the business

WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in NOW THEREFORE, I. JON GODFREAD, Commissi 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 IN TESTIMONY WHEREOF, I have hereunto set my

ION GODFREAD

(May 8-15-22, 2024)

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023

Total Liabilities \$386,022,513 Aggregate write-ins for special surplus funds \$7,000,000 Common Capital Stock Preferred Capital Stock Aggregate write-ins for Other than special surplus Surplus Notes Gross paid in and contributed surpl \$187,239,291 6604,021,691

FOR THE YEAR 2023 Total Direct Premiums Earned Total Direct Losses Incurred Total Accident and Health Direct Premiums Earned \$2,489,401 Total Accident and 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 Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL).

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

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, 2023 conformable to the requirements of the laws of this State regarding the business of incurrence and

or 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, NOW THEREFORE, I, JON GODFREAD, Commissioner 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. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my

hand and seal at Bismarck this first day of May, A.D., 2024 JON GODFREAD

JON GODFREAD

ner of Insurance (May 8-15-22, 2024)

61301 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023 Ameritas Life Insurance Corporation

In the state of Nebraska Total Assets Total Liabilities \$27 217 336 113 Aggregate write-ins for special surplus funds Common Capital Stock \$2,500,000 Preferred Capital Stock Aggregate write-ins for Other than special surplus -\$24,650 \$50,000,000 Surplus Notes Gross paid in and contributed surplus \$431,449,425 | Sand in and collinous | Sand in and collinous | Sand in and collinous | Sand in and surplus | Sand in and Sa

Total Direct Losses Incurred \$2,314,138 Total Accident and Health Direct Premiums Earned
Total Accident and Health Direct \$4,415,830 \$2,830,849 Losses Incurred
STATE OF NORTH DAKOTA

IN TESTIMONY WHEREOF I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL).

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

WHEREAS, the above corporation duly organized under

JON GODFREAD (May 8-15-22, 2024)

ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2023**

In the state of Texas Total Assets \$229,771,113,454 Total Liabilities \$220,841,805,210 Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate write-ins for Other than special surplus \$5,409,889,559 \$2,233,569,406 Total Capital and Surplus \$1,285,849,279

Total Liabilities, Capital And Surplu \$222,127,654,489 NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023
Total Direct Premiums Earned
Total Direct Losses Incurred
Total Accident and Health Direct \$172,959 Premiums Earned Total Accident and Health Direct

May, A.D. 2024 (SEAL).

Total Accident and Health Direct
Losses Incurred \$341,053

STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE
I, Jon Godfread, Commissioner of Insurance of the State of
North Dakota, do hereby certify that the foregoing is a true
Abstract of Statement, as officially filed by the Company in
this office. this office.

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

JON GODFREAD ioner 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, 2023 conformable to the requirements of the laws of this State regarding the business

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, NOW THEREFORE, I, JON GODFREAD, 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. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my

(SEAL)
JON GODFREAD (May 8-15-22, 2024)

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023

In the state of Michigan Total Assets Total Liabilities Preferred Capital Stock Aggregate write-ins for Other than special surplus Surplus Notes Gross paid in and contributed surplus Unassigned funds (Surplus) Total Capital and Surplus \$222,742,051 Total Liabilities, Capital And Surplu-\$829,613,401 NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023
Total Direct Premiums Earned
Total Direct Losses Incurred Total Accident and Health Direct

\$207,889 Premiums Earned Total Accident and Health Direct Total Accident and 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 Dakota, do hereby certify that the foregoing is a true
Abstract of Statement, as officially filed by the Company in
this office.

this office.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL). JON GODFREAD

ioner of Insurance
STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE 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, 2023 conformable to the nents of the laws of this State regarding the business 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, NOW THEREFORE, I, JON GODFREAD, 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. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my (SEAL)
JON GODFREAD er of Insurance (May 8-15-22, 2024)

71854 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023

In the state of Ohio Total Assets Total Liabilities Preferred Capital Stock Aggregate write-ins for Other than special surplus \$38,462,582 \$290,107,473 Total Capital and Surplus \$331,070,055 \$482,022,108

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023
Total Direct Premiums Earned
Total Direct Losses Incurred Total Accident and Health Direct \$3,686,348 Premiums Earned Total Accident and Health Direct Losses Incurred \$2
STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INCUDANCE \$2,368,748

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL). JON GODFREAD

OF INSURANCE
I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in

ioner 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 sworm statement exhibiting its condition and business for the year ending December 31, 2023 conformable to the

rements of the laws of this State regarding the business 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, NOW THEREFORE, I, JON GODFREAD, 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. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my

JON GODFREAD (May 8-15-22, 2024)

ABSTRACT OF STATEMENT

In the state of Wisconsin Total Assets Total Liabilities Preferred Capital Stock Other than special surplus \$50,000,000 Surplus Notes Gross paid in and contributed surplu Unassigned funds (Surplus) Total Capital and Surplus \$577,805,965 \$1,820,405,985

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023
Total Direct Premiums Earned
Total Direct Losses Incurred Total Accident and Health Direct

Total Accident and Communication

Losses Incurred

STATE OF NORTH DAKOTA

OFFICE OF THE COMMISSIONER

OF INSURANCE

Indicate of Insurance of the Total Accident and Health Direct

OF INSURANCE

I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, 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 May, A.D. 2024 (SEAL). JON GODFREAD

OFFICE OF THE COMPANY'S CERTIFICATE 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 swom statement exhibiting its condition and business for the year ending December 31, 2023 conformable to the

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, NOW THEREFORE, I, JON GODFREAD, 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, which the other provides a provided the provided that the provided the provided that the provided tha until the 30th day of April, A.D. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my

(SEAL)
JON GODFREAD (May 8-15-22, 2024)

ABSTRACT OF STATEMENT **DECEMBER 31, 2023**

In the state of North Carolina Total Assets Total Liabilities Preferred Capital Stock Other than special surplus Surplus Notes
Gross paid in and contributed surplu
Unassigned funds (Surplus) Total Capital and Surplus \$120,112,115

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023
Total Direct Premiums Earned
Total Direct Losses Incurred Total Accident and Health Direct Total Accident and Health Direct

Losses Incurred 0
STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE
I, Jon Godfread, Commissioner of Insurance of the State of
North Dakota, do hereby certify that the foregoing is a true IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL).

JON GODFREAD 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, 2023 conformable to the requirements of the laws of this State regarding the business

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, compliance with the requirements of insurance law aforesaid, NOW THEREFORE, I, JON GODFREAD, 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. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my

JON GODFREAD

(May 8-15-22, 2024)

OFFICE OF THE COMMISSIONER
OFFICE OF INSURANCE
I, Jon Godfread, Commissioner of Insurance of the State of
North Dakota, do hereby certify that the foregoing is a true
Abstract of Statement, as officially filed by the Company in

the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and bu of insurance and WHEREAS, the said company has filed in this office a duly

certified copy of its charter with certificate of organization in NOW THEREFORE, L. JON GODFREAD, Commissione company is fully empowered through its authorized agents and representatives, to transact its appropriated business o until the 30th day of April, A.D. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my

ABSTRACT OF STATEMENT **DECEMBER 31, 2023**

Riverport Insurance Company In the state of Iowa Total Assets Total Liabilities Preferred Capital Stock Aggregate write-ins for Other than special surplus Surplus Notes
Gross paid in and contributed surpl
Unassigned funds (Surplus) \$27,500,000 \$24,959,718

Total Capital and Surplus \$5:
Total Liabilities, Capital And Surplus \$114
NORTH DAKOTA BUSINESS ONLY \$114,109,040 FOR THE YEAR 2023
Total Direct Premiums Earned
Total Direct Losses Incurred Total Accident and Health Direct Premiums Earned Total Accident and Health Direct Losses Incurred 0
STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE
I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, 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 May, A.D. 2024 (SEAL). JON GODFREAD

IOFREAD
ioner 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, 2023 conformable to the

nts of the laws of this State regarding the busines 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, NOW THEREFORE, I, JON GODFREAD, 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. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my

JON GODFREAD (May 8-15-22, 2024)



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