PUBLIC NOTICE

Total Accident

Attn: Ramon Williams, 445 12th Street SW, Washington, DC 20554. A copy of the Request should be provided to Eocene at 8951 Wind-sor Parkway, Johnston, IA 50131. W 078JJC.

(May. 22, 2025)

NILLES LAW FIRM

Thaddeus E. Swanson (ND ID #08189)

1800 Radisson Tower 201 5th St. N. P.O. Box 2626 Fargo, ND 58208 Tel: 701-237-5544 tswanson@nilleslaw.com Attorneys for Personal Representa tive Court File No. 09-2025-PR-00105

NOTICE TO CREDITORS

IN THE DISTRICT COURT OF
CASS COUNTY, NORTH DAKOTA

CASS COUNTY, NORTH DAKOTA In the Matter of the Estate of Dennis Wayne Erickson, deceased [¶1] NOTICE IS GIVEN that the undersigned has been appointed Personal Representative of the above estate. All persons having claims against the deceased are required to present their claims within three (3). present their claims within three (3) months after the date of the first publication of this Notice or claims will be forever barred. Claims must either be presented to Payee Central Diversified, Inc. c/o John R. Widmark, President, at the address listed below or filed with the Court.
Dated May 19, 2025.
PAYEE CENTRAL DIVERSIFIED,

INC

a Minnesota corporation By: /s/ John R. Widmark Name: John R. Widmark Title: President Inter President Address: P.O. Box 1368 Alexandria, MN 56308 First publication on May 22, 2025. (May. 22 & 29; Jun. 5, 2025)

Tiffany J. Findlay Attorney ID#09859 OHNSTAD TWICHELL, P.C. 510 West Caledonia Avenue P.O. Box 220 Hillsboro, ND 58045 (701) 636-5700 tfindlay@ohnstadlaw.com

Attorney for Personal Representa-Court File No. 09-2025-PR-00098

IN THE DISTRICT COURT OF CASS COUNTY, STATE OF NORTH DAKOTA

In the Matter of the Estate of Paul R. VanHorn, Deceased

NOTICE TO CREDITORS

¶1. NOTICE IS HEREBY GIVEN that the undersigned has been ap-pointed Personal Representative of the above estate. All persons having claims against the said deceased are required to present their claims with-in three months after the date of the first publication of this notice or said claims will be forever barred. Claims must either be presented to the at-torney listed above, to Shannon Vantomey isled above, to shall find rail Horn as Personal Representative of the Estate at 2832 Edgewood Drive, Fargo, North Dakota 58102, or filed with the Court.

Dated this 5th day of May, 2025.

/s/ Shannon VanHorn Shannon VanHorn Personal Representative of the Es-tate of Paul R. VanHorn, deceased 2832 Edgewood Drive Fargo, ND 58102 (May. 8 & 15 & 22, 2025)

David A. Enwiya (ND: #09541) BRUDVIK LAW OFFICE, P.C. 1 N. Main Street I P.O. Box 847 Hillsboro, North Dakota 58045 Telephone (701) 636-4461 Email I david@brudvik.law Attorney for the Personal Represen-

Probate No.: 09-2025-PR-00099 EAST CENTRAL JUDICIAL DISTRICT OF CASS COUNTY, NORTH DAKOTA

In the Matter of the Estate of Kimber-ly Jo Cowden, Deceased NOTICE TO CREDITORS

NOTICE IS HEREBY GIVEN that the undersigned has been appointed personal representative of the above estate. All persons having claims against the said deceased are reagainst the said deceased are required to present their claims within Three (3) months after the date of the first publication of this notice or said claims will be forever barred. Claims must be presented to Emily A. Johnston, Personal Representative of the Estate, at 1016 Parkwood Ln., Stillwater, Minnesota 55082, or filed with the Court.

Dated: April 02, 2025

/s/: Emily A. Johnson Personal Representative

(Publish Three Times) (May. 15 & 22 & 29, 2025)

Brandon M. Erickson

ND Attorney ID No. 09333 O'Keeffe O'Brien Lyson Attorneys 720 Main Avenue Fargo, North Dakota 58103 brandon@okeeffeattorneys.com Attorneys for: Beverly M. Hunt, Personal Representative Probate No. 09-2025-PR-00138

IN THE DISTRICT COURT OF CASS COUNTY, STATE OF NORTH DAKOTA

In the Matter of the Estate of Lillian R. Winter a/k/a Lillian Rose Winter, Deceased NOTICE TO CREDITORS
NOTICE IS HEREBY GIVEN that
Beverly M. Hunt has been appoint-

ed Personal Representative of the above Estate. All persons having claims against the Decedent are required to present their claims within three (3) months after the date of the first publication of this Notice or mailing of this Notice, or the claims will be forever barred. Claims must be presented to Brandon M. Erickson, Attorney for Beverly M. Hunt, as Personal Representative of the Es-tate of Lillian R. Winter a/k/a Lillian Rose Winter, deceased, at O'Keeffe
O'Brien Lyson Attorneys, 720 Main
Avenue, Fargo, North Dakota 58103,
or filed with the Court.
Dated: 5/1/2025
Beverly M. Hunt

3511 7th St. S

(May. 8 & 15 & 22, 2025)

Attorney ID#08392 OHNSTAD TWICHELL, P.C. 444 Sheyenne Street, Suite 102 P.O. Box 458

West Fargo, ND 58078 (701) 282-3249 bboeddeker@ohnstadlaw.com

Attorney for Personal Representa-tive Court File No. 09-2025-PR-00144

IN THE DISTRICT COURT OF CASS COUNTY, STATE OF NORTH DAKOTA In the Matter of the Estate of Joseph s. Ruliffson, Deceased

NOTICE TO CREDITORS NOTICE TO CHEDITIONS

1. NOTICE IS HEREBY GIVEN that
the undersigned has been appointed Personal Representative of the
above estate. All persons having
claims against the said deceased are required to present their claims within three months after the date of

PUBLIC NOTICE

the first publication of this notice or said claims will be forever barred. Claims must either be presented to the attorney listed above, to Brian Ruliffson as Personal Representa-tive of the Estate at 3149 - 6th Street E, West Fargo, North Dakota 58078, or filed with the Court.

Dated this 2nd day of May, 2025.

Brian Ruliffson Personal Representative of the Estate of Joseph S. Ruliffson, de-3149-6th Street E West Fargo, North Dakota 58078

First publication on the 8th day of May, 2025. (May. 8 & 15 & 22, 2025)

Name, Address, and Telephone No. of Attorneys Thaddeus E. Swanson (ND ID #08189) NILLES LAW FIRM 1800 Radisson Tower 201 5th St. N. P.O. Box 2626 Fargo, ND 58208 Tel: 701-237-5544 tswanson@nilleslaw.com Attorneys for Personal Representa-

tive Court File No. 09-2025-PR-00147 NOTICE TO CREDITORS
IN THE DISTRICT COURT OF CASS COUNTY, NORTH DAKOTA
In the Matter of the Estate of

lizabeth H. Nilles alv/a Elizabeth Anne Hartmann Nilles, deceased NOTICE IS GIVEN that the under-signed has been appointed Personal Representative of the above estate. All persons having claims against the deceased are required to present their claims within three (3) months after the date of the first publication of this Notice or claims will be forever barred. Claims must either be presented to Richard Nilles at the address listed below or filed with the address listed below or filed with the Court. Dated :May 5, 2025.

By: /s/ Richard Nilles Name: Richard Nilles Title: Personal Representative Address: 101 31st Ave. N., Fargo, ND 58102 First publication on May 8, 2025.

(May. 8 & 15 & 22, 2025) Crystal R. Pound (09464)

JD Legal Planning PLLC 902 28th Street S, Suite 2 Fargo, ND 58103 Telephone: 701-364-9595 Fax: 701-364-9596 Email: cpound@jdlegalplanning.com Attorney for Personal Representa-

Court File No. 09-2025-PR-00141
IN THE DISTRICT COURT OF
CASS COUNTY, STATE OF
NORTH DAKOTA In the Matter of the Estate of Lynn
Omar Fundingsland, a/k/a Lynn O.
Fundingsland, Deceased.
NOTICE TO CREDITORS
NOTICE IS HEREBY GIVEN that

the undersigned has been appointed personal representative of the above estate. All persons having claims against the said deceased are required to present their claims within three (3) months after the date of the first publication or mailing of this notice or said claims will be forever barred. Claims must either be pre-sented to Colleen A. Fundingsland, 1518 6th Street South, Fargo, North Dakota 58103, and Julie L. Carlson, 25260 5th Avenue, Hawley, Minnesota 56549, as personal representative of the estate, or filed with the

Court Dated this 2nd day of May, 2025.
/s/ Colleen A. Fundingsland
Colleen A. Fundingsland, Personal Representative
/s/ Julie L. Carlson
Julie L. Carlson, Personal Represen-

(May. 15 & 22 & 29, 2025) Name, Address and Telephone No. of Attorney PETERSON LAW OFFICES, P.C.

523 Central Avenue P.O. Box 231 New Rockford, ND 58356 (701) 947-2442 Attorneys for: Personal Represen-

Probate No. 09-2025-PR-00151 THE DISTRICT COURT CASS COUNTY, STATE OF NORTH

In the Matter of the Estate of Herdis Iverson a/k/a Herdis C. Iverson, De-NOTICE TO CREDITORS

NOTICE IS HEREBY GIVEN that the undersigned has been appointed personal representative of the above estate. All persons having claims against the said deceased are required to present their claims within three months after the date of the first publication of this notice or said claims will be forever barred Claims must either be presented to Gerald Iverson, personal represen-tative of the estate, at 10090 9th St NE, Binford ND 58416; or filed with the Court. Dated this 5th day of May

2025

/s/ Gerald Iverson, Personal Representative 10090 9th St NE, Binford ND 58416

PETERSON LAW OFFICES, P.C 523 Central Avenue, P.O. Box 231 New Rockford, ND 58356 Attorneys for Personal Representative First publication on the 15th day of

May, 2025. (May. 15 & 22 & 29, 2025) STATE OF NORTH DAKOTA COUNTY OF CASS IN DISTRICT COURT EAST CENTRAL JUDICIAL DISTRICT

SUMMONS State of North Dakota, on behalf of State of Minnesota and Setira Hen-

Plaintiffs

Jonathan E. Stevenson, Jr., Defendant.

THE STATE OF NORTH DAKOTA TO Jonathan E. Stevenson, Jr.:
[1] You are summoned and required to defend against the attached Complaint by

serving an Answer, which is a written response, on the State of North Dakota and Setira

Hendrix within 21 days after service

of this Summons and by also filing that Answer with the court. If you do not serve and file an Answer, the court can grant the

requests made in the Complaint by ordering that a default judgment be entered against you.
Dated this 5th day of December,

/s/ Janet K. Naumann Janet K. Naumann Special Assistant Attorney General Bar I.D. Number: 05996 PO Box 7190 PO Box 7190 Bismarck, ND 58507-7190 (701) 328-5440 or 1-800-231-4255 E-SERVICE: farglocs@nd.gov

Attorney for Child Support (May. 8 & 15 & 22, 2025)

PUBLIC NOTICE

86231 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the
Transamerica Life Insurance Company In the state of Iowa Total Assets 179,107,004,426 Total Liabilities 173,181,529,569

Aggregate write-ins 1,043,273,628 for special surplus funds Common Cap- 6,761,900 ital Stock Preferred Capital Stock Aggregate Write-ins for Other Than

Special Surplus Funds Surplus Notes 0 Gross Paid in and 4,660,839,417 Contributed Surplus

Unassigned 214,599,912 Funds
Total Capital
and Surplus
Total Liabili-5,925,474,857 ties, Capital And Surplus 179,107,004,426

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

Total Life and Annuity Premi-ums Written 14,434,637 Total Life and Annuity Direct Losses Paid 53,346,313 Total Accident 8,203,225 and Health Direct Premiums Written Total Accident and 22,121,681 Health Direct Losses Paid

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 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 the state of the state of

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,

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

(May. 22 & 29; Jun. 5, 2025)

61271 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

Insurance Company rincipal Life In the state of Iowa 239,799,143,111 235,103,608,340

Total Assets Total Liabilities Aggregate write-ins for special surplus funds Common Capital 2,500,000 Stock Preferred Capi-tal Stock Aggregate Write-ins for 497,207,017 Other Than Special Surplus Funds urplus Notes Gross Paid in and

2.159.064.209 Contributed Surplus 2,036,763,544 Unassigned Funds

Total Capital and 4,695,534,771 Surplus Total Liabilities, 239,799,143,111 And Surplus

NORTH DAKOTA BUSINESS ONLY

FOR THE YEAR 2024 Total Life and Annuity Premi-ums Written 93,724,455 Total Life and Annuity Direct 17,414,923 Losses Paid Total Accident 7,453,851 Health Direct Premiums Written Total Accident

Losses Paid STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE J. Jon Godfread, Commissioner of Insurance of the State of North Da-

and

Health Direct

3.847.305

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
OFICE 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-

PUBLIC NOTICE

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 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 JON GODFREAD

Commissioner of Insurance

(May. 22 & 29; Jun. 5, 2025)

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the Companion Life Insurance Company In the state of South Carolina

77828

Total Assets Total Liabilities 775,867,885.00 285,842,108.00 Aggregate write-ins for special 0.00 surplus funds Common Capital 2,500,001.00 Stock Preferred Capi-0.00 tal Stock

Aggregate Write-ins for Other Than 0.00 Special Surplus Funds Surplus Notes 0.00 Gross Paid in and Contributed 94,243,783.00 Surplus Unassigned 393,281,993.00

Funds Total Capital and 490,025,777.00 Surplus Total Liabilities, 775,867,885.00 Capital And Surplus

NORTH DAKOTA BUSINESS

ONLY FOR THE YEAR 2024 Total Life and 139,132.00 Annuity Premi-ums Written Total Life and Annuity Direct Losses Paid 41,961.00 Total Accident

5,393,180.00 and Health Direct Premiums Written **Total Accident** and 4,702,872.06

Health Direct

Losses Paid 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 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 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

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 represer tatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April,

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

JON GODFREAD Commissioner of Insurance

(May. 22 & 29; Jun. 5, 2025)

22543 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the SECURA Insurance Company

Total Assets Total Liabilities 1,909,920,545 1,202,346,040 Aggregate write-ins for special surplus funds Common Capital 3,000,000 Stock

In the state of Wisconsin

Preferred Capi- 0 tal Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in 125,000,000 and 1.175.000 Contributed Surplus Unassigned 578,399,505 funds (surplus)
Total Capital and 707,574,505

And Surplus **NORTH DAKOTA BUSINESS** ONLY **FOR THE YEAR 2024**

1,909,920,545

Surplus Total Liabilities,

Total Direct 8,061,560 Premiums Total Direct 3,046,071 Losses Incurred **Total Accident** 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 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 (SEAL). JON GODFREAD

PUBLIC NOTICE

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, 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 JON GODFREAD

Commissioner of Insurance

(May. 22 & 29; Jun. 5, 2025)

ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024** of the SECURA Supreme Insurance Company In the state of Wisconsin

Total Assets Total Liabilities 211,648,364 128,249,961 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 Special Surplus

Funds Surplus Notes Gross Paid in and 0 11,960,000 Contributed Surplus Unassigned 65,438,403 funds (surplus) Total Capital and 83,398,403

Surplus Total Liabilities, 211,648,364 Capital And Surplus NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

Total Direct Premiums Earned Total Direct 8,061,560 3.046.071 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

UF INSUHANCE

I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstact 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 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

JON GODFREAD Commissioner of Insurance

(May. 22 & 29; Jun. 5, 2025)

71161 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the Principal National Life Insurance

Company In the state of Iowa 1,484,726,592.75 **Total Assets** 1,406,630,881,64 Total Liabilities Aggregate write-ins

surplus funds Common Capi-tal Stock 2,500,000 Preferred Capi- 0 tal Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in 128,475,343.41 and Contributed Surplus Unassigned -52,879,632.26

funds (surplus) Total Capital

and Surplus Total Liabilities,

Capital

Total Direct

for special

And Surplus NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

78,095,711.15

1.484.726,592.79

Premiums 12,051,480.77 Earned Total Direct Losses 357,087.60

PUBLIC NOTICE

and Health Direct Premiums Earned Total Accident and Health Direct

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 INI SOTICE.

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 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 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

A.D., 2025 (SEAL) JON GODFREAD Commissioner of Insurance

hereunto set my hand and seal at Bismarck this first day of March,

(May. 22 & 29; Jun. 5, 2025)

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

Old Republic Insurance Company In the state of Pennsylvania Total Assets 4,394,004,124 2,985,916,041 Total Liabilities Aggregate write-ins 0 for special surplus funds Common Capital 3,800,004 Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in and 155,000,000 103,869,422 Contributed Surplus Unassigned 1,145,418,657 funds (surplus) Total Capital and 1,408,088,083

Surplus Total Liabilities, 4.394.004.124 And Surplus NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

Total Direct Premiums Earned Total Direct 4.711.230 Losses Incurred Total Accident 2,834,727 0 and Health Direct Premiums Earned

Total Accident

Health Direct Losses Incurred STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

OF INSUHANCE

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 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

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-

in this office a sworn statement ex-

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 JON GODFREAD

Commissioner of Insurance (May. 22 & 29; Jun. 5, 2025)

17530 ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024** of the

7,762,717 42,823 Total Assets Total Liabilities Aggregate write-ins for special

tal Stock

Continued on next page

SECURA Select Insurance Compa-In the state of Wisconsin

Preferred Capi- 0

surplus funds Common Capital 3,000,000