

PUBLIC NOTICES (CONTINUED)

37257

**ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the**  
 Praetorian Insurance Company  
 In the state of Pennsylvania

Total Assets	437,831,815
Total Liabilities	352,098,079
Aggregate write-ins for special surplus funds	0
Common Capital Stock	8,500,000
Preferred Capital Stock	0
Aggregate Write-ins for Other Than	0
Special Surplus Funds	0
Surplus Notes	0
Gross Paid in and Contributed Surplus	83,283,618
Unassigned funds (surplus)	(6,049,882)
Total Capital and Surplus	85,733,736
Total Liabilities, Capital And Surplus	437,831,815

**NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025**

Total Direct Premiums Earned	232,797
Total Direct Losses Incurred	244,595
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 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. 2026 (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, 2025 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 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. 2027.

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

**JON GODFREAD**  
 Commissioner of Insurance

66915

**ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the**  
 New York Life Insurance Company  
 In the state of New York

Total Assets	259,292,569,176
Total Liabilities	231,728,062,317
Aggregate write-ins for special surplus funds	888,347,081
Common Capital Stock	0
Preferred Capital Stock	0
Aggregate Write-ins for Other Than	0
Special Surplus Funds	0
Surplus Notes	4,233,969,138
Gross Paid in and Contributed Surplus	0
Unassigned Funds	22,442,190,640
Total Capital and Surplus	27,564,506,859
Total Liabilities, Capital And Surplus	259,292,569,176

**NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025**

Total Life and Annuity Premiums Written	26,666,424
Total Life and Annuity Direct Losses Paid	19,296,313
Total Accident and Health Direct Premiums Written	2,225,339
Total Accident and Health Direct Losses Paid	760,911

**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. 2026 (SEAL).

**JON GODFREAD**  
 Commissioner of Insurance

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

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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. 2027.

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**JON GODFREAD**  
 Commissioner of Insurance

68632

**ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the**  
 Vantix Life Insurance Company  
 In the state of DE

Total Assets	427,075,557
Total Liabilities	343,493,755
Aggregate write-ins for special surplus funds	5,729,103
Common Capital Stock	1,100,000
Preferred Capital Stock	0
Aggregate Write-ins for Other Than	0
Special Surplus Funds	0
Surplus Notes	0
Gross Paid in and Contributed Surplus	109,910,729
Unassigned Funds	-33,158,030
Total Capital and Surplus	83,581,802
Total Liabilities, Capital And Surplus	427,075,557

**NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025**

Total Life and Annuity Premiums Written	2,855
Total Life and Annuity Direct Losses Paid	8
Total Accident and Health Direct Premiums Written	0
Total Accident and Health Direct Losses Paid	0

**STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE**

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**JON GODFREAD**  
 Commissioner of Insurance

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

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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,

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**JON GODFREAD**  
 Commissioner of Insurance

66850

**ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the**  
 National Western Life Insurance Company  
 In the state of Arizona

Total Assets	8341176607
Total Liabilities	7553380561
Aggregate write-ins for special surplus funds	39555340
Common Capital Stock	2500000
Preferred Capital Stock	0
Aggregate Write-ins for Other Than	0
Special Surplus Funds	0
Surplus Notes	0
Gross Paid in and Contributed Surplus	41563401
Unassigned Funds	704177205
Total Capital and Surplus	787795946
Total Liabilities, Capital And Surplus	8341176507

**NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025**

Total Life and Annuity Premiums Written	2220927
Total Life and Annuity Direct Losses Paid	1829829
Total Accident and Health Direct Premiums Written	0
Total Accident and Health Direct Losses Paid	0

**STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE**

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**JON GODFREAD**  
 Commissioner of Insurance

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

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**JON GODFREAD**  
 Commissioner of Insurance

91626

**ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the**  
 New England Life Insurance Company  
 In the state of Massachusetts

Total Assets	8240187354
Total Liabilities	7987642314
Aggregate write-ins for special surplus funds	0
Common Capital Stock	2500000
Preferred Capital Stock	0
Aggregate Write-ins for Other Than	0
Special Surplus Funds	0
Surplus Notes	0
Gross Paid in and Contributed Surplus	2000000
Unassigned Funds	248045040
Total Capital and Surplus	252545040
Total Liabilities, Capital And Surplus	8240187354

**NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025**

Total Life and Annuity Premiums Written	30833
Total Life and Annuity Direct Losses Paid	58642
Total Accident and Health Direct Premiums Written	0
Total Accident and Health Direct Losses Paid	0

**STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE**

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**JON GODFREAD**  
 Commissioner of Insurance

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

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**JON GODFREAD**  
 Commissioner of Insurance

94587

**ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the**  
 Members Health Insurance Company  
 In the state of Arizona

Total Assets	48370228
Total Liabilities	28707084
Aggregate write-ins for special surplus funds	0
Common Capital Stock	2400000
Preferred Capital Stock	0
Aggregate Write-ins for Other Than Special Surplus	0
Funds	0
Surplus Notes	0
Gross Paid in and Contributed Surplus	73090129
Unassigned Funds	-5826985
Total Capital and Surplus	19663144
Total Liabilities, Capital And Surplus	48370228

**NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025 ACCIDENT & HEALTH**

Total Premiums Earned	0
Total Amount Incurred	0

**STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE**

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**JON GODFREAD**  
 Commissioner of Insurance

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**JON GODFREAD**  
 Commissioner of Insurance

80055

**ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the**  
 Wysh Life And Health Insurance Company  
 In the state of Wisconsin

Total Assets	21,983,772
Total Liabilities	9,082,272
Aggregate write-ins for special surplus funds	202,838
Common Capital Stock	2,500,000
Preferred Capital Stock	0
Aggregate Write-ins for Other Than	0
Special Surplus Funds	0
Surplus Notes	0
Gross Paid in and Contributed Surplus	80,003,359
Unassigned Funds	(69,804,697)
Total Capital and Surplus	12,901,500
Total Liabilities, Capital And Surplus	21,983,772

**NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025**

Total Life and Annuity Premiums Written	5352
Total Life and Annuity Direct Losses Paid	0
Total Accident and Health Direct Premiums Written	0
Total Accident and Health Direct Losses Paid	0

**STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE**

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**JON GODFREAD**  
 Commissioner of Insurance

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

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**JON GODFREAD**  
 Commissioner of Insurance

10177

**ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the**  
 Mountain States Indemnity Company  
 In the state of New Mexico

Total Assets	17,460,447
Total Liabilities	3,108,908
Aggregate write-ins for special surplus funds	2,850,000
Common Capital Stock	0
Preferred Capital Stock	0
Aggregate Write-ins for Other Than	0
Special Surplus Funds	0
Surplus Notes	0
Gross Paid in and Contributed Surplus	13,650,000
Unassigned funds (surplus)	-2,148,461
Total Capital and Surplus	14,351,539
Total Liabilities, Capital And Surplus	17,460,447

**NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025**

Total Direct Premiums Earned	0
Total Direct Losses Incurred	0
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 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. 2026 (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, 2025 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 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. 2027.

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

**JON GODFREAD**  
 Commissioner of Insurance

**IN THE DISTRICT COURT OF STEELE COUNTY, STATE OF NORTH DAKOTA Court File No. 46-2026-PR-00003**

**In the Matter of the Estate of Blanche M. Moore, 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 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 attorney listed above, to Raymond Moore as Personal Representative of the Estate at 163 - 132nd Avenue SE, Hope, North Dakota 58046, or filed with the Court.

Dated this 30th day of April, 2026.

/s/ Raymond Moore  
 Raymond Moore  
 Personal Representative of the Estate of Blanche M. Moore, deceased  
 163 - 132nd Avenue SE  
 Hope, ND 58046

SCP May 8, 15, 22, 2026 IO#370063

as Personal Representative of the Estate at 163 - 132nd Avenue SE, Hope, North Dakota 58046, or filed with the Court.

Dated this 12th day of May, 2026.

/s/ Raymond Moore  
 Raymond Moore  
 Personal Representative of the Estate of Blanche M. Moore, deceased  
 163 - 132nd Avenue SE  
 Hope, ND 58046

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 Representative

SCP May 22, 29, June 6, 2026 IO#370084

**IN THE DISTRICT COURT OF STEELE COUNTY, STATE OF NORTH DAKOTA**

**In the Matter of the Estate of Roy William Jacobson, Deceased Court File No. 46-2026-PR-00004**

**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 the attorney listed above, to Jeffrey Jacobson as Personal Representative of the Estate at 109 Norway Avenue, P.O. Box 86, Finley, North Dakota 58230, or filed with the Court.

Dated this 11th day of May, 2026.

/s/ Jeffrey Jacobson  
 Jeffrey Jacobson  
 Personal Representative of the Estate of Roy William Jacobson, deceased  
 109 Norway Avenue  
 P.O. Box 86  
 Finley, ND 58230

J.R. Strom  
 Attorney ID #08500  
 OHNSTAD TWICHELL, P.C.  
 510 West Caledonia Avenue  
 P.O. Box 220

**IN THE DISTRICT COURT OF STEELE COUNTY, STATE OF NORTH DAKOTA**

**In the Matter of the Estate of Blanche M. Moore, Deceased Court File No. 46-2026-PR-00003**

**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 the attorney listed above, to Raymond Moore