Preferred Employers Insurance Company In the state of California Total Assets

Total Assets Total Liabilities

Aggregate write-ins for special surplus funds Common Capital Stock Aggregate Write-ins for Other Than

Special Surplus Funds Surplus Notes

Total Direct Premium

Earned Total Direct Losses

Incurred Total Accident and

Earned Total Accident and Health Direct Losses

Incurred

this office

(SEAL)

(6/11, 18, 25)

JON GODFREAD

Intrepid Casualty Company In the state of Iowa

Total Assets Total Liabilities

Aggregate write-ins

Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than

Special Surplus Funds Surplus Notes

Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital And Surplus

Total Direct Premiums

Earned Total Direct Losses

Incurred Total Accident and

Earned Fotal Accident and

this office

Health Direct Losses

Health Direct Premiums

Gross Paid in and

Health Direct Premiums

Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital

Gross Paid in and

And Surplus

ABSTRACT OF STATEMENT

FOR THE YEAR ENDING DECEMBER 31, 2024

102,497,714 47,879,458

3,500,000

7,500,000

43,618,256 54,618,256

102,497,714

0

0

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

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 busi-ness 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-reid

NOW THEREFORE, I, JON GODFREAD, Commis-

NOW THEREFORE, I, JON GODFREAD, Commis-sioner 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 busi-ness 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 hard and east at Biemgret this first day of March A.D. 2025

hand and seal at Bismarck this first day of March, A.D., 2025

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the

35,459,343 4,858,109

3,500,000

25,000,000 2,101,234 30,601,234

35,459,343

0

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NORTH DAKOTA BUSINESS ONLY

FOR THE YEAR 2024

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STATE OF NORTH DAKOTA

OFICE 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

uns 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

STATE OF NORTH DAKOTA

of Insurance

her of Insurance

ousiness of insurance and

Public Notices

Wednesday, June 11. 2025

10749

38911

ABSTRACT OF STATEMENT

DECEMBER 31, 2024 of the

207,435,340 114,054,097

5,500,000

65,551,990 22,329,253 93,381,243

207,435,340

19,847,825

13,614,878

Δ

NORTH DAKOTA BUSINESS ONLY

FOR THE YEAR 2024

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER

OF INSURANCE

I, Jon Godfread, Commissioner of Insurance of the State of If you double and 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 it is compared to the statement of the statemen

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

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

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 busi-ness 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-said.

NOW THEREFORE, I. JON GODFREAD, Commis-

NOW THEREFORE, I, JON GODFREAD, Commis-sioner 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 busi-ness of a uthorized 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 (SEAL) JON GODFREAD Commissioner of Insurance

ABSTRACT OF STATEMENT FOR THE YEAR ENDING

DECEMBER 31, 2024

ner of Insurance

(6/11, 18, 25)

Total Assets Total Liabilities

Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than

25143

FOR THE YEAR ENDIN

Berkley National Insurance Company

In the state of Iowa

In the state of Iowa Total Liabilities Aggregate write-ins for special surplus funds Common Capital Stock Aggregate Write-ins for

Aggregate Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in and Contributed Surplus Unassigned funds (surplus Total Capital and Surplus Total Liabilities, Capital And Surplus

And Surplus

Total Direct Premium

Earned Total Direct Losses

Incurred Total Accident and

otal Accident and

Health Direct Losses

JON GODFREAD

Earned

Incurred

Health Direct Premiums

weullesuay, Julie 11, 20		
ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the		
Intrepid Insurance Company In the state of Iowa	У	
Total Assets Total Liabilities Aggregate write-ins	92,134,486 57,801,106	
for special surplus funds Common Capital Stock Preferred Capital Stock	0 10,000,000 0	
Aggregate Write-ins for Other Than Special Surplus Funds	0	
Surplus Notes Gross Paid in and	0	
Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital	20,000,000 4,333,380 34,333,380	
And Surplus	92,134,486	
NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024		
Total Direct Premiums		

otal Direct Premiums	
Earned	208,083
otal Direct Losses	
ncurred	47,079
otal Accident and Health Direct Premiums	0
Farned	0
otal Accident and	
Health Direct Losses	0
ncurred	

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 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 busi-ness for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and

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 GODFREAD, Commis sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above and provisions of said laws, do nereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated busi-ness 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 bread end acted a Discrementative for the use Meento A.D. 2020 hand and seal at Bismarck this first day of March, A.D., 2025

(SEAL) JON GODFREAD

er of Insurance

(6/11, 18, 25)

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

97268

of	the
Pacific Life & Annuity Company	
In the state of Arizona	5
Total Assets	11,345,363,941
Total Liabilities	10,744,945,854
Aggregate write-ins	
for special surplus funds	0
for special surplus funds Common Capital Stock	2,900,000
Preferred Capital Stock	0
Aggregate Write-ins for	
Other Than	0
Special Surplus Funds	
Surplus Notes	0
Gross Paid in and	
Contributed Surplus	183,909,048
Unassigned Funds	413,609,039
Total Capital and Surplus	600,418,087
Total Liabilities, Capital	
And Surplus	11,345,363,941
NODTH DAVOT	DUCINECS ONLY

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

Total Life and Annuity Premiums Written 0 Total Life and Annuity Direct Losses Paid 11,289 Total Accident and Health Direct Premiums 0

Written Total Accident and Health Direct Losses Paid 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. 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 March, A.D. 2025 (SEAL). JON GODFREAD Commissioners of Research

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

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the Tri-State Insurance Company In the state of Iowa Total Assets Total Liabilities 330,651,329 284,314,845 Iotal Liabilities Aggregate write-ins for special surplus funds Common Capital Stock Aggregate Write-ins for Other Than 5.000.000 Special Surplus Funds Surplus Notes Gross Paid in and Contributed Surplus Unassigned funds (surplus) 21,677,508 19,658,976 46,336,484 fotal Capital and Surplus fotal Liabilities, Capital 330.651.329 And Surplus NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024 31003

Total Direct Premiums 144 766

Lamed	177,700
Total Direct Losses	
Incurred	-199,862
Total Accident and	
Health Direct Premiums	0
Earned	
Total Accident and	
Health Direct Losses	0
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

tins 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

ner of Insurance

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 busi-ness for the year ending December 31, 2024 conformable to the reourements of the laws of this State rearding the to the requirements of the laws of this State regarding 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 afore-

NOW THEREFORE, I, JON GODFREAD, Commis-NOW THEREFORE, 1, JON GODFREAD, Commis-sioner 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 busi-ness 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 hard and east at Bismgreck this first day of March A.D. 2025 nd and seal at Bismarck this first day of March, A.D., 2025 (SEAL) JON GODFREAD

17182

of Insurance

(6/11, 18, 25)

25178 ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024** of the

	State Farm Mutual Automobile Insurance Company		
	In the state of Illinois		
	Total Assets	239,888,927,927	
	Total Liabilities	94,699,059,289	
	Aggregate write-ins		
	for special surplus funds	117,837,757,231	
	Common Capital Stock	0	
	Preferred Capital Stock	0	
	Aggregate Write-ins for		
	Other Than	10,000,000	
	Special Surplus Funds	0	
	Surplus Notes Gross Paid in and	0	
		0	
	Contributed Surplus Unassigned funds (surplus)	27,342,111,407	
	Total Capital and Surplus	145,189,868,638	
	Total Liabilities, Capital	110,100,000,000	
	And Surplus	239,888,927,927	
NORTH DAKOTA BUSINESS ONLY			
FOR THE YEAR 2024			
	Total Direct Premiums		
	Earned	91,495,283	
	Total Diment Language		

Total Direct Losses	
Incurred	53,557,891
Total Accident and	
Health Direct Premiums	4,280,063
Earned	
Total Accident and	
Health Direct Losses	3,794,425
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 offic 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

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

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the 6 StarNet Insurance Company In the state of Iowa Total Assets Total Liabilities 294,984,852 162,263,852 Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than 6,000,000 Special Surplus Funds Surplus Notes Gross Paid in and Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital 88,950,611 37,770,389 132,721,000 294,984,852

And Surplus NORTH DAKOTA BUSINESS ONLY

FOR THE	YEAK 2024
Total Direct Premiums	
Earned	2,659,559
Total Direct Losses	
Incurred	159,939
Total Accident and	
Health Direct Premiums	0
Earned	
Total Accident and	
Health Direct Losses	0
Incurred	

STATE OF NORTH DAKOTA

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 March, A.D. 2025 (SEAL). JON GODFREAD

er of Insurance

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 busi-ness for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and

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-orid

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 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 busi-ness 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 nd and seal at Bismarck this first day of March, A.D., 2025

(SEAL) JON GODFREAD

(6/11, 18, 25)

FOR THE Y DECEMB	DF STATEMENT EAR ENDING ER 31, 2024 7 the ance Company	
Total Assets Total Liabilities Aggregate write-ins	27,192,010,112 24,378,923,177	
for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for	0 6,003,113 50,000,000	
Other Than	0	
Special Surplus Funds Surplus Notes Gross Paid in and	100,000,000	
Contributed Surplus Unassigned Funds Total Capital and Surplus Total Liabilities, Capital	502,876,387 2,154,207,435 2,813,086,935	
And Surplus	27,192,010,112	
NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024		

Annuity Premiums Written 11,057,393 Total Life and Total Life and Annuity Direct Losses Paid Total Accident and Health Direct Premiums 2,121,789 Written Total Accident and

Health Direct Losses Paid 1,134,446

Health Direct Losses Paid 1, 134, 446 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). ION CODERFEAD

JON GODFREAD

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

AUTHORITY

In the state of Iowa Total Assets Total Liabilities Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in and Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital And Surplus 22,009,385 26,701,895 53,711,280 211.052.535 And Surplus NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024 Total Direct Premiums 654,518 Earned Total Direct Losses 680,296 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

ABSTRACT OF STATEMENT

FOR THE YEAR ENDING

DECEMBER 31, 2024

of the

211,052,535 157,341,255

5,000,000

0

0

Union Insurance Company

In the state of Iowa

25844

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

sioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER

OF INSURANCE COMPANY'S CERTIFICATE OF

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 busi-ness 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-said.

NOW THEREFORE, I. JON GODFREAD, Commis-NOW THEREFORE, I, JON GODFREAD, Commis-sioner 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 busi-ness 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 (SEAL) JON GODFREAD Commissioner of Insurance

her of Insurance

(6/11, 18, 25)

68381

ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024** of the State Farm Fire And Casualty Company In the state of Illinois Total Assets Total Liabilities 60,365,226,221 37,719,844,505 Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for 8,122,424,391 10,000,000 0 Other Than Special Surplus Funds Surplus Notes Gross Paid in and 0 3,060,786,638 11,452,170,686 22,645,381,715 Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital 60,365,226,221 And Surplus NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

Total Direct Premiums 80.675.380 Earned Total Direct Losses 37.612.536 Incurred Total Accident and Health Direct Premiums 0 Earned Total Accident and Health Direct Losses

STATE OF NORTH DAKOTA

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 the office 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 March, A.D. 2025 (SEAL). JON GODFREAD

STATE OF NORTH DAKOTA

Pacific Life Insurance Company In the state of Nebraska Total Associa Pacifi In the 209,212,832,485 197,063,535,475 Total Total Aggro for sp Comi Prefe 490,847,275 30,000,000 Aggre Other 79,553,776

67466

Special Surplus Funds Surplus Notes Gross Paid in and 1,455,245,621 Contributed Surplus Unassigned Funds Total Capital and Surplus Total Liabilities, Capital 2,535,788,610 7,557,861,729 12,149,297,010 209,212,832,485 And Surplus

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

Total Life and Annuity Premiums Written 30,098,397 Total Life and Annuity Direct Losses Paid 48,659,334 Total Accident and Health Direct Premiums 0

Written Total Accident and Health Direct Losses Paid 0

STATE OF NORTH DAKOTA

OFICE OF INE 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 the 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 March, A.D. 2025 (SEAL). JON GODFREAD Commissioner of Leman.

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

OFFICE OF NORTH DAROTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY

oner of Insurance

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 busi-ness for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the 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 GODFREAD, Commis sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above and company is fully empowered through its authorized agents and representatives, to transact its appropriated busi-ness 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 (SEAL)

JON GODFREAD

(6/11, 18, 25)

FOR THE Y DECEMI 0	DF STATEMENT EAR ENDING BER 31, 2024 f the
State Farm Classic Insurance In the state of Illinois	e Company
Total Assets Total Liabilities Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in and	16,973,218 4,819,221 0 4,000,000 0 0
Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital	29,000,000 -20,846,002.54 12,153,997
And Surplus	16,973,218

NORTH DAKOTA BUSINESS ONLY

FOR THE YEAR 2024	
Total Direct Premiums	
Earned	0
Total Direct Losses	
Incurred	0
Total Accident and	
Health Direct Premiums	0
Earned	
Total Accident and	
Health Direct Losses	0
Incurred	
mearrea	

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

I. Jon Godfread, Comn ioner 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 March, A.D. 2025 (SEAL). JON GODFREAD

sioner 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 busi-ness 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 complicate with the requirement of insurance law office.

in compliance with the requirements of insurance law afore-

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 accordin laws thereof, until the 30th day of April, A.D. 2026. ording to the

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

JON GODFREAD of Insurance

(6/11, 18, 25)

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 busi-ness for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the less 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 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 busi-ness of authorized insurance in the state according to the ording 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

(SEAL) JON GODFREAD r of Insurance

(6/11, 18, 25)

17133

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 busi-ness for the year ending December 31, 2024 conformable ments of the laws of this State regarding the to the require

69108

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 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. 2026. IN TESTIMONY WHEREOF, I have

hand and seal at Bism (SEAL) JON GODFREAD narck this first day of March, A.D., 2025

ner of Insurance

(6/11, 18, 25)

OFICE OF INDEXIMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY

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 busi-ness for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and 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-eaid

NOW THEREFORE, I, JON GODFREAD, Comr sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above 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 busi-ness 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 and and seal at Bismarck this first day of March, A.D., 2025

(SEAL) JON GODFREAD f Insurance

(6/11, 18, 25)

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 busi-ness for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the 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-said

NOW THEREFORE, I, JON GODFREAD, Commis sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above 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 busi-ness 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

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urance

(6/11, 18, 25)

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 busi-ness for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and 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 GODFREAD, Commi sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above and company is fully empowered through its autorized agents and representatives, to transact its appropriated busi-ness 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 there are denoted a Discrement business through the AD 2026

hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL) JON GODFREAD

(6/11, 18, 25)

Need to place an ad? Just e-mail us

journalads@crosbynd.com



This year's annual meeting will be held on October 4th.

- Each year there is a trustee election. The districts up for election this year are districts 2 and 3.
- To be eligible, you must reside within the district. If you are interested in running for a trustee position, please contact one of the nominating committee members listed below. Each of the nominating committee members will have a listing of all eligible members, so they will be able to verify if you are eligible.
- The nominating committees will meet in **early July** to submit their nominations.

<u>District #2</u>- Jody Lagerquist (Current Trustee)

Josh Johnson- 406-480-7015 Jeff Ekness- 406-385-7804

District #3- Rob Rust (Current Trustee) Alexa Althoff- 406-769-7030 David Reistad- 701-982-7435

PO Box 227, Medicine Lake, MT 59247-0227 Ph: 406-789-2231 www.sheridanelectric.coop

DECEMBER 31, 2024 of the State Farm Life Insurance Company In the state of Illinois Total Liabilities Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in and Contributed Surplus Unassigned Funds Total Capital and Surplus Total Liabilities, Capital And Surplus In the state of Illinois 94,233,960,100 75,508,093,008 60,924,682 3,000,000 0 64,751,659 18,597,190,752 18,725,867,092 And Surplus 94.233.960.100 NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024 Total Life and Annuity Premiums Written 15,632,932 Total Life and

Annuity Direct Losses Paid 15,037,798 Total Accident and Health Direct Premiums Written Total Accident and Health Direct Losses Paid 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 foreg 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

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 busi-ness 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 GODFREAD, Commissioner of Insurance of the State of North Dakota, pursuant to solution insurance of the other of both packat, parsatulate the provisions of said laws, do hereby certify that has how named company is fully empowered through its authorized agents and representatives, to transact its appropriated busi-ness of authorized insurance in the state according to the ording to the laws thereof, until the 30th day of April, A.D. 2026. IN TESTIMONY WHEREOF, I have hereunto set my d and seal at Bismarck this first day of March, A.D., 2025 (SEAL)

JON GODFREAD

(6/11, 18, 25)

AgCountry® ABSTRACT OF STATEMENT FOR THE YEAR ENDING Farm Credit Servicés **CUSTOMER APPRECIATION BBQ!**

Tuesday, June 17, 2025 11:30 AM - 1:30 PM Crosby AgCountry Office 11802 ND Hwy 5 NW, Crosby, ND 58730

Busy in the field? No problem, to-go boxes will be available!

AgCountry.com

Community Development Director

The Divide County JDA is looking for a professional community job development director.

 \Rightarrow Salary: \$50,000 - \$58,000 + plus full county benefits, depending on experience and education

 \Rightarrow Job duties include:

- -- Works as an employee under supervision of the Divide County Job Development Authority
- -- Provide staff support to JDA & EDC Boards
- -- Work with community groups & activities
- -- Help establish a community development plan

-- Assist in research & writing of state and federal grants

-- Seek out new community and job development ideas Send letter of application & resume to:

