DOGS



Border Collie Puppies 7 weeks old. Can be registered with ABCA \$400. 701-436-6566



Purebred Yellow Lab Puppies M & F, shots, wormed, vet chkd, health certificates. \$300. 218-831-7975 (MN#829895)



AKC Lab Puppies White, Dark Red, Black, Dark Chocolate & Yellow. Hunting & Family, Blocky Black Noses. Full AKC. 605-999-7149 Mitchell, SD www.southdakotayellowlabs.com

Shih Tzu/Poodle Pups M & F, family raised, born 3/5/25, vet checked. Elbow Lake, MN. 320-304-0809

WORKSHOP SPACE FOR RENT

STORAGE/SHOP **SPACE FOR LEASE** Building 40'x100' 701-952-6026

REAL ESTATE MISCELLANEOUS

SHOP FOR SALE 36'x40', In-floor heat, 2 -12' overhead doors, 710 13th St NE -\$325,000 701-952-6026

FARM EQUIPMENT

1979 835 Versatile tractor. Good tires, serviced & field ready. \$10,000; 2016 4580 Kabota baler, new belts & factory upgrades in process \$21,000. 701-680-9652

PUBLIC NOTICE

PLACE NOTICE amestownsun.column.us/place

CONTACT US legals@jamestownsun.com

DEADLINE

Wednesday 2pm for Thursday Wednesday 5pm for Saturday Thursday 2pm for Friday Friday 10am for Monday Friday 2pm for Tuesday Friday 5pm for Wednesday

PUBLIC NOTICE

NORTH DA	KOTA BUSINESS
Total Liabilities Capital And Surplus	, 1,568,896,007
Total Capital a Surplus	nd 1,031,220,809
Surplus Unassigned Funds	935,120,809
and Contributed	95,100,000
Funds Surplus Notes Gross Paid in	0
tal Stock Aggregate Write-ins for Other Than Special Surplu	0 s
Preferred Capi	- 0

ONLY FOR THE YEAR 2024 ACCIDENT & HEALTH Total Premiums 117.416.091

Earned Total Amount 141,144,130 Incurred STATE OF NORTH DAKOTA

OFFICE OF THE COMMISSIONER OF INSURANCE Jon Godfread, Commissioner of

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

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

JON GODFREAD

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

COMPANY'S CERTIFICATE OF AUTHORITY WHEREAS, the above corporation

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

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

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

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

JON GODFREAD Commissioner of Insurance

(May. 5 & 12 & 19, 2025)

90611 ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024** of the

		01	uie		
Allianz		Ins	urance	Of	North
America					
In the st	ate of I	Mir	inesota		
Total As	sets		185,46	6,752	2,560
Total Lia	abilities		178,30	1,752	2,377
Aggrega					
write-ins			373,13	1,914	ł
for spec					
surplus					
Commo	n Capi	tal	20,000	001	
Stock	d Cani		10.000	101	
Preferre tal Stoc		-	18,903	484	
Aggrega					
Write-in			0		
Other T			0		
Special		s			
Funds	ourpiu	0			
Surplus	Notes		0		
Gross F					
and			3,675,6	89,8	22
Contribu	uted				
Surplus					
Unassig	Ined		3,077,2	74,9	62
Funds					~~
Total Ca	apital ai	nd	7,165,0	00,1	83
Surplus					

PUBLIC NOTICE

DECEMBER 31, 2024

DECEMBER 31, 2024 of the			
Everlake Life Insu In the state of Illin			
Total Assets Total Liabilities	25,826,535,195 24,142,926,152		
Aggregate write-ins for special	142,176,105		
surplus funds Common Capital Stock	5,402,600		
Preferred Capi- tal Stock	0		
Aggregate Write-ins for Other Than	0		
Special Surplus Funds			
Surplus Notes Gross Paid in	0		
and Contributed	1,406,382,640		
Surplus Unassigned	129,647,698		
Funds Total Capital and Surplus	1,683,609,043		
Total Liabilities, Capital And Surplus	25,826,535,195		

NORTH DAKOTA BUSINESS

ONLY FOR THE YEAR 2024

FURINE	1 EAR 2024
Total Life and Annuity Premi- ums Written	652,654
Total Life and Annuity Direct Losses Paid	2,513,292
Total Accident and Health Direct	18,977
Premiums Written Total Accident and Health Direct Losses Paid	34,476

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

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 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 aforesaid

NOW THEREFORE, I, JON GOD-FREAD, Commissioner of Insurance of the State of North Dakota, pursuon the State of North Dakota, pursu-ant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and represen-tatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. 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. 5 & 12 & 19, 2025)

64190 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the Allianz Life Insurance Company Of

New York In the state of New York Total Assets Total Liabilities 7,047,945,588 6,792,129,434 Aggregate write-ins 8.574.797 for special surplus funds Common Capital 2,000,000 Stock Preferred Capi-tal Stock 0 Aggregate Write-ins for 0 Other Than Special Surplus Funds Surplus Notes Gross Paid in 0 and 192,500,000 Contributed Surplus Unassigned 52.741.357 Funds Total Capital and 255,816,154 Surplus Total Liabilities Capital 7,047,945,588 And Surplus

PUBLIC NOTICE

ant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and represen-tatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026. IN TESTIMONY WHEREOF, I have

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

JON GODFREAD Commissioner of Insurance

(May. 5 & 12 & 19, 2025)

66869 ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024** of the Nationwide Life Insurance Company

In the state of Ohio Total Assets Total Liabilities 190,140,906,536 77,599,464,979 Aggregate write-ins 116,115,320 for special surplus funds Common Capital 3,814,779 Stock Preferred Capi-0 tal Stock Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes 1,100,000,000 Gross Paid in and Contributed 2,543,489,816 Surplus Unassigned 8,778,021,642 Funds Total Capital and 12,541,441,557 Surplus Total Liabilities 90,140,906,536 Capital And Surplus NORTH DAKOTA BUSINESS

ONLY FOR THE YEAR 2024

Tota

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Loss

	,
l Life and uity Premi- Written	96,871,446
I Life and uity Direct ses Paid	57,107,214
l Accident Ith Direct	284,573
niums ten I Accident	007 500
Ith Direct ses Paid	907,563

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 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 (SFAL)

JON GODFREAD

Commissioner of Insurance STATE OF NORTH DAKOTA

OFFICE OF THE COMMISSIONER OF INSURANCE

COMPANY'S CERTIFICATE OF AUTHORITY WHEREAS, the above corporation

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

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

NOW THEREFORE, I, JON GOD-FREAD. Commissioner of Insurance of the State of North Dakota, pursu-ant to the provisions of said laws, do 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

PUBLIC NOTICE

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

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 (SFÁL)

JON GODFREAD

Commissioner of Insurance

(May. 5 & 12 & 19, 2025) 71153 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the Talcott Resolution Life And Annuity Insurance Company In the state of Connecticut Total Assets Total Liabilities 29,633,535,717 29,006,903,503 Aggregate write-ins 0 for special surplus funds Common Capital 2,500,000 Stock Preferred Capi- 0 Aggregate Write-ins for Other Than Special Surplus 119,373,209 Funds Surplus Notes Gross Paid in and 0 85,431,561 Contributed Surplus Unassigned 419,327,444 Funds Total Capital and 626,632,214 Surplus Total Liabilities, 29.633.535.717 Capital And Surplus NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024 Total Life and 2,616,628

Annuity Premi-ums Written

Total Life and Annuity Direct Losses Paid Total Accident 36,986,177 285 and Health Direct Premiums Written

PUBLIC NOTICE

PUBLIC NOTICE Marshall W. McCullough Attorney ID#05298 OHNSTAD TWICHELL, P.C. 444 Sheyenne Street, Suite 102 P.O. Box 458

West Fargo, ND 58078 (701) 282-3249

(101) 202-0249 mmccullough@ohnstadlaw.com Attorney for Personal Representative Court File No. 47-2025-PR-00039 IN THE DISTRICT COURT OF STUTSMAN COUNTY, STATE OF NORTH

DAKOTA In the Matter of the Estate of Jordan Cole Entzminger, Deceased NOTICE TO CREDITORS

NOTICE TO CREDITORS 1.NOTICE IS HEREBY GIVEN that the undersigned has been appointed Per-sonal 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 Terry Entzminger as Personal Representative of the Estate at 7750 45th Street SE, here on ND 5404 of the durith the Court Jamestown, ND 58401, or filed with the Court.

►►► JAMESTOWNSUN.COM

1.600

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, in se officially filed by the Company in

as officially filed by the Company in this office. IN TESTIMONY WHEREOF, I have

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

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

COMPANY'S CERTIFICATE OF AUTHORITY WHEREAS, the above corporation

duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement ex-

hibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of

the laws of this State regarding the business of insurance and WHEREAS, the said company has

filed in this office a duly certified copy of its charter with certificate of organization in compliance with the

requirements of insurance law afore-

said, NOW THEREFORE, I, JON GOD-

FREAD, Commissioner of Insurance of the State of North Dakota, pursu-ant to the provisions of said laws, do

hereby certify that the above named company is fully empowered through its authorized agents and represen-

tatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A D 2026

IN TESTIMONY WHEREOF, I have

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

Continued on next page

Start your

career here.

jobshq.com

jobs**HQ**

A.D., 2025

JON GODFREAD

Commissioner of Insurance

(May. 5 & 12 & 19, 2025)

(SEAL

PUBLIC NOTICE

Total Accident

and Health Direct

Losses Paid

(SEAL) JON GODFREAD

VIEW ONLINE

www.jamestownsun.com



BARNES COUNTY NORTH SCHOOL DISTRICT 007 ELEC-TION NOTICE 2184 101 ST AVE SE, WIMBLE DON, ND JUNE 10, 2025

Barnes County North School District 007 will hold its annual school board election on Tuesday, June 10, 2025.

The purpose of this election is to fill the one open three-year term for school board official currently held by Jennifer Bollingberg, as well as for the question of publication of school board minutes

Jennifer Bollingberg has filed to be on the ballot for the three-year po-sition.

Polls will be open from 10:00 am to 7:00 pm at the Barnes County North School. Contact the Business Man-ager at 701-646-6202 or via email at Lindsay.Polk@k12.nd.us if you have questions or to request an absentee ballot.

/s/ Lindsay Polk Business Manager (May. 12, 2025)

The Stutsman County Commission The Stutsman County Commission will be accepting applications to the Stutsman County Commission avail-able through 12:00 p.m. on May 16, 2025. Interested parties should sub-mit an "Application for Appointment" to the County Auditor by 12:00 p.m., May 16, 2025. Postmark will not be accepted. Appointment to the board will be made May 20, 2025, with the official term commencing immediate-ly. Applications are available at www. stutsmancounty.gov under the "Gov stutsmancounty gov under the "Gov-ernment", then "Get Involved" tab, or from the County Auditor's Office at 511 2nd Ave SE, Ste. 102, James-town, ND 58401. For more informa-tion about these boards, please visit our website or contact the County our website or contact the County Auditor's Office at 701- 252-9035. (May. 9 & 12 & 14, 2025)

12459 ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024** of the

Medica Insurance Company In the state of Minnesota

Total Assets	1,568,896,007
Total Liabilities	537,675,198
Aggregate	
write-ins	0
for special	
surplus funds	
Common Capital	1,000,000
Stock	

Total Liabilities,	
Capital	185,466,752,560
And Surplus	

NORTH DAKOTA BUSINESS ONLY

FOR THE	YEAR 2024
Total Life and Annuity Premi- ums Written	76,671,832
Total Life and Annuity Direct Losses Paid	69,606,158
Total Accident and Health Direct Premiums	1,077,427
Written Total Accident and Health Direct Losses Paid	2,242,356

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

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

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

JON GODFREAD

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

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

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

NOW THEREFORE, I. JON GOD-FREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through tis 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,

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. 5 & 12 & 19, 2025)

ABSTRACT OF STATEMENT FOR THE YEAR ENDING

60186

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

Total Life and Annuity Premi-ums Written 0 Total Life and Annuity Direct Losses Paid 0 Total Accident and 0 Health Direct Premiums Written Total Accident 0 and 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 (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 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

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

NOW THEREFORE, I, JON GOD-FREAD, Commissioner of Insurance of the State of North Dakota, pursu-

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

JON GODFREAD Commissioner of Insurance

(May. 5 & 12 & 19, 2025)

62510 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the EquiTrust Life Insurance Company

In the state of Arizona 33,576,722,643 30,820,349,245 **Total Assets** Total Liabilities Aggregate write-ins 0 for special surplus funds Common Capital 3,000,000 Stock Preferred Capi-0 tal Stock Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes Gross Paid in 0 and 784,666,772 Contributed Surplus Unassigned 1.968.706.626 Funds Total Capital and 2,756,373,398 Surplus Total Liabilities 33,576,722,643 Capital And Surplus

NORTH DAKOTA BUSINESS ONLY

FOR THE YEAR 2024

tal Life and nuity Premi- ns Written	33,456,849
tal Life and inuity Direct isses Paid	4,203,635
tal Accident d ealth Direct	0
emiums ritten tal Accident d ealth Direct sses Paid	0

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STATE OF NORTH DAKOTA

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

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

JON GODFREAD

Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER

Dated this 29th day of April,2025. Personal Representative of the Estate of Jordan Cole Entzminger, deceased 7750 45th Street SE Jamestown, ND 58401

First publication on the 5th day of May, 2025. (May. 5 & 12 & 19, 2025)

PUBLIC NOTICE

PUBLIC NOTICE

Notice of Public Organizational Meeting and Election - Gackle Rural Ambulance District

Notice is hereby given to all qualified electors living within the boundaries of the district, May 22nd, 2025, at 6:00 pm at Gackle Rural Ambulance Facility, 111 Cedar St E, Gackle, ND 58442 an organizational meeting will be held to elect Gackle Rural Ambulance District Board of Directors. Immediately following the organizational meeting, the District's Board of Directors will hold a public meeting with the following agenda.

- Call the Meeting to Order
 - Nomination and Election of officers
- Current ambulance service overview to District Board 3
- Present draft governance bylaws for board review
- Mill Levy authority consideration and resolution 5
- Set next meeting date 6
- Adjourn

TERRITORY OF THE GACKLE RURAL AMBULAMCE DISTRICT

County	Township	Township	/Range	Sections
Stutsman	Sinclair	138	67	1-36
Stutsman	Cusator	138	66	1-36
Kidder	Graf	137	70	1-36
Stutsman	Streeter	137	69	1-36
Stutsman	Germania	137	68	1-36
Stutsman	Griffin	137	67	1-36
Stutsman	Alexander	137	66	1-36
Stutsman	Sharlow	137	65	15-22, 27-36
Logan		136	69	1-36
Logan		136	68	1-36
Logan	Finn	136	67	1-36
Logan		135	69	1-4, 9-15, 22-24
Logan		135	68	1-36
Logan	Gutschmidt	135	67	1-36
Logan		134	68	1-18
Logan	Janke	134	67	1-18
Lamoure	Glen	136	66	1-36
Lamoure	Mikkelson	136	65	1-22, 29-31
Lamoure	Raney	135	66	1-9

All of City of Gackle Allof City of Streeter

TINEN AGE 17 - 18 - 15 71340v 8,7040