

PUBLIC NOTICE

Public Notice
Great Plains Housing Authority
Eagle Flats Waiting List Preference

Great Plains Housing Authority will be adding Waiting List Preferences to the Eagle Flats Project Based list. These preference will be "Chronic Homelessness" and "Supportive Services. GPA's definitions will follow the U.S. Department of Housing and Urban Development (HUD)'s definitions.

Written comments on the Administrative Plan will be accepted through July 10, 2025. A copy of the draft plan may be viewed at Great Plains Housing Authority, or on our website, www.greatplainsha.com. Alternative formats or special accommodations are available for persons with disabilities upon request.

The GPAH board will review and vote on the Administrative Plan updates during the July 15, 2025, board meeting.

Requests for information and written comments should sent to:
Great Plains Housing Authority
300 2nd Ave NE – Suite 200
Jamestown, ND 58401

Comments may also emailed to: director@greatplainsha.com.



(May. 23 & 30, 2025)

Probate No. 47-2025-PR-00042
IN THE DISTRICT COURT OF
NORTH DAKOTA, COUNTY OF
STUTSMAN

In the Matter of the Estate of KURT R. MAYHER, 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 or mailing of this notice or said claims will be forever barred. Claims must either be presented to Lynda Mayher, personal representative of the estate, at 610 School Street, Medina, North Dakota 58467, or filed with the Court.

Dated this 13th day of May, 2025.

Steven T. Ottmar - ID #06179

OTTMAR & OTTMAR, P.C.

226 Second Avenue SW/PO Box 1397

Jamestown, North Dakota 58402-1397

P: 701.252.7229

F: 701.252.7461

sottmar@ottmarlaw.com

E-service: office@ottmarlaw.com

Attorney for personal representative

Lynda Mayher, Personal Representative

610 School Street

Medina, ND 58467

(May. 16 & 23 & 30, 2025)

PUBLIC NOTICE

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 Preferred Capital 0

Aggregate Write-ins for 0

Other Than Special Surplus Funds 0

Surplus Notes Gross Paid in and 95,100,000

Contributed Surplus Unassigned Funds 935,120,809

Total Capital and Surplus 1,031,220,809

Total Liabilities, Capital 1,568,896,007

And Surplus

NORTH DAKOTA BUSINESS 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

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 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. 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

(May. 23 & 30; Jun. 6, 2025)

63444
ABSTRACT OF STATEMENT
FOR THE YEAR ENDING
DECEMBER 31, 2024
of the

Accendo Insurance Company
In the state of Utah

Total Assets 485,433,727

Total Liabilities 348,880,953

PUBLIC NOTICE

Aggregate write-ins 0

for special surplus funds

Common Capital 2,500,000

Stock Preferred Capital 0

Aggregate Write-ins for 0

Other Than Special Surplus Funds 0

Surplus Notes Gross Paid in and 674,308,114

Contributed Surplus Unassigned funds (surplus) -540255340

Total Capital and Surplus 676,808,114

Total Liabilities, Capital 1,025,689,067

And Surplus

NORTH DAKOTA BUSINESS ONLY
FOR THE YEAR 2024

Total Direct Premiums 356,027,602

Earned Total Direct Losses 388,437,861

Incurred Total Accident and 356,165,656

Health Direct Premiums Earned 370,719,494

Total Accident and Health Direct Losses Incurred

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OFFICE OF THE COMMISSIONER
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JON GODFREAD

Commissioner of Insurance

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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.

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JON GODFREAD

Commissioner of Insurance

(May. 16 & 23 & 30, 2025)

12567
ABSTRACT OF STATEMENT
FOR THE YEAR ENDING
DECEMBER 31, 2024
of the

Care Improvement Plus South Central Insurance Company

In the state of Nebraska

Total Assets 9,346,045,935

Total Liabilities 4,988,356,457

Aggregate write-ins 0

for special surplus funds

Common Capital 2,000,000

Stock Preferred Capital 0

Aggregate Write-ins for 0

Other Than Special Surplus Funds 0

Surplus Notes Gross Paid in and 281,562,960

Contributed Surplus Unassigned funds (surplus) 4,074,126,518

Total Capital and Surplus 4,357,689,478

Total Liabilities, Capital 9,346,045,935

And Surplus

NORTH DAKOTA BUSINESS ONLY
FOR THE YEAR 2024

Total Direct Premiums 93,027,962

Earned Total Direct Losses 84,414,468

Incurred Total Accident and 93,602,541

Health Direct Premiums Earned 84,414,468

Total Accident and Health Direct Losses Incurred

STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE

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

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 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. 2026.

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JON GODFREAD

Commissioner of Insurance

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JON GODFREAD

Commissioner of Insurance

(May. 23 & 30; Jun. 6, 2025)

PUBLIC NOTICE

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

(May. 16 & 23 & 30, 2025)

12575
ABSTRACT OF STATEMENT
FOR THE YEAR ENDING
DECEMBER 31, 2024
of the

SilverScript Insurance Company

In the state of Tennessee

Total Assets 5,508,508,270

Total Liabilities 4,523,722,786

Aggregate write-ins 0

for special surplus funds

Common Capital 2,750,000

Stock Preferred Capital 0

Aggregate Write-ins for 0

Other Than Special Surplus Funds 0

Surplus Notes Gross Paid in and 124,750,000

Contributed Surplus Unassigned funds (surplus) 857,285,484

Total Capital and Surplus 984,785,484

Total Liabilities, Capital 5,508,508,270

And Surplus

NORTH DAKOTA BUSINESS ONLY
FOR THE YEAR 2024

Total Direct Premiums 4,556,800,059

Earned Total Direct Losses 4,616,521,975

Incurred Total Accident and 4,956,887,613

Health Direct Premiums Earned 4,616,521,975

Total Accident and Health Direct Losses Incurred

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OFFICE OF THE COMMISSIONER
OF INSURANCE

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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

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JON GODFREAD

Commissioner of Insurance

(May. 16 & 23 & 30, 2025)

78778
ABSTRACT OF STATEMENT
FOR THE YEAR ENDING
DECEMBER 31, 2024
of the

The Guardian Insurance & Annuity Company, Inc

In the state of Delaware

Total Assets 10,603,254,619

Total Liabilities 10,002,676,468

Aggregate write-ins 0

for special surplus funds

Common Capital 2,500,000

Stock Preferred Capital 0

Aggregate Write-ins for 0

Other Than Special Surplus Funds 0

Surplus Notes Gross Paid in and 936,500,000

Contributed Surplus Unassigned funds (surplus) -338421850

Total Capital and Surplus 600,578,150

Total Liabilities, Capital 10,603,254,618

And Surplus

NORTH DAKOTA BUSINESS ONLY
FOR THE YEAR 2024

Total Direct Premiums 3,370,157

Earned Total Direct Losses 2,072,270

Incurred Total Accident and 0

Health Direct Premiums Earned 0

Total Accident and Health Direct Losses Incurred

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