#### ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2017

| of the  |
|---|
| Municipal Assurance Corp.   |
| In the state of New York  |
| Total Assets823,587,181   |
| Total Liabilities553,193,154  |
| Aggregate write-ins for   |
| Special surplus funds0  |
| Common Capital Stock15,000,000  |
| Preferred Capital Stock0  |
| Aggregate write-ins for   |
| Other than special surplus0   |
| Surplus Notes0  |
| Gross paid in and   |
| Contributed surplus123,670,091<br>Unassigned funds (surplus)131,723,936 |
| Less treasury stock, at cost:   |
| # shares common0  |
| # shares preferred0   |
| Surplus as regards  |
| Policyholders270,394,027  |
| Total Liabilities. Capital  |
| Total Liabilities, Capital And Surplus823,587,181                       |
| NORTH DAKOTA BUSINESS ONLY  |
| FOR THE YEAR 2017   |
| Total Direct Premiums   |
| Earned1,487   |
| Total Direct Losses   |
| Incurred0   |
| Total Accident and Health Direct Premiums                               |
| Earned0T  |
| otal Accident and Health Direct Losses                                  |
| Incurred0 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 certified the North Dakota, do hereby certi tify that the foregoing is a true Abstract of Statement, as officially filed by the Company IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this of-fice at Bismarck, the first day of May, A.D.

2018 (SEAL). JON GODFREAD Commissioner 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 business for the year ending December 31. 2017 ness for the year ending December 31, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

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

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 autho-rized insurance in the state according to the laws thereof, until the 30th day of April, A.D.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL)

Nationwide Affinity Insurance Company of

nmissioner of Insurance
Published May 7, 14, & 21, 2018

#### 26093 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2017 FOR THE YEAR ENDING DECEMBER 31, 2017

| America                       |             |
|-------------------------------|-------------|
| In the state of Ohio          |             |
| Total Assets                  | 296,712,795 |
| Total Liabilities             |             |
| Aggregate write-ins for       |             |
| Special surplus funds         | 0           |
| Common Capital Stock          | 5,000,000   |
| Preferred Capital Stock       | 0           |
| Aggregate write-ins for       |             |
| Other than special surplus    | 0           |
| Surplus Notes                 | 0           |
| Gross paid in and             |             |
| Contributed surplus           | 6,372,729   |
| Unassigned funds (surplus)    | 643,333     |
| Less treasury stock, at cost: |             |
| # shares common               | 0           |
| # shares preferred            | 0           |
| Surplus as regards            |             |
| Policyholders                 | 12,016,062  |
| Total Liabilities, Capital    |             |
| And Surplus                   | 296,712,795 |
| NORTH DAKOTA BUSIN            |             |
| FOR THE YEAR 2                | 2017        |
| Total Direct Premiums         |             |
| Earned                        | 0           |
| Total Direct Losses           | 0           |
| Incurred                      |             |
| Total Accident and Health Dir |             |
| Earned                        |             |
| Total Accident and Health Dir | ect losses  |

### STATE OF NORTH DAKOTA

.....0

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 TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 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 business for the year ending December 31, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

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

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 said laws, do nereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of autho-rized insurance in the state according to the laws thereof, until the 30th day of April, A.D.

IN TESTIMONY WHEREOF, I have hereunto IN 1ESTIMONY WHEREUF, I have nereunto set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL) JON GODFREAD Commissioner of Insurance Published May 7, 14, & 21, 2018

### ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2017

| National Farmers Uni     | ion Property & Casualty |
|--------------------------|-------------------------|
| Company                  |                         |
| In the state of Wiscor   | nsin                    |
| Total Assets             | 134,145,686             |
| Total Liabilities        | 92,014,471              |
| Aggregate write-ins for  | or                      |
| Special surplus funds    | s                       |
| Common Capital Sto       | ck4,200,000             |
| Preferred Capital Sto    | ck                      |
| Aggregate write-ins f    | or                      |
| Other than special su    | ırplusC                 |
| Surplus Notes            | 0                       |
| Gross paid in and        |                         |
|                          | 34,454,297              |
|                          | urplus)3,476,919        |
| Less treasury stock,     |                         |
| # shares common          | (                       |
|                          |                         |
| Surplus as regards       |                         |
|                          | 42,131,216              |
| Total Liabilities, Capit | al                      |
|                          | 134,145,687             |
|                          | A BUSINESS ONLY         |
|                          | YEAR 2017               |
| Total Direct Premium     |                         |
| Formed                   | 43 868 363              |

.43,868,263 Total Direct Losses Incurred.. Incurred......29,101,221
Total Accident and Health Direct Premiums
OT .29.191.229 Earned.....otal Accident and Health Direct Losses

### 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 May, A.D. 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 or-ganized 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, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law

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.

IN TESTIMONY WHEREOF. I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL)

JON GODFREAD

Commissioner of Insurance

### Published May 7, 14, & 21, 2018 ABSTRACT OF STATEMENT

| Company                        |              |
|--------------------------------|--------------|
| In the state of Iowa           |              |
| Total Assets                   | .758.583.327 |
| Total Liabilities              | .566,950,295 |
| Aggregate write-ins for        |              |
| Special surplus funds          | 0            |
| Common Capital Stock           | 5,689,976    |
| Preferred Capital Stock        |              |
| Aggregate write-ins for        |              |
| Other than special surplus     | 0            |
| Surplus Notes                  |              |
| Gross paid in and              |              |
| Contributed surplus            | 145,250,018  |
| Unassigned funds (surplus)     | 40,693,038   |
| Less treasury stock, at cost:  |              |
| # shares common                | 0            |
| # shares preferred             | 0            |
| Surplus as regards             |              |
| Policyholders                  | 191,633,032  |
| Total Liabilities, Capital     |              |
| And Surplus                    |              |
| NORTH DAKOTA BUSINE            |              |
| FOR THE YEAR 20                | 17           |
| Total Direct Premiums          |              |
| Earned                         | 12,622,300   |
| Total Direct Losses            |              |
| Incurred                       | 7,763,438    |
| Total Accident and Health Dire |              |
| Earned                         |              |
| Total Accident and Health Dire | ct Losses    |
|                                |              |

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

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 TESTIMONY WHEREOF, I have hereunto

set my hand and affixed the seal of this of-fice at Bismarck, the first day of May, A.D. 2018 (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 or-ganized 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, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

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 autho-rized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2019. IN TESTIMONY WHEREOF, I have hereunto

set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL)

JON GODFREAD
Commissioner of Insurance
Published May 7, 14, & 21, 2018

### ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2017

| 00                             |            |
|--------------------------------|------------|
| National Insurance Association |            |
| in the state of Indiana        |            |
| Total Assets                   | 13,755,336 |
| Total Liabilities              |            |
| Aggregate write-ins for        |            |
| Special surplus funds          | 0          |
| Common Capital Stock           |            |
| Preferred Capital Stock        | 0          |
| Aggregate write-ins for        |            |
| Other than special surplus     | 0          |
| Surplus Notes                  | 10 000 000 |
| Gross paid in and              | ,000,000   |
| Contributed surplus            | 0          |
| Unassigned funds (surplus)     |            |
| Less treasury stock, at cost:  |            |
| # shares common                | 0          |
| # shares preferred             |            |
| Surplus as regards             |            |
| Policyholders                  | 13 753 307 |
| Total Liabilities, Capital     |            |
| And Surplus                    | 13 755 336 |
| NORTH DAKOTA BUSINES           |            |
| FOR THE YEAR 201               |            |
| Total Direct Premiums          | •          |
| Earned                         | 0          |
|                                |            |

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

Total Accident and Health Direct Premiums

Earned.....otal Accident and Health Direct Losses

Total Direct Losses

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 TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this of-fice at Bismarck, the first day of May, A.D. 2018 (SEAL). JON GODFREAD

# NOTIFICATION NOTIF

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, 2017 conformable to the equipments of the laws. conformable to the requirements of the laws of this State regarding the business of insur-

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

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.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL) JON GODFREAD

missioner of Insurance
Published May 7, 14, & 21, 2018

#### ABSTRACT OF STATEMENT FOR THE VEAR ENDING FOR THE YEAR ENDING **DECEMBER 31, 2017**

| In the state of Ohio          |                |
|-------------------------------|----------------|
| Total Assets                  | .8,598,084,549 |
| Total Liabilities             |                |
| Aggregate write-ins for       |                |
| Special surplus funds         | 0              |
| Common Capital Stock          |                |
| Preferred Capital Stock       |                |
| Aggregate write-ins for       |                |
| Other than special surplus    | 0              |
| Surplus Notes                 |                |
| Gross paid in and             |                |
| Contributed surplus           | 0              |
| Unassigned funds (surplus)    | .2.380.280.688 |
| Less treasury stock, at cost: | ,,,            |
| #shares common                | 0              |
| # shares preferred            |                |
| Surplus as regards            |                |
| Policyholders                 | .2.380.280.688 |
| Total Liabilities, Capital    | ,,             |
| And Surplus                   | .8.598.084.549 |
| NORTH DAKOTA BUSIN            |                |
| FOR THE YEAR 2                | 2017           |
| Total Direct Premiums         |                |
| Earned                        | 18.137         |
| Total Direct Losses           | -,             |
| Incurred                      | -8             |

### Total Accident and Health Direct Losses Incurred.....STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

Total Accident and Health Direct Premiums

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 TESTIMONY WHEREOF I have hereunto

set my hand and affixed the seal of this of-fice at Bismarck, the first day of May, A.D. 2018 (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 or-

ganized under the laws of its state or counganized which the laws in this state of contribution of the laws in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

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

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.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL) JON GODFREAD

nmissioner of Insurance
Published May 7, 14, & 21, 2018

### ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2017 of the National Specialty Insurance Company

in the state of Texas

| 336     | Iotal Assets88,095,379                          |
|---------|---|
| 029     | Total Liabilities37,388,731                     |
|         | Aggregate write-ins for                         |
| 0       | Special surplus funds0                          |
| 0       | Common Capital Stock3,500,000                   |
| 0       | Preferred Capital Stock0                        |
|         | Aggregate write-ins for                         |
| 0       | Other than special surplus0                     |
| 000     | Surplus Notes0                                  |
|         | Gross paid in and                               |
| 0       | Contributed surplus28,850,000                   |
| 307     | Unassigned funds (surplus)18,356,648            |
|         | Less treasury stock, at cost:                   |
| 0       | # shares common0                                |
| 0       | # shares preferred0                             |
|         | Surplus as regards                              |
| 307     | Policyholders50,706,648                         |
|         | Total Liabilities, Capital                      |
| 336     | And Surplus88,095,379                           |
|         | NORTH DAKOTA BUSINESS ONLY<br>FOR THE YEAR 2017 |
|         |   |
| 0       | Total Direct Premiums                           |
| 0       | Earned  |
| 0       | Total Direct Losses<br>Incurred0                |
| U<br>ns | Total Accident and Health Direct Premiums       |
| 115     | iotal Accident and Health Direct Premiums       |

#### Earned....otal 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 TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this of-fice at Bismarck, the first day of May, A.D. JON GODFREAD

# Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER 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 business for the year ending December 31, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

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

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.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL)

missioner of Insurance
Published May 7, 14, & 21, 2018

### ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2017

National Surety Corporation

| reational ourcey corporation  |             |
|-------------------------------|-------------|
| In the state of Illinois      |             |
| Total Assets                  | 112,650,766 |
| Total Liabilities             |             |
| Aggregate write-ins for       | -,-         |
| Special surplus funds         | 0           |
| Common Capital Stock          | 10.501.770  |
| Preferred Capital Stock       |             |
| Aggregate write-ins for       |             |
| Other than special surplus    | 0           |
| Surplus Notes                 |             |
| Gross paid in and             |             |
| Contributed surplus           | 51 745 541  |
| Unassigned funds (surplus)    |             |
| Less treasury stock, at cost: |             |
| # shares common               | n           |
| # shares preferred            |             |
| Surplus as regards            |             |
| Policyholders                 | 66 672 683  |
| Total Liabilities, Capital    | 00,012,000  |
| And Surplus                   | 112 650 766 |
| NORTH DAKOTA BUSIN            | IFSS ONLY   |
| FOR THE YEAR 2                |             |
| Total Direct Premiums         | .017        |
| Earned                        | 204 411 000 |
| Total Direct Losses           | 204,411,000 |
|                               |             |

#### Incurred......190,000,000 Total Accident and Health Direct Premiums Total Accident and Health Direct Losses Incurred. STATE OF NORTH DAKOTA

.195.568.663

Incurred.

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 May, A.D.

JON GODERFAD 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, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

ance 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

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. IN TESTIMONY WHEREOF, I have hereunto

set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL) JON GODFREAD

Commissioner of Insurance Published May 7, 14, & 21, 2018

### ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2017

of the
National Union Fire Insurance Company of Pittsburgh PA In the state of Pennsylvania Total Assets. ..25.661.135.840 Total Liabilities .19,229,977,876 Aggregate write-ins for Special surplus funds... Common Capital Stock. ...4,478,750 Preferred Capital Stock. ..6,010,516,472 Contributed surplus. Unassigned funds (surplus)......13,417,155 Less treasury stock, at cost:
#shares common....
# shares preferred....
# shares preferred... Surplus as regards .6,431,157,964 Policyholders. Total Liabilities, Capital ..25.661.135.840

NORTH DAKOTA BUSINESS ONLY
FOR THE YEAR 2017
Total Direct Premiums Earned...... Total Direct Losses .4.564.311 Total Accident and Health Direct Premiums Earned......
Total Accident and Health Direct Losses

### 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 of-fice at Bismarck, the first day of May, A.D. 2018 (SEAL). JON GODFREAD Commissioner 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 business for the vear ending December 31. 2017 ness for the year ending December 31, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

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

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 autho-rized insurance in the state according to the laws thereof, until the 30th day of April, A.D.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL)

JON GODFREAD

Commissioner of Insurance

Published May 7, 14, & 21, 2018

### ABSTRACT OF STATEMENT

| of the                                | of the                             |
|---------------------------------------|------------------------------------|
| onwide Mutual Insurance Company       | Nau Country Insurance Company      |
| ne state of Ohio                      | In the state of Minnesota          |
| ıl Assets35,425,425,127               | Total Assets966,889,               |
| d Liabilities23,232,091,805           | Total Liabilities                  |
| regate write-ins for                  | Aggregate write-ins for            |
| cial surplus funds0                   | Special surplus funds              |
| nmon Capital Stock0                   | Common Capital Stock3,000,         |
| erred Capital Stock0                  | Preferred Capital Stock            |
| regate write-ins for                  | Aggregate write-ins for            |
| er than special surplus0              | Other than special surplus         |
| olus Notes2,192,136,159               | Surplus Notes                      |
| ss paid in and                        | Gross paid in and                  |
| tributed surplus0                     | Contributed surplus178,120,        |
| ssigned funds (surplus)10,001,197,163 | Unassigned funds (surplus)101,468, |
| s treasury stock, at cost:            | Less treasury stock, at cost:      |
| ares common0                          | # shares common                    |
| ares preferred0                       | # shares preferred                 |
| olus as regards                       | Surplus as regards                 |
| cyholders12,193,333,322               | Policyholders282,588,              |
| l Liabilities, Capital                | Total Liabilities, Capital         |
| Surplus35,425,425,127                 | And Surplus966,889,                |
| NORTH DAKOTA BUSINESS ONLY            | NORTH DAKOTA BUSINESS ONLY         |
| FOR THE YEAR 2017                     | FOR THE YEAR 2017                  |
| I Direct Premiums                     | Total Direct Premiums              |
|                                       |                                    |

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER
OF INSURANCE

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 is the office. in this office. IN TESTIMONY WHEREOF, I have hereunto

JON GODFREAD

### Commissioner of Insurance STATE OF NORTH DAKOTA

domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

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 GODERFAD. 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.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL) JON GODFREAD

missioner of Insurance

Published May 7, 14, & 21, 2018

# FOR THE YEAR ENDING DECEMBER 31, 2017

| In the state of Ohio          |             | In the |
|-------------------------------|-------------|--------|
| Total Assets35,               | 425,425,127 | Total  |
| Total Liabilities23,          | 232,091,805 | Total  |
| Aggregate write-ins for       |             | Aggre  |
| Special surplus funds         |             | Speci  |
| Common Capital Stock          |             | Comn   |
| Preferred Capital Stock       | 0           | Prefer |
| Aggregate write-ins for       |             | Aggre  |
| Other than special surplus    |             | Other  |
| Surplus Notes2,               |             | Surpli |
| Gross paid in and             |             | Gross  |
| Contributed surplus           |             | Contr  |
| Unassigned funds (surplus)10  |             | Unass  |
| Less treasury stock, at cost: |             | Less 1 |
| # shares common               |             | #shar  |
| # shares preferred            |             | # sha  |
| Surplus as regards            |             | Surpli |
| Policyholders12,              |             | Policy |
| Total Liabilities, Capital    | 105 105 107 | Total  |
| And Surplus35,                | 425,425,127 | And S  |
| NORTH DAKOTA BUSINES          |             | N      |
| FOR THE YEAR 201              |             |        |
| Total Direct Premiums         | 4 475 470   | Total  |

Total Direct Losses .942.106 Incurred.. Total Accident and Health Direct Premiums Total Accident and Health Direct Losses

set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2018

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

### ABSTRACT OF STATEMENT FOR THE VEAR STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2017

| iii tile state oi wiiiiilesota |             |
|--------------------------------|-------------|
| Total Assets                   | 966,889,745 |
| Total Liabilities              | 684,301,276 |
| Aggregate write-ins for        |             |
| Special surplus funds          |             |
| Common Capital Stock           | 3.000.00    |
| Preferred Capital Stock        |             |
| Aggregate write-ins for        |             |
| Other than special surplus     |             |
| Surplus Notes                  |             |
| Gross paid in and              |             |
| Contributed surplus            | 178 120 000 |
| Unassigned funds (surplus)     |             |
| Less treasury stock, at cost:  | 101,400,40  |
| # shares common                |             |
| # shares preferred             |             |
| Surplus as regards             |             |
| Policyholders                  | 282 588 469 |
| Total Liabilities, Capital     | 202,300,40  |
| And Surplus                    | 966 889 7/1 |
| NORTH DAKOTA BUSIN             |             |
| FOR THE YEAR 2                 |             |
| Total Direct Premiums          | 2017        |
|                                |             |

Earned. ..244.625.482 Total Direct Losses Incurred. .193.116.095 Total Accident and Health Direct Premiums 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 TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this of-fice at Bismarck, the first day of May, A.D

2018 (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, 2017 ness for the year ending December 31, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

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

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.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL) JON GODFREAD
Commissioner of Insurance
Published May 7, 14, & 21, 2018

#### 15865 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2017 NCMIC Insurance Company

In the state of lowa Total Assets... 782.763.186 Total Liabilities .483,306,169 Aggregate write-ins for Special surplus funds... .1,000,000 Common Capital Stock ..5,000,000 Preferred Capital Stock .8,000,000 Contributed surplus. Unassigned funds (surplus). ..285,457,017 Less treasury stock, at cost:
# shares common....
# shares preferred.... Surplus as regards .299,457,017 Policyholders. Total Liabilities, Capital ..782.763.186 NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2017 Total Direct Premiums

#### Total Direct Losses .275.762 Total Accident and Health Direct Premiums 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 TESTIMONY WHEREOF, I have hereunto

set my hand and affixed the seal of this of-fice at Bismarck, the first day of May, A.D. 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, 2017 conformable to the requirements of the laws conformable to the requirements of the laws of this State regarding the business of insur-

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

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 risadifolized 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.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL)

JON GODFREAD
Commissioner of Insurance
Published May 7, 14, & 21, 2018

# Plan for fun and sun in North Dakota this May

right in North Dakota, where you can have your say of outdoor adventure, live entertainment or quiet retreats. Theodore Roosevelt National Park turns 40 this year, so carve out some time to experience this spectacular national treasure. A range of musical talent travels through the area this month, so don't miss out on fun, lively performances. Hit the hiking and biking trails around the state or run Fargo's streets in one of several race events at the Fargo Marathon. To learn more about these events, and for a complete list of things to see and do, go to NDtourism. com or call 800-435-5663 or 701-328-2525

### **Bismarck Bucks**

The Bismarck Bucks are a Fargo May 14-19 Champions Indoor Football Back for its 14th year, the genres from country, Amer-

Event Center. The Bucks are playoff contenders in the North Conference. http:// bismarckbucks.com/.

Bismarck Bucks vs. Oma-

ha Beef, May 12, Bismarck Northern Plains Ballet: Peter Pan

Bismarck May 11-13 Follow Wendy, John and Michael on their adventure to Neverland, where they discover Peter Pan's world of mermaids, pirates, lost boys and fairies. This whimsical production is sure to delight audiences as this crew of characters flies, twirls and dances against a backdrop

of incredible sets. www.face-

book.com/northernplains-

dance 701-530-0986. Fargo Marathon

May starts summer off (CIF) team playing home Fargo Marathon unites runght in North Dakota, games in the Bismarck ners from all over the upper Midwest. Enjoy a week of fun leading up to the big event, including a Furgo dog run and a youth run. This year's race visits all three university campuses in the Fargo-Moorhead area. www.fargomarathon.com.

### City Rock Fest Tour

Jamestown May 12 Connect with fellow music lovers at the Jamestown Civic Center for a concert featuring five Christian rock bands in one show: Disciple, Seventh Day Slumber, Random Hero, Spoken and As We Ascend. 701-252-4835.

### Wynonna and the Big Noise **Fort Yates** May 19

Join Wynonna Judd and her band The Big Noise for a night of "root-sy" work that encompasses music

icana, blues, soul and rock. Art Olson Car Show and The band will perform at the Prairie Knights Casino. http://prairieknights.com/ events/wynonna-the-bignoise/#.WuDNDYjwa01 701-854-7777.

#### Extreme North Dakota Spring Primer Adventure Race (END-SPAR) Walhalla May 20

Looking for some grueling but rewarding - adventure this May? Check out END-SPAR. The event is designed for newbies to adventure racing and is intended to allow them to get their feet wet (and surely muddy) without the full commitment to a longer race. And for the veteran adventure racers, it's a great way to start getting back into 'race shape' after the long winter. https://endracing.com/ end-spar 701-645-3630.

### Swap Meet

West Fargo May 20 View the nearly 100 cars on display at the Art Olson Car Show and Swap Meet at West Fargo's Bonanzaville. Visit with like-minded car lovers and enjoy the crafts and collectibles on display. Food and drink will be available. http://www. fhcca.com/swap-meet--carshow.html 701-238-4992.

#### Sky Fest over Fort Stevenson

Garrison May 26–28 Take full advantage of North Dakota's gusty weather and paint the sky with kites of all shapes, colors and sizes at Fort Stevenson's annual Sky Fest. Kiters of all ages and skills are welcome. Participants can build a kite to fly at the festival or bring their own. http://www.skyfestnd.com/.

#### Badlands Gravel Battle 100 +Medora May 27

If you love mountain bik-

ing on single track, you won't want to miss the opportunity to race across it in North Dakota's incredible badlands. The Badlands Gravel Battle is a 120-mile bicycle competition through the state's gravel and scoria backroads that pushes participants to their physical limits. The race route begins and ends in charming Medora and crosses the Little Missouri River. www.experienceland.org 701-570-9138.

These are just a few of North Dakota's activities and events taking place in May. For more information, go to NDtourism.com or phone 701-328-2525 or 800-435-5663.

### N.D. INSURANCE LEGALS

|                               | 11149 |
|-------------------------------|-------|
| ABSTRACT OF STATEMENT         |       |
| FOR THE YEAR ENDING           |       |
| DECEMBER 31, 2017             |       |
| of the                        |       |
| e Employers' Mutual Insurance |       |
|                               |       |

| of the   |  |  |  |
|--|--|--|--|
| Maine Employers' Mutual Insurance                    |  |  |  |
| Company  |  |  |  |
| In the state of Maine                                |  |  |  |
| Total Assets916,717,048                              |  |  |  |
| Total Liabilities477,719,972                         |  |  |  |
| Aggregate write-ins for                              |  |  |  |
| Special surplus funds                                |  |  |  |
| Common Capital Stock                                 |  |  |  |
| Preferred Capital Stock                              |  |  |  |
| Aggregate write-ins for                              |  |  |  |
| Other than special surplus1,288,264                  |  |  |  |
| Surplus Notes  |  |  |  |
| Gross paid in and                                    |  |  |  |
| Contributed surplus3,180,808                         |  |  |  |
| Unassigned funds (surplus)434,528,004                |  |  |  |
| Less treasury stock, at cost:                        |  |  |  |
| # shares common                                      |  |  |  |
| # shares preferred                                   |  |  |  |
| Surplus as regards Policyholders438,997,076          |  |  |  |
|  |  |  |  |
| Total Liabilities, Capital<br>And Surplus916,717,048 |  |  |  |
| NORTH DAKOTA BUSINESS ONLY                           |  |  |  |
| FOR THE YEAR 2017                                    |  |  |  |
|  |  |  |  |

Total Direct Losses Incurred......Total Accident and Health Direct Premiums Total Accident and Health Direct Losses

Total Direct Premiums

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 TESTIMONY WHEREOF, I have hereunto

set my hand and affixed the seal of this of-fice at Bismarck, the first day of May, A.D. 2018 (SEAL). 2018 (SEAL).
JON GODFREAD
Commissioner of Insurance
STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE
COMPANYIS 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 business for the year ending December 31, 2017 conformable to the requirements of the laws of this State regarding the business of insurwhereas, 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

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.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL) JON GODFREAD Commissioner of Insurance

Published May 7, 14, & 21, 2018

# ABSTRACT OF STATEMENT

| OI LITE                       |             |  |  |
|-------------------------------|-------------|--|--|
| Medica Insurance Company      |             |  |  |
| In the state of Minnesota     |             |  |  |
| Total Assets                  | 807,428,287 |  |  |
| Total Liabilities             | 386,461,124 |  |  |
| Aggregate write-ins for       |             |  |  |
| Special surplus funds         | 53,000,000  |  |  |
| Common Capital Stock          | 1,000,000   |  |  |
| Preferred Capital Stock       |             |  |  |
| Aggregate write-ins for       |             |  |  |
| Other than special surplus    | C           |  |  |
| Surplus Notes                 | 0           |  |  |
| Gross paid in and             |             |  |  |
| Contributed surplus           |             |  |  |
| Unassigned funds (surplus)    | 271,867,163 |  |  |
| Less treasury stock, at cost: |             |  |  |
| # shares common               | C           |  |  |
| # shares preferred            |             |  |  |
| Surplus as regards            |             |  |  |
| Policyholders                 | 420,967,163 |  |  |
| Total Liabilities, Capital    |             |  |  |
| And Surplus                   |             |  |  |
| NORTH DAKOTA BUSINESS ONLY    |             |  |  |
| FOR THE VEAR 0047             |             |  |  |

FOR THE YEAR 2017 Total Direct Premiums Earned. .152,242,084 Total Direct Losses .118.196.108 .118,196,108 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 TESTIMONY WHEREOF, I have hereunto

set my hand and affixed the seal of this of-fice at Bismarck, the first day of May, A.D.

2018 (SEAL). JON GODFREAD mmissioner 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, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law

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.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bism day of May, A.D., 2018 (SEAL) JON GODFREAD

Commissioner of Insurance Published May 7, 14, & 21, 2018

### ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2017

| Medicus Insurance Company     |            |
|-------------------------------|------------|
| in the state of Texas         |            |
| Total Assets                  | 38,217,838 |
| Total Liabilities             | 4,939,586  |
| Aggregate write-ins for       |            |
| Special surplus funds         |            |
| Common Capital Stock          | 2,500,000  |
| Preferred Capital Stock       |            |
| Aggregate write-ins for       |            |
| Other than special surplus    |            |
| Surplus Notes                 |            |
| Gross paid in and             |            |
| Contributed surplus           | 25,750,000 |
| Unassigned funds (surplus)    | 5,028,252  |
| Less treasury stock, at cost: |            |
| # shares common               |            |
| # shares preferred            | 0          |
| Surplus as regards            |            |
| Policyholders                 | 33,278,252 |
| Total Liabilities, Capital    |            |
| And Surplus                   | 38,217,838 |
| NORTH DAKOTA BUSINE           |            |
| EOD THE VEAD 20               | 117        |

FOR THE YEAR 2017 Total Direct Premiums Total Direct Losses Total Accident and Health Direct Premiums 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 cer-

tify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office 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 May, A.D.

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

JON GODERFAD

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 bus ness for the year ending December 31, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law 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. IN TESTIMONY WHEREOF. I have hereunto

set my hand and seal at Bism day of May, A.D., 2018 (SEAL) JON GODFREAD Commissioner of Insurance Published May 7, 14, & 21, 2018

### ABSTRACT OF STATEMENT of the MemberSelect Insurance Company

| in the state of Michigan      |             |
|-------------------------------|-------------|
| Total Assets                  | 546.850.864 |
| Total Liabilities             |             |
| Aggregate write-ins for       |             |
| Special surplus funds         | 0           |
| Common Capital Stock          |             |
| Preferred Capital Stock       | 0           |
| Aggregate write-ins for       |             |
| Other than special surplus    | 0           |
| Surplus Notes                 |             |
| Gross paid in and             |             |
| Contributed surplus           | 5,700,000   |
| Unassigned funds (surplus)    | 148,798,166 |
| Less treasury stock, at cost: |             |
| # shares common               | 0           |
| # shares preferred            | 0           |
| Surplus as regards            |             |
| Policyholders                 | 159,498,166 |
| Total Liabilities, Capital    |             |
| And Surplus                   | 546,850,864 |
| NORTH DOKOTA BUSINE           |             |
| EOD THE VEAD OF               | 117         |

FOR THE YEAR 2017
Total Direct Premiums Earned. .3,037,512 Total Direct Losses 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 May, A.D.

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

JON GODFREAD

WHEREAS, the above corporation duly or-ganized 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, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

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

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. 2010.

IN TESTIMONY WHEREOF. I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL) JON GODFREAD Commissioner of Insurance

Published May 7, 14, & 21, 2018

### ABSTRACT OF STATEMENT of the

| ivilo General insurance Corpor | alion      |
|--------------------------------|------------|
| In the state of Michigan       |            |
| Total Assets                   | 57,185,321 |
| Total Liabilities              | 29.838.536 |
| Aggregate write-in for         | .,,        |
| Special surplus funds          | 0          |
| Common Capital Stock           | 5.000.000  |
| Preferred Capital Stock        |            |
| Aggregate write-ins for        |            |
| Other than special surplus     | 0          |
| Surplus Notes                  | 0          |
| Gross paid in and              |            |
| Contributed surplus            | 13,500,000 |
| Unassigned funds (surplus)     |            |
| Less treasury stock, at cost:  |            |
| # shares common                | 0          |
| # shares preferred             | 0          |
| Surplus as regards             |            |
| Policyholders                  | 27,346,785 |
| Total Liabilities, Capital     |            |
| And Surplus                    | 57,185,321 |
| NORTH DAKOTA BUSINE            |            |
| EOD THE VEAD ON                | 17         |

FOR THE YEAR 2017 Total Direct Premiums Earned. Total Direct Losses Total Accident and Health Direct Premiums Total Accident and Health Direct Losses

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 TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this of-fice at Bismarck, the first day of May, A.D.

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

2018 (SEAL).

JON GODFREAD

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, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

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

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 autho-rized insurance in the state according to the laws thereof, until the 30th day of April, A.D. IN TESTIMONY WHEREOF, I have hereunto

set my hand and seal at Bism day of May, A.D., 2018 (SEAL) JON GODFREAD Commissioner of Insurance Published May 7, 14, & 21, 2018

### 23574 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2017

| of the                                 |
|--|
| Midwest Family Mutual Insurance Compan |
| In the state of lowa                   |
| Total Assets242,623,073                |
| Total Liabilities173,697,739           |
| Aggregate write-ins for                |
| Special surplus funds1,000,00          |
| Common Capital Stock                   |
| Preferred Capital Stock                |
| Aggregate write-ins for                |
| Other than special surplus             |
| Surplus Notes4,296,95                  |
| Gross paid in and                      |
| Contributed surplus                    |
| Unassigned funds (surplus) 63,628,38   |
| Less treasury stock, at cost:          |
| # shares common                        |
| # shares preferred                     |
| Surplus as regards                     |
| Policyholders                          |
| Total Liabilities, Capital             |
| And Surplus242,623,075                 |
| NORTH DAKOTA BUSINESS ONLY             |
| FOR THE YEAR 2017                      |
|  |

Total Direct Premiums Earned... 7.458.325 Total Direct Losses 2 694 927 otal 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 May, A.D. 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 or-ganized 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, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

whereas, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compli ance with the requirements of insurance law

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. IN TESTIMONY WHEREOF, I have hereunto

set my hand and seal at Bism day of May, A.D., 2018 (SEAL) JON GODFREAD

Commissioner of Insurance Published May 7, 14, & 21, 2018

### ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2017

| Meridian Security Insurance Company<br>In the state of Indiana |
|--|
| Total Assets137,660,694  |
| Total Liabilities64,751,031                                    |
| Aggregate write-ins for  |
| Special surplus funds  |
| Common Capital Stock5,000,000                                  |
| Preferred Capital Stock  |
| Aggregate write-ins for  |
| Other than special surplus                                     |
| Surplus Notes0   |
| Gross paid in and  |
| Contributed surplus25,609,636                                  |
| Unassigned funds (surplus)42,300,02                            |
| Less treasury stock, at cost:                                  |
| # shares common  |
| # shares preferred   |
| Surplus as regards   |
| Policyholders72,909,663  |
| Total Liabilities, Capital                                     |
| And Surplus137,660,694   |
| NORTH DAKOTA BUSINESS ONLY                                     |
| FOR THE YEAR 2017  |
| Total Direct Premiums  |

.6.497.872 Total Direct Losses Total Accident and Health Direct

Total Accident and Health Direct Losses 

OFFICE OF THE COMMISSIONER
OF INSURANCE
I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby cer-tify 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 May, A.D. 2018 JON GODEREAD

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

COMPANY'S CERTIFICATE OF AUTHORITY WHEREAS, the above corporation duly or-ganized 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, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

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, 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.

IN TESTIMONY WHEREOF. I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL) JON GODFREAD Commissioner of Insurance

Published May 7, 14, & 21, 2018

# ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2017

|        | OI LITE                  |              |
|--------|--------------------------|--------------|
| Metro  | politan Casualty Insura  | ance Company |
| In the | state of Rhode Island    |              |
| Total  | Assets                   | 234,915,603  |
| Total  | Liabilities              | 166,485,481  |
| Aggre  | egate write-ins for      |              |
| Spec   | ial surplus funds        | 0            |
| Comr   | mon Capital Stock        | 3,000,000    |
| Prefe  | rred Capital Stock       | 0            |
| Aggre  | egate write-ins for      |              |
| Other  | r than special surplus   | 0            |
| Surpl  | us Notes                 | 0            |
|        | s paid in and            |              |
|        | ributed surplus          |              |
|        | signed funds (surplus)   |              |
|        | treasury stock, at cost: |              |
|        | res common               |              |
|        | res preferred            | 0            |
|        | us as regards            |              |
|        | yholders                 | 68,430,122   |
|        | Liabilities, Capital     |              |
|        | Surplus                  |              |
| N      | ORTH DAKOTA BUSI         |              |
|        |                          |              |

FOR THE YEAR 2017 Total Direct Premiums Total Direct Losses Total Accident and Health Direct Premiums Total Accident and Health Direct Losses

of the State of North Dakota, do hereby cer-tify that the foregoing is a true Abstract of Statement, as officially filed by the Company

in this office.
IN TESTIMONY WHEREOF, I have hereunto fice at Bismarck, the first day of May, A.D. 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 or

ganized 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, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

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

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.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL) JON GODFREAD Commissioner of Insurance

Published May 7, 14, & 21, 2018

### ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2017 Metropolitan Group Property and Casualty

| Metropolitan Group Property   | and   | Casuaii  |
|-------------------------------|-------|----------|
| Insurance Company             |       |          |
| In the state of Rhode Island  |       |          |
| Total Assets                  |       |          |
| Total Liabilities             | 300,  | 863,464  |
| Aggregate write-ins for       |       |          |
| Special surplus funds         |       |          |
| Common Capital Stock          | 3     | .000.000 |
| Preferred Capital Stock       |       |          |
| Aggregate write-ins for       |       |          |
| Other than special surplus    |       | 0        |
| Surplus Notes                 |       |          |
| Gross paid in and             |       |          |
| Contributed surplus           | 192   | ,546,56  |
| Unassigned funds (surplus)    |       |          |
| Less treasury stock, at cost: |       |          |
| # shares common               |       |          |
| # shares preferred            |       |          |
| Surplus as regards            |       |          |
| Policyholders                 | 386.  | 162,202  |
| Total Liabilities, Capital    |       |          |
| And Surplus                   | 687   | ,025,666 |
| NORTH DAKOTA BUSINE           | ESS C | NLY      |
| FOR THE VEAR OF               | 147   |          |

FOR THE YEAR 2017 Total Direct Premiums Total Accident and Health Direct Premiums

Incurred. otal Accident and Health Direct Losses STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE
OF OF INSURANCE

of the State of North Dakota, do hereby cer-tify that the foregoing is a true Abstract of Statement, as officially filed by the Company IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2018

Jon Godfread, Commissioner of Insurance

(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, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

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, 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.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL) JON GODFREAD

Published May 7, 14, & 21, 2018

### ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2017

| of the                        |                  |
|-------------------------------|------------------|
| Metropolitan Property & Cas   | sualty Insurance |
| Company                       |                  |
| In the state of Rhode Island  |                  |
| Total Assets                  |                  |
| Total Liabilities             | 3,841,902,419    |
| Aggregate write-ins for       |                  |
| Special surplus funds         |                  |
| Common Capital Stock          |                  |
| Preferred Capital Stock       | 315,000,00       |
| Aggregate write-ins for       |                  |
| Other than special surplus    |                  |
| Surplus Notes                 | (                |
| Gross paid in and             |                  |
| Contributed surplus           |                  |
| Unassigned funds (surplus)    | 846,469,12       |
| Less treasury stock, at cost: |                  |
| # shares common               |                  |
| # shares preferred            |                  |
| Surplus as regards            |                  |
| Policyholders                 | 2,265,527,25     |
| Total Liabilities, Capital    |                  |

And Surplus......6,107,429,670
NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2017

Total Direct Premiums Incurred Total Accident and Health Direct Premiums Total Accident and Health Direct Losses

STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE

I, Jon Godfread, Commissioner of Insurance n, John Gourread, Commissioner of Insurance of the State of North Dakota, do hereby cer-tify 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 May, A.D. 2018

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, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

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.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL) JON GODFREAD

nmissioner of Insurance Published May 7, 14, & 21, 2018

# ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2017

| of the                                |  |  |  |
|---------------------------------------|--|--|--|
| Milbank Insurance Company             |  |  |  |
| In the state of Iowa                  |  |  |  |
| Total Assets635,913,929               |  |  |  |
| Total Liabilities481,882,138          |  |  |  |
| Aggregate write-ins for               |  |  |  |
| Special surplus funds196,126          |  |  |  |
| Common Capital Stock3,000,000         |  |  |  |
| Preferred Capital Stock0              |  |  |  |
| Aggregate write-ins for               |  |  |  |
| Other than special surplus0           |  |  |  |
| Surplus Notes0                        |  |  |  |
| Gross paid in and                     |  |  |  |
| Contributed surplus41,951,226         |  |  |  |
| Unassigned funds (surplus)108,884,439 |  |  |  |
| Less treasury stock, at cost:         |  |  |  |
| # shares common0                      |  |  |  |
| # shares preferred0                   |  |  |  |
| Surplus as regards                    |  |  |  |
| Policyholders154,031,791              |  |  |  |
| Total Liabilities, Capital            |  |  |  |
| And Surplus635,913,929                |  |  |  |
| NORTH DAKOTA BUSINESS ONLY            |  |  |  |

FOR THE YEAR 2017 Total Direct Premiums Total Direct Losses Total Accident and Health Direct otal Accident and Health Direct Losses

STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE
I, Jon Godfread, Commissioner of Insurance

of the State of North Dakota, do hereby cer-

tify 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 May, A.D. 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, 2017 conformable to the requirements of the laws of this State regarding the business of insur-

ance 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, 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.

IN TESTIMONY WHEREOF. I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL) JON GODFREAD Commissioner of Insurance

Published May 7, 14, & 21, 2018

### ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2017 of the

Mitsui Sumitomo Insurance Company of America In the state of New York Total Assets..... Total Liabilities. ..603,959,624 Aggregate write-ins for Special surplus funds... Common Capital Stock Preferred Capital Stock .5.000.000 Aggregate write-ins for Other than special surplus Surplus Notes.. Gross paid in and Contributed surplus..... Unassigned funds (surplus). 176 139 661 Less treasury stock, at cost: # shares common.. # shares preferred. Surplus as regards .371,861,022 Total Liabilities, Capital NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2017

Total Direct Premiums Incurred Total Accident and Health Direct Premiums otal Accident and Health Direct Losses

STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE

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 official. 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 May, A.D. 2018

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 denield, but filled in this office a country

of domicile, has filed in this office a sworn of dominine, has lined in that solice a sworns statement exhibiting its condition and business for the year ending December 31, 2017 conformable to the requirements of the laws of this State regarding the business of insur-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 autho rized insurance in the state according to the laws thereof, until the 30th day of April, A.D. IN TESTIMONY WHEREOF, I have hereunto

set my hand and seal at Bismarck this first day of May, A.D., 2018 (SEAL) JON GODFREAD

nmissioner of Insurance
Published May 7, 14, & 21, 2018

### Tax Cuts and Jobs Act of 2017: What you need to know now

and Jobs Act of 2017 having been signed into law, here are some of the things you should be thinking about as tax season approaches, according to Robert Fishbein, vice president and corporate counsel, Prudential Finan-

2017 tax returns The new tax law is generally effective starting in 2018, which means that your 2017 income tax return is largely unaffected. However, there may be actions you can take now to benefit from the change. For example, assuming you are eligible, you could fund a traditional IRA before the due date of your tax return; the income exclusion may be more valuable under higher 2017 tax rates.

### Lower tax rates and new withholding

(BPT) - With the Tax Cuts  $\;\; tax \;\; rates \;\; for \;\; individuals. \;\; tax \; return.$ The IRS has issued withholding tables employers started using in February to reflect these lower rates. While this could mean lower tax withholding and more take-home pay, you should evaluate your personal income tax position to determine if you will pay more or less under the new law and adjust your withholding accordingly.

payments, you should also estimate your tax liability under the new tax law and make necessary adjustments to your quarterly tax pay-

Assuming your withholding or estimated tax payments need no adjustment may create an unpleasant surprise if you are un-will turn out to be the great-der-withheld and owe pen-est simplification aspect of The hallmark of the new alty tax and interest when the new tax law, since they tax law is lower marginal you file your 2018 income no longer must track item-

Higher standard deduction

The new higher standard deduction of \$12,000 for individuals and \$24,000 for married couples will greatly reduce the number of taxpayers that itemize deductions. If you did not itemize in 2016, and your tax position is similar now, you will probably not itemize in 2017. The increased standard deduction, combined If you make estimated tax with lower marginal rates, may mean your tax liability will go down.

If you itemized in 2016, compare your total itemized amount to the new standard deduction. If less, and assuming a similar tax position in 2017, you will likely no longer need to itemize. For many, this provision multiple associated forms. No personal exemptions

Some taxpayers need to look more closely to determine if they will pay less or even more. The new law eliminates personal exemptions and reduces deductible items, such as limiting the total deduction for state and local income taxes to \$10,000, reducing the amount of deductible mortgage interest and eliminating the deduction for interest paid on a home equity line of credit. Therefore, if you itemized deductions in 2017 and your deductions were greater than the applicable standard deduction, you will have to consider what deductions are available in 2018 and estimate your tax liability.

will be greater than the benefit of lower rates and your tax liability could increase. Increased child and

dependent credits The new law increases the child tax credit for children under 17 to \$2,000. The income limits to phase out the credit are also significantly increased so more taxpayers will be eligible. In addition, there is a \$500 credit for other qualifying dependents. Depending on your tax bracket, this could be better or worse than getting an exemption for each dependent.

**Increased AMT exemption** 

Adding one more layer of complexity to your 2018 planning is the new tax law's modification of the Alternative Minimum Tax or In states with higher in- AMT. The AMT is a parallel taxes, it is possible that the to calculate your income ark NJ and its affiliates.

ized deductions or complete loss of itemized deductions tax under the normal rules and then again under AMT rules, paying the higher of the two. The new tax law increases the AMT exemption, or the amount you can earn and not be subject to this alternative tax. If you have been subject to AMT in the past, you should review the new increased exemption and whether that will

### The bottom line

The bottom line for most is whether they will pay more or less income tax in 2018 than in 2017. While it is likely many will pay less, you need to consider all the above before you know how you will be impacted by the new tax law.

Please consult your legal or tax advisor concerning your particular circumstances. The Prudential Insurance come taxes and property tax system that requires you Company of America, New-

### **Public Notice**

MINUTES OF EDDY COUNTY COMMISSIONERS MEETING

EDDY COUNTY COURTHOUSE
APRIL 17, 2018, 9:00 A.M.
The meeting was called to order by Neal
Rud, Chairperson. Also present were Commissioner Jeff Pfau, Commissioner Glenda
Collier, Auditor Patty Williams, and the New

Collier, Auditor Party Williams, and the New Rockford Transcript.

Glenda Collier made a motion to approve the agenda with the addition of Tim Becker and the lighting estimate for the Social Services building. The motion was seconded by Jeff Pfau and the motion carried.

Jeff Pfau made a motion to approve the minutes of the April 3, 2018 meeting. Glenda Collier seconded the motion and the motion

Jeff Pfau made a motion to approve the following bills and it was seconded by Glenda Collier. Roll call vote: Collier, Pfau, and

Rud voted aye. American Legion Post 30...

Bakers Dozen. Central Business Systems Inc.... ...619.25 CenDak Farmers Union Coop. .6.165.03 City Of Sheyenne.....
Dakota Dust-Tex Inc......
Galls LLC......
Harvey Sand & Gravel, Inc... Information Technology Dept .. John Deere Financial..... .258.00 .900.00 Lake Region District Health Un ...13,149.75
Lake Region Law Enforcement .....6,257.00 Mick's 281 Service .2,073.34 Miller's Fresh Foods ND State Radio Communications .... 120.00 ND Telephone Co .1.507.26 New Rockford Area BC .500.00 Nodak Electric Cooperative .... Northern Plains Electric Coop. Kristy O'Connor..... .85.02 Otter Tail Power Co Linderman Construction Inc. 1.600.00 Pharmchem Inc. Pitney Bowes Inc......... Praxair Distribution Inc. ..617.5 Quill Corporation . The Sidwell Company .130.00 Stutsman Co Correction Ctr .3.445.00 .846.00

The applications received for the Emerrine applications received for the Energency Manager and Vet Services Officer positions were reviewed by the Commissioners. Two applicants for Emergency Manager and three applicants for the Vet Services Officer will be interviewed for the positions. Options for different department signs were reviewed. More information will be

OLD BUSINESS: Irvin Loe, Road Super-intendent, gave an update on the road de-

were reviewed. More information will be brought to the next meeting.

Glenda Collier made a motion to approve the estimate from Taverna Electric for new LED lighting at the Social Services building in the amount of \$3,207 the motion. Roll call vote: Collier, Pfau, and

Rud voted aye.
Paul Lies, Sheriff, gave an update on the Sheriff's department.
NEW BUSINESS: Tim Becker attended

the meeting to discuss NDAWN, North Da-kota Agriculture Weather Network. They may be looking for a site for another tower if they can obtain funding. He also handed out the NDSU Extension Service 2017 Annual High-lights brochure.

The seasonal maintenance worker posi-The seasonar maintenance worker posi-tion for upkeep at the Warsing Dam will be advertised in the next two editions of the New Rockford Transcript. Road Superintendent Irvin Loe and Sheriff Paul Lies will be starting a list of equipment

for sale, which will be advertised sometime

Jeff Pfau made a motion to approve the Funding Agreement for Clerk of District Court Services with the ND Supreme Court. Glenda Collier seconded the motion and the motion carried.

Neal Rud, Chairperson, adjourned the meeting at 11:15 A.M.
The next regular meeting will be May 1, 2018 at 9:00 A.M.
Neal Rud, Chairperson

ATTEST: Patty Williams, County Auditor Published May 7, 2018

Subscribe to the Thanschipt AMENDMENT TO EDDY COUNTY ZONING ORDINANCE

WHEREAS, the Eddy County Board of County Commissioners (hereinafter "the Board"), pursuant to North Dakota Century Code Chapter 11-33, adopted the 2017 Eddy County Zoning Ordinance on March 21, 2017;

WHEREAS, said ordinance, Articles 7 and 8, authorizes the Board to review, approve, modify and deny the recommendations of

the Eddy County Zoning Commission; WHEREAS, on April 24, 2018, the Eddy County Zoning Commission approved a recommendation to add Article 11 Medical Marijuana to the 2017 Eddy County Zoning Certianner.

Ordinance;
WHEREAS, the Eddy County Zoning
Commission recommends that the Board
approve the addition of Article 11 Medical
Marijuana to the 2017 Eddy County Zoning

Ordinance;
WHEREAS, the addition of Article 11 With Las, the addition of Huber In Medical Marijuana includes the process and procedures for the manufacturing and distribution of medical marijuana as well as modifications and corrections to the Zoning Ordinance for Eddy County, ND; WHEREAS, said ordinance is designed to promote the processify and pretent the good

promote the prosperity and protect the general welfare of Eddy County, ND;
WHEREAS, Commissioner Glenda Collier moved to approve the recommendation of the Eddy County Zoning Commission and Commissioner Jeff Pfau seconded the motion and the motion having accord by unage. tion and the motion having passed by unanimous roll call vote of the Board:

NOW, THEREFORE, BE IT RESOLVED. that the County Commission of Eddy Coun-ty hereby adopts the following Amendment to the 2017 Eddy County Zoning Ordinance Resolution this first day of May, 2018: Addition of Article 11 Medical Marijuana

in Table of Contents Addition of Medical Marijuana Defini-tions in Section 2.2 Definitions Addition of Article 11 Medical Marijuana

The amendment approved herein shall be immediately incorporated into the officially adopted text of the 2017 Eddy County Zoning Ordinance and shall be effective this first day of May, 2018.

Neal Rud, Chairperson Patty Williams, Auditor The Amendment to the 2017 Eddy County Zoning Ordinance can be reviewed at the office of the Eddy County Recorder, Monday through Friday, 8:00 A.M. to 4:00 P.M. Published May 7 & 14, 2018

MINUTES OF EDDY COUNTY COMMISSIONERS SPECIAL MEETING EDDY COUNTY COURTHOUSE APRIL 27, 2018, 9:00 A.M.

The meeting was called to order by Neal Rud, Chairperson. Also present were Com-missioner Jeff Pfau, Commissioner Glenda

Collier and Auditor Patty Williams.
Glenda Collier made a motion to approve the agenda. The motion was seconded by Jeff Pfau and the motion carried. Two applicants were interviewed for the Veterans Services Officer position.

eterans services Officer position.
Neal Rud, Chairperson, adjourned the neeting at 10:05 A.M.
Neal Rud, Chairperson
ATTEST: Patty Williams, County Auditor
Published May 7, 2018

NOTICE OF HEARING ON PETITION FOR VACATION OF STREETS AND ALLEYS

WHEREAS, the property owners abutting the following described

streets and alleys in the City of New Rock-ford, North Dakota, have filed a petition with the City Auditor requesting that the following described streets and alleys be closed and

Beginning at the southwest corner of Lot 4, Block 1, Sunrise Addition to the City of New Rockford, then 106.05 feet east, then 315 feet north, then 30 feet east, then 315 feet south, then 106.05 feet east, then 315 feet north, then 60 feet east, then 315 feet south, then 106.05 feet east, then 315 feet north, then 30 feet east, then 315 feet south, then 106.05 feet east, then 315 feet north, then 60 feet east, then 315 feet south, then 106.05 feet east, then 315 feet north, then 30 feet east, then 315 feet south, then 106.05 feet east, then 315 feet north, then 60 feet east, then 315 feet south, then 106.09 feet east, then 60 feet south, then 408.2 feet west, then 110 feet south, then 60 feet west, then 110 feet north, then 544.22 feet west,

then 60 feet north to the point of beginning. NOW, THEREFORE, the City Commission of the City of New Rockford hereby gives notice that a hearing on said Petition shall be held in the City Hall in New Rockford on June 4, 2018 at 7:30 P.M., at which time said Dated April 4, 2018.

George J. Ritzke, City Auditor New Rockford, North Dakota Published April 16, 23, 30 & May 7, 2018

Whole House

\$3,990\*

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**American** 

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representatives in

new paper tariffs

Congress to stop the

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paper that is used in newspapers, books

printing and publishing industry. Is this

### STATE OF NORTH DAKOTA

IN DISTRICT COURT
COUNTY OF EDDY
SOUTHEAST JUDICIAL DISTRICT Probate No.: 14-2018-PR-00004 In the Matter of the Estate of William R.

Aslakson, as known as William R. Aslakson

NOTICE TO CREDITORS

NOTICE IS HEREBY GIVEN that Kristy M. Hager has been appointed as person-al representative for the Estate of William R. Aslakson on April 18, 2018. Pursuant to NDCC 30.1-19-01, all persons having claims against the decedent William R. Aslakson must present their claims within three (3) months after the date of the first publication or mailing of the notice or be forever barred. Claims must be presented to the personal representative Kristy M. Hager at her address: 329 3rd Street NE, PO Box 319, LaMoure, ND 58458, or filed with the Court. Dated this 23rd day of April, 2018. PAGEL WEIKUM, PLLP

1715 Burnt Boat Drive Madison Suite Bismarck, ND 58503 Ph. No.: (701) 250-1369 shager@pagelweikum.com

Snager@pageivenkinn.com By: /s/ Scott A. Hager Scott A. Hager ND Lic. No.: 05913 ATTORNEYS FOR P.R. KRISTY HAGER Published April 30, May 7, & 14, 2018

#### **ABBREVIATED NOTICE** OF INTENT TO AMEND ADMINISTRATIVE RULES

relating to N.D.A.C. Chapter 75-02-04, Child Support Division and 75-02-04.2 State Disbursement Unit

### North Dakota **Department** of Human Services

will hold a public hearing to address proposed changes to the N.D. Admin. Code

**Room 210 Second Floor Judicial Wing State Capitol** Bismarck, ND Thurs., May 31, 2018 9:00 a.m.

Copies of the proposed rules are available for review at county social services offices and human service centers. Copies of the proposed rules and the regulatory analysis relating to these rules may be requested by telephoning (701) 328-2311. Written or ora data, views, or arguments may be entered at the hearing or sent to: Rules Administrator, North Dakota Department of Human Services, State Capitol – Judicial Wing, 600 East Boulevard Ave., Dept. 325, Bismarck, ND 58505-0250. Written data, views, or arguments must be received no later than 5:00 p.m. on June 11, 2018. If you plan to attend the hearing and will need special facilities or assistance relating to a disability, please contact the Department of Human Services at the above telephone number or address at least two weeks prior to

Dated this 24th day of April 2018

# Public **Notices**



"Because the public has the



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published?

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### **CONNECT**

Visit the City of New Rockford online at

www.cityofnewrockford.com

# Eddy County



**MONDAY-FRIDAY** September – May, 7:30 a.m. to 4:00 p.m.

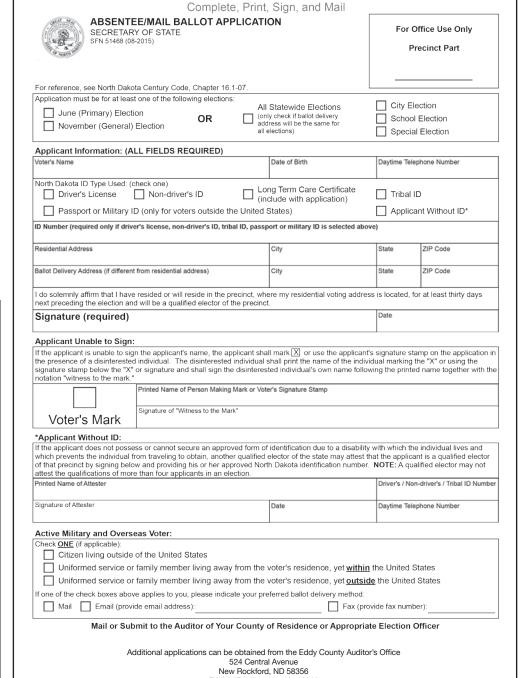
June – August, 8:30 a.m. to 2:30 p.m.

Intown New Rockford - \$1.00 per one way ride for everyone Call Cell 302-0324 or Senior Center 947-5378 Out of Town Trips (By Arrangement Only)

Carrington (\$10.00) Sheyenne to New Rockford (\$5.00) Devils Lake (\$10.00)

**General Public Transportation Available to All Ages** 

HANDICAP ACCESSIBLE VEHICLES





(701) 947-2434, extension 2020

Published April 30 & May 7, 2018

Is now offering custom fertilizer application for your spring needs!

We are now offering dry custom fertilizer application for Oberon,

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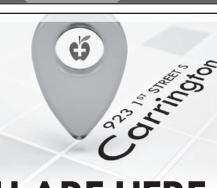
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