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DOGS



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DOGS

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68713

**ABSTRACT OF STATEMENT
FOR THE YEAR ENDING
DECEMBER 31, 2024**
of the
Security Life Of Denver Insurance Com-
pany
In the state of CO
Total Assets 34,438,767,845
Total Liabilities 33,145,216,720
Aggregate write-ins
for special surplus
funds 0
Common Capital 2,880,000
Stock
Preferred Capital 0
Aggregate Write-
ins for Other Than
Special Surplus
Funds 335,601,055
Surplus Notes 123,000,000
Gross Paid in and
Contributed 1,387,808,108
Surplus
Unassigned Funds -555738037
Total Capital and 1,293,551,126
Surplus
Total Liabilities,
Capital 34,438,767,845
And Surplus
**NORTH DAKOTA BUSINESS ONLY
FOR THE YEAR 2024**
Total Life and
Annuity Premiums 1,042,007
Written
Total Life and
Annuity Direct 138,818
Losses Paid
Total Accident and
Health Direct Pre-
miums Written 0
Total Accident and
Health Direct 0
Losses Paid
**STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE**
I, Jon Godfread, Commissioner of Insur-
ance 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 here-
unto set my hand and affixed the seal of
this office at Bismarck, the first day of
March, A.D. 2025 (SEAL).
JON GODFREAD
Commissioner of Insurance
**STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE**
**COMPANY'S CERTIFICATE OF
AUTHORITY**
WHEREAS, the above corporation duly
organized under the laws of its state or
country of domicile, has filed in this office
a sworn statement exhibiting its condition
and business for the year ending Decem-
ber 31, 2024 conformable to the require-
ments of the laws of this State regarding
the business of insurance and
WHEREAS, the said company has filed in
this office a duly certified copy of its char-
ter with certificate of organization in com-
pliance 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 empow-
ered through its authorized agents and
representatives, to transact its appropriat-
ed business of authorized insurance in the
state according to the laws thereof, until
the 30th day of April, A.D. 2026.
IN TESTIMONY WHEREOF, I have here-
unto set my hand and seal at Bismarck this
first day of March, A.D., 2025
(SEAL)
JON GODFREAD
Commissioner of Insurance

66109

**ABSTRACT OF STATEMENT
FOR THE YEAR ENDING
DECEMBER 31, 2024**
of the
Midwestern United Life Insurance Com-
pany
In the state of Indiana
Total Assets 250,221,197
Total Liabilities 76,489,073
Aggregate write-ins
for special surplus
funds 0
Common Capital 2,500,000
Stock
Preferred Capital 0
Aggregate Write-
ins for Other Than
Special Surplus
Funds 0
Surplus Notes 0
Gross Paid in and
Contributed 9,393,754
Surplus
Unassigned Funds 161,838,369
Total Capital and 173,732,123
Surplus
Total Liabilities,
Capital 250,221,196
And Surplus
**NORTH DAKOTA BUSINESS ONLY
FOR THE YEAR 2024**
Total Life and
Annuity Premiums 0
Written
Total Life and
Annuity Direct 0
Losses Paid
Total Accident and
Health Direct Pre-
miums Written 0
Total Accident and
Health Direct 0
Losses Paid
**STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE**
I, Jon Godfread, Commissioner of Insur-
ance 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 here-
unto set my hand and affixed the seal of
this office at Bismarck, the first day of
March, A.D. 2025 (SEAL).
JON GODFREAD
Commissioner of Insurance
**STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE**
**COMPANY'S CERTIFICATE OF
AUTHORITY**
WHEREAS, the above corporation duly
organized under the laws of its state or
country of domicile, has filed in this office
a sworn statement exhibiting its condition
and business for the year ending Decem-
ber 31, 2024 conformable to the require-
ments of the laws of this State regarding
the business of insurance and
WHEREAS, the said company has filed in
this office a duly certified copy of its char-
ter with certificate of organization in com-
pliance 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 empow-
ered through its authorized agents and
representatives, to transact its appropriat-
ed business of authorized insurance in the
state according to the laws thereof, until
the 30th day of April, A.D. 2026.
IN TESTIMONY WHEREOF, I have here-
unto set my hand and seal at Bismarck this
first day of March, A.D., 2025
(SEAL)
JON GODFREAD
Commissioner of Insurance

61190

**ABSTRACT OF STATEMENT
FOR THE YEAR ENDING
DECEMBER 31, 2024**
of the
Auto-Owners Life Insurance Company
In the state of Michigan
Total Assets 4,674,208,474
Total Liabilities 4,053,525,084
Aggregate write-ins
for special surplus
funds 0
Common Capital 3,450,000
Stock
Preferred Capital 0
Aggregate Write-
ins for Other Than
Special Surplus
Funds 0
Surplus Notes 0
Gross Paid in and
Contributed 16,568,902
Surplus
Unassigned Funds 600,664,488
Total Capital and 620,683,390
Surplus
Total Liabilities,
Capital 4,674,208,474
And Surplus
**NORTH DAKOTA BUSINESS ONLY
FOR THE YEAR 2024**
Total Life and
Annuity Premiums 2280227
Written
Total Life and
Annuity Direct 1679988
Losses Paid
Total Accident and
Health Direct Pre-
miums Written 239790
Total Accident and
Health Direct 147547
Losses Paid
**STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE**
I, Jon Godfread, Commissioner of Insur-
ance 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 here-
unto set my hand and affixed the seal of
this office at Bismarck, the first day of
March, A.D. 2025 (SEAL).
JON GODFREAD
Commissioner of Insurance
**STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE**
**COMPANY'S CERTIFICATE OF
AUTHORITY**
WHEREAS, the above corporation duly
organized under the laws of its state or
country of domicile, has filed in this office
a sworn statement exhibiting its condition
and business for the year ending Decem-
ber 31, 2024 conformable to the require-
ments of the laws of this State regarding
the business of insurance and
WHEREAS, the said company has filed in
this office a duly certified copy of its char-
ter with certificate of organization in com-
pliance 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 empow-
ered through its authorized agents and
representatives, to transact its appropriat-
ed business of authorized insurance in the
state according to the laws thereof, until
the 30th day of April, A.D. 2026.
IN TESTIMONY WHEREOF, I have here-
unto set my hand and affixed the seal of
this office at Bismarck, the first day of
March, A.D. 2025 (SEAL).
JON GODFREAD
Commissioner of Insurance

32700

**ABSTRACT OF STATEMENT
FOR THE YEAR ENDING
DECEMBER 31, 2024**
of the
Owners Insurance Company
In the state of Ohio
Total Assets 6,348,266,168
Total Liabilities 4,251,090,140
Aggregate write-ins
for special surplus
funds 0
Common Capital 6,500,000
Stock
Preferred Capital 0
Aggregate Write-
ins for Other Than
Special Surplus
Funds 0
Surplus Notes 0
Gross Paid in and
Contributed 220,998,592
Surplus
Unassigned funds 1,869,677,436
(surplus)
Total Capital and 2,097,176,028
Surplus
Total Liabilities,
Capital 6,348,266,168
And Surplus
**NORTH DAKOTA BUSINESS ONLY
FOR THE YEAR 2024**
Total Direct Pre-
miums 39,359,206
Earned
Total Direct Losses
Incurred 18,936,470
Total Accident and
Health Direct Pre-
miums Earned 0
Total Accident and
Health Direct 0
Losses Incurred
**STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE**
I, Jon Godfread, Commissioner of Insur-
ance 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 here-
unto set my hand and affixed the seal of
this office at Bismarck, the first day of
March, A.D. 2025 (SEAL).
JON GODFREAD
Commissioner of Insurance

32700

**ABSTRACT OF STATEMENT
FOR THE YEAR ENDING
DECEMBER 31, 2024**
of the
Wausau Underwriters Insurance Compa-
ny
In the state of North Dakota
Total Assets 117,635,604
Total Liabilities 38,210,998
Aggregate write-ins
for special surplus
funds 0
Common Capital 4,500,000
Stock
Preferred Capital 0
Aggregate Write-
ins for Other Than
Special Surplus
Funds 0
Surplus Notes 0
Gross Paid in and
Contributed 51,102,304
Surplus
Unassigned funds 23,822,302
(surplus)
Total Capital and 79,424,606
Surplus
Total Liabilities,
Capital 117,635,604
And Surplus
**NORTH DAKOTA BUSINESS ONLY
FOR THE YEAR 2024**
Total Direct Pre-
miums 8
Earned
Total Direct Losses
Incurred 13,523
Total Accident and
Health Direct Pre-
miums Earned 0
Total Accident and
Health Direct 0
Losses Incurred
**STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE**
I, Jon Godfread, Commissioner of Insur-
ance 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 here-
unto set my hand and affixed the seal of
this office at Bismarck, the first day of
March, A.D. 2025 (SEAL).
JON GODFREAD
Commissioner of Insurance
**STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE**
**COMPANY'S CERTIFICATE OF
AUTHORITY**
WHEREAS, the above corporation duly
organized under the laws of its state or
country of domicile, has filed in this office
a sworn statement exhibiting its condition
and business for the year ending Decem-
ber 31, 2024 conformable to the require-
ments of the laws of this State regarding
the business of insurance and
WHEREAS, the said company has filed in
this office a duly certified copy of its char-
ter with certificate of organization in com-
pliance 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 empow-
ered through its authorized agents and
representatives, to transact its appropriat-
ed business of authorized insurance in the
state according to the laws thereof, until
the 30th day of April, A.D. 2026.
IN TESTIMONY WHEREOF, I have here-
unto set my hand and affixed the seal of
this office at Bismarck, the first day of
March, A.D. 2025 (SEAL).
JON GODFREAD
Commissioner of Insurance

32905

**ABSTRACT OF STATEMENT
FOR THE YEAR ENDING
DECEMBER 31, 2024**
of the
Property-Owners Insurance Company
In the state of Indiana
Total Assets 581,170,774
Total Liabilities 262,146,094
Aggregate write-ins
for special surplus
funds 0
Common Capital 1,500,000
Stock
Preferred Capital 0
Aggregate Write-
ins for Other Than
Special Surplus
Funds 0
Surplus Notes 0
Gross Paid in and
Contributed 3,520,000
Surplus
Unassigned funds 314,004,680
(surplus)
Total Capital and 319,024,680
Surplus
Total Liabilities,
Capital 581,170,774
And Surplus
**NORTH DAKOTA BUSINESS ONLY
FOR THE YEAR 2024**
Total Direct Pre-
miums 0
Earned
Total Direct Losses
Incurred 0
Total Accident and
Health Direct Pre-
miums Earned 0
Total Accident and
Health Direct 0
Losses Incurred
**STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE**
I, Jon Godfread, Commissioner of Insur-
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this office at Bismarck, the first day of
March, A.D. 2025 (SEAL).
JON GODFREAD
Commissioner of Insurance
**STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE**
**COMPANY'S CERTIFICATE OF
AUTHORITY**
WHEREAS, the said company has filed in
this office a duly certified copy of its char-
ter with certificate of organization in com-
pliance 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 empow-
ered through its authorized agents and
representatives, to transact its appropriat-
ed business of authorized insurance in the
state according to the laws thereof, until
the 30th day of April, A.D. 2026.
IN TESTIMONY WHEREOF, I have here-
unto set my hand and seal at Bismarck this
first day of March, A.D., 2025
(SEAL)
JON GODFREAD
Commissioner of Insurance

26042

**ABSTRACT OF STATEMENT
FOR THE YEAR ENDING
DECEMBER 31, 2024**
of the
Wausau Underwriters Insurance Compa-
ny
In the state of North Dakota
Total Assets 117,635,604
Total Liabilities 38,210,998
Aggregate write-ins
for special surplus
funds 0
Common Capital 4,500,000
Stock
Preferred Capital 0
Aggregate Write-
ins for Other Than
Special Surplus
Funds 0
Surplus Notes 0
Gross Paid in and
Contributed 51,102,304
Surplus
Unassigned funds 23,822,302
(surplus)
Total Capital and 79,424,606
Surplus
Total Liabilities,
Capital 117,635,604
And Surplus
**NORTH DAKOTA BUSINESS ONLY
FOR THE YEAR 2024**
Total Direct Pre-
miums 8
Earned
Total Direct Losses
Incurred 13,523
Total Accident and
Health Direct Pre-
miums Earned 0
Total Accident and
Health Direct 0
Losses Incurred
**STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE**
I, Jon Godfread, Commissioner of Insur-
ance 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 here-
unto set my hand and affixed the seal of
this office at Bismarck, the first day of
March, A.D. 2025 (SEAL).
JON GODFREAD
Commissioner of Insurance
**STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE**
**COMPANY'S CERTIFICATE OF
AUTHORITY**
WHEREAS, the above corporation duly
organized under the laws of its state or
country of domicile, has filed in this office
a sworn statement exhibiting its condition
and business for the year ending Decem-
ber 31, 2024 conformable to the require-
ments of the laws of this State regarding
the business of insurance and
WHEREAS, the said company has filed in
this office a duly certified copy of its char-
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pliance with the requirements of insurance
law aforesaid,
NOW THEREFORE, I, JON GODFREAD,
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JON GODFREAD
Commissioner of Insurance

26042

**ABSTRACT OF STATEMENT
FOR THE YEAR ENDING
DECEMBER 31, 2024**
of the
Wausau Underwriters Insurance Compa-
ny
In the state of North Dakota
Total Assets 117,635,604
Total Liabilities 38,210,998
Aggregate write-ins
for special surplus
funds 0
Common Capital 4,500,000
Stock
Preferred Capital 0
Aggregate Write-
ins for Other Than
Special Surplus
Funds 0
Surplus Notes 0
Gross Paid in and
Contributed 51,102,304
Surplus
Unassigned funds 23,822,302
(surplus)
Total Capital and 79,424,606
Surplus
Total Liabilities,
Capital 117,635,604
And Surplus
**NORTH DAKOTA BUSINESS ONLY
FOR THE YEAR 2024**
Total Direct Pre-
miums 8
Earned
Total Direct Losses
Incurred 13,523
Total Accident and
Health Direct Pre-
miums Earned 0
Total Accident and
Health Direct 0
Losses Incurred
**STATE OF NORTH DAKOTA
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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
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and business for the year ending Decem-
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the business of insurance and
WHEREAS, the said company has filed in
this office a duly certified copy of its char-
ter with certificate of organization in com-
pliance 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 empow-
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representatives, to transact its appropriat-
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state according to the laws thereof, until
the 30th day of April, A.D. 2026.
IN TESTIMONY WHEREOF, I have here-
unto set my hand and affixed the seal of
this office at Bismarck, the first day of
March, A.D. 2025 (SEAL).
JON GODFREAD
Commissioner of Insurance

Continued on next page»»»