

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 1010 0001 8573 4293) to the following:

Operator: KSMO  
 Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e)) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.
- mandatory carriage ("must-carry") on the following: (check one):
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
 Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
 Phone: 913-677-7238  
 Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
 Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

Allegiance Communications, LLC  
Western Platte, Platte County

# DBS ELECTION NOTICE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Angela Bohm</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span>  <i>Angela Bienhoff</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes                      If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="font-size: 1.2em; margin-left: 20px;"><i>Allegiance Communications</i></p> <p style="margin-left: 20px;"><i>1819 Airport Dr</i></p> <p style="margin-left: 20px;"><i>Lawrence, OK 74804</i></p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number                      (Transfer from service label)</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7012 1010 0001 8573 4293</p>	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Postmark  
Here

Sent To *Allegiance*

Street, Apt. No., or PO Box No. *KS MO*

City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7012 1010 0001 8573 4293

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 11 day of September 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7014 1200 0002 1603 9778) to the following:

Operator: KCTV  
 Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e)) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.**
- mandatory carriage ("must-carry") on the following: (check one):**
  - The Station's PSIP major channel number ("virtual channel").
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Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
 Address: KCTV  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
 Phone: 913-677-7238  
 Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
 Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

### **System:**

**The communities served by the System as of the date hereof are listed below.**

#### American Broadband

Maitland, MO  
Graham, MO  
Skidmore, MO  
Rich Hill, MO  
Deerfield, MO  
Richards, MO  
Wheatland, MO  
Galmey, MO  
Hermitage, MO  
Weaubleau, MO  
Humansville, MO  
Pittsburg, MO  
Hickory Center, MO

# DBS ELECTION NOTICE

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<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Henry Morroa</i>    <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)    C. Date of Delivery  <i>Henry Morroa</i>    <i>9-12-14</i></p> <p>D. Is delivery address different from item 1?    <input type="checkbox"/> Yes                      If YES, enter delivery address below:    <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="font-size: 1.2em; margin-left: 20px;"><i>American Broadband</i></p> <p style="margin-left: 20px;"><i>208 Ash St.</i></p> <p style="margin-left: 20px;"><i>Maitland, MO</i></p> <p style="margin-left: 40px;"><i>64466</i></p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail    <input type="checkbox"/> Express Mail</p> <p><input checked="" type="checkbox"/> Registered    <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail    <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number                      (Transfer from service label)</p>	<p>4. Restricted Delivery? (Extra Fee)    <input type="checkbox"/> Yes</p>
<p>7014 1200 0002 1603 9778</p>	
<p>PS Form 3811, February 2004    Domestic Return Receipt    102595-02-M-1540</p>	

U.S. Postal Service™  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Postmark  
Here

Sent To *American*

Street, Apt. No.;  
or PO Box No. *Broadband*

City, State, ZIP+4 *KS MO Park*

PS Form 3800, August 2006    See Reverse for Instructions

7014 1200 0002 1603 9778

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 11 day of September 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7014 1200 0002 1603 9761) to the following:

Operator: KCTV  
Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.**
- mandatory carriage ("must-carry") on the following: (check one):**
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
Address: KCTV  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
Phone: 913-677-7238  
Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

American Broadband

Maitland, MO

Graham, MO

Skidmore, MO

Rich Hill, MO

Deerfield, MO

Richards, MO

Wheatland, MO

Galmey, MO

Hermitage, MO

Weaubleau, MO

Humansville, MO

Pittsburg, MO

Hickory Center, MO



**DBS ELECTION NOTICE**

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME .
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 1010 0001 8573 4057) to the following:

Operator: KSMO  
 Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

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- mandatory carriage ("must-carry") on the following: (check one):**
  - The Station's PSIP major channel number ("virtual channel").
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Name: Dale Jacobson  
 Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
 Phone: 913-677-7238  
 Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
 Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

AT&T U-verse

Kansas City, Missouri Jackson County

# DBS ELECTION NOTICE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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<p>1. Article Addressed to:</p> <p style="font-size: 1.2em; margin: 10px 0;"><i>AT &amp; T U-Verse</i></p> <p style="font-size: 1.2em; margin: 5px 0;"><i>4119 Broadway</i></p> <p style="font-size: 1.2em; margin: 5px 0;"><i>Room 650A16</i></p> <p style="font-size: 1.2em; margin: 5px 0;"><i>San Antonio, TX 78209</i></p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number <span style="float: right;">7012 1010 0001 8573 4286</span></p> <p><i>(Transfer from service label)</i></p>	
<p>PS Form 3811, February 2004 <span style="margin-left: 150px;">Domestic Return Receipt</span> <span style="float: right;">102595-02-M-15:40</span></p>	

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
*(Domestic Mail Only; No Insurance Coverage Provided)*

For delivery information visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee <small>(Endorsement Required)</small>	
Restricted Delivery Fee <small>(Endorsement Required)</small>	
Total Postage & Fees \$	

Postmark Here

Sent To *AT & T U-Verse*

Street, Apt. No., or PO Box No. *KSMO*

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

7012 1010 0001 8573 4286

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 1010 0001 8573 4064) to the following:

Operator: KSMO  
 Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e)) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

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- mandatory carriage ("must-carry") on the following: (check one):**
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  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
 Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
 Phone: 913-677-7238  
 Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
 Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

B & L Technologies, LLC

Burlington Junction, Nodaway County

Grant City, Worth County

Hopkins, Nodaway County

Ravenwood, Nodaway County

Sheridan, Worth County

# DBS ELECTION NOTICE

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

B+L Technologies  
3329 270th St  
Lenox, IA 50851

2. Article Number  
(Transfer from service label)

7012 1010 0001 8573 4064

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee

B. Received by (Printed Name) C. Date of Delivery  
Linda Hintz 9-2-14

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

7012 1010 0001 8573 4064

**U.S. Postal Service™  
CERTIFIED MAIL™ RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Postmark  
Here

Sent To

Street, Apt. No.;  
or PO Box No.  
City, State, ZIP+4

B+L  
KSMO

PS Form 3800, August 2006

See Reverse for Instructions

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 3460 0001 2395 3484) to the following:

Operator: KSMO  
 Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

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 Email: dale.jacobson@kctv5.com

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Signature: \_\_\_\_\_  
 Name/Title: Dale Jacobson, Director of Programming



# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

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Cable One, Inc

Kirksville, Adair County

**DBS ELECTION NOTICE**

# CABLE ELECTION NOTICE

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DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 1010 0001 8573 4262) to the following:

Operator: KSMO  
 Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

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Fairway, KS 66205  
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 Email: dale.jacobson@kctv5.com

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Signature: \_\_\_\_\_  
 Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

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Cequel II Programming, LLC (Suddenlink)

Brookfield, Linn County

Brookfield (Uninc), Linn County

Lexington, Lafayette County

Napoleon, Lafayette County

Trenton, Grundy County

Trenton (Uninc), Grundy County

Wellington, Lafayette County

Maryville, Nodaway County

Nodaway County

# DBS ELECTION NOTICE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p><b>X</b></p> <p>B. Received By <i>Rec'd by Mailroom</i> <span style="float: right;">C. Date of Delivery</span></p> <p><i>Ceque II/Suddenlink</i> <span style="float: right;"><i>9-2-14</i></span></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="font-size: 1.2em;"><i>Ceque II</i></p> <p style="font-size: 1.2em;"><i>520 Maryville Centre Dr.</i></p> <p style="font-size: 1.2em;"><i>St Louis MO</i></p> <p style="font-size: 1.2em;"><i>63141</i></p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em; text-align: center;">7012 1010 0001 8573 4262</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™  
CERTIFIED MAIL™ RECEIPT  
(Domestic Mail Only, No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

*Sent To*

*Ceque II*

*LSMO*

Street, Apt. No.,  
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7012 1010 0001 8573 4262

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 1010 0001 8573 4095) to the following:

Operator: KSMO  
Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e)) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.**
- mandatory carriage ("must-carry") on the following: (check one):**
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
Phone: 913-677-7238  
Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

Chariton Valley Communication Corporation

Bucklin, Linn County

DeWitt, Carroll County

Hale, Carroll County

# DBS ELECTION NOTICE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Anna Smith</i>      <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)      C. Date of Delivery  <i>Anna Smith</i></p> <p>D. Is delivery address different from item 1?      <input type="checkbox"/> Yes                      If YES, enter delivery address below:      <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="font-size: 1.2em;"><i>Chariton Valley Comm Coop</i></p> <p style="font-size: 1.2em;"><i>1213 E. Briggs Dr.</i></p> <p style="font-size: 1.2em;"><i>Macon, MO 63552</i></p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail      <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered      <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail      <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee)      <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p style="font-size: 1.2em; text-align: center;">7012 1010 0001 8573 4095</p>
<p>PS Form 3811, February 2004      Domestic Return Receipt      102595-02-M-1540</p>	

7012 1010 0001 8573 4095

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>TM</sup> RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To *Chariton Valley*

Street, Apt. No.,  
or PO Box No. *10540*

City, State, ZIP+4

PS Form 3800, August 2006
See Reverse for Instructions



# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 1010 0001 8573 4231) to the following:

Operator: KSMO  
 Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e)) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.**
- mandatory carriage ("must-carry") on the following: (check one):**
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
 Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
 Phone: 913-677-7238  
 Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
 Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

Charter Communications

Clinton, Henry County

Henry County

Johnson County

Knob Noster, Johnson County

Warrensburg, Johnson County

Whiteman AFB, Johnson County

# DBS ELECTION NOTICE

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Charter Communications  
12405 Powerscourt Dr  
St Louis MO  
63131

2. Article Number  
(Transfer from service label)

7012 1010 0001 8573 4231

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
*[Handwritten Signature]*  Addressee

B. Received by (Printed Name)  Date of Delivery

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type  
 Certified Mail     Express Mail  
 Registered         Return Receipt for Merchandise  
 Insured Mail         C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**U.S. Postal Service™  
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For delivery information visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

7012 1010 0001 8573 4231

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark  
Here

Sent To *Charter Comm*  
 Street, Apt. No. or PO Box No. *KSMO*  
 City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 1010 0001 8573 4101) to the following:

Operator: KSMO  
Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e)) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.
- mandatory carriage ("must-carry") on the following: (check one):
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
Phone: 913-677-7238  
Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

Citizens Cablevision, Inc.

- Alma, Lafayette County
- Blackburn, Saline County
- Concordia, Lafayette County
- Corder, Lafayette County
- Emma, Saline County
- Gilliam, Saline County
- Higginsville, Lafayette County
- Malta Bend, Saline County
- Slater, Saline County
- Sweet Springs, Saline County
- Waverly, Lafayette County

# DBS ELECTION NOTICE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Terry Wells</i>      <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (<i>Printed Name</i>)      C. Date of Delivery  <i>Terry Wells</i>      <i>9-2-14</i></p> <p>D. Is delivery address different from item 1?    <input type="checkbox"/> Yes                      If YES, enter delivery address below:      <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="font-size: 1.2em;"><i>Citizens Cablevision</i>  <i>1905 Walnut Street</i>  <i>Higgenville, MO</i>  <i>64037</i></p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail    <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered        <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail      <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (<i>Extra Fee</i>)                      <input type="checkbox"/> Yes</p>
<p>2. Article Number                      (Transfer from service label)</p>	<p style="font-size: 1.2em; text-align: center;">7012 1010 0001 8573 4101</p>
<p>PS Form 3811, February 2004                      Domestic Return Receipt                      102595-02-M-1540</p>	

U.S. Postal Service™  
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OFFICIAL USE

Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

*Sent To*

*Citizens Cable*

*Street, Apt. No., or PO Box No.*      *KSMO*

*City, State, ZIP+4*

PS Form 3800, August 2006                      See Reverse for Instructions

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 3460 0001 2395 3514) to the following:

Operator: KSMO  
Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e)) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.
- mandatory carriage ("must-carry") on the following: (check one):
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
Phone: 913-677-7238  
Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

Citizens Telephone Company

Higginsville, Lafayette County

Corder, Lafayette County

Alma, Lafayette County

Blackburn, Lafayette & Saline County

Slater, Saline County

Gilliam, Saline County

Waverly, Lafayette County

Malta Bend, Saline County

Concordia, Lafayette County

Emma, Saline County

Houstonia, Pettis County

Sweet Springs, Saline County



# DBS ELECTION NOTICE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <span style="float: right;"><input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p>X <i>Terry Wells</i></p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span></p> <p><i>Terry Wells</i> <span style="float: right;"><i>4-2-14</i></span></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="font-size: 1.2em;"><i>Citizens Telephone Co.</i></p> <p style="font-size: 1.2em;"><i>1905 Walnut St.</i></p> <p style="font-size: 1.2em;"><i>Higginsville, MO</i></p> <p style="font-size: 1.2em;"><i>40317</i></p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail    <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered        <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail       <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em; text-align: center;">7012 3460 0001 2395 3514</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

PS Form 3811, February 2004                      Domestic Return Receipt                      102595-02-M-1540

U.S. Postal Service™  
CERTIFIED MAIL™ RECEIPT  
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

*Sent To* *Citizens Telephone*

*Street, Apt. No., or PO Box No.* *KSMO*

*City, State, ZIP+4*

PS Form 3800, August 2006 See Reverse for Instructions

7012 3460 0001 2395 3514

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 1010 0001 8573 4132) to the following:

Operator: KSMO  
 Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.**
- mandatory carriage ("must-carry") on the following: (check one):**
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
 Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
 Phone: 913-677-7238  
 Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
 Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

### **System:**

**The communities served by the System as of the date hereof are listed below.**

#### Comcast of Missouri, LLC

Baldwin Park, Cass County	Bates City, Lafayette County
Blue Springs, Jackson County	Buckner, Jackson County
Cass County	Grain Valley, Jackson County
Greenwood, Jackson County	Independence, Jackson County
Jackson County	Johnson County
Kansas City, Jackson County	Lafayette County
Lake Lotawana, Jackson County	Lake Tapawingo, Jackson County
Lake Winnebago, Cass County	Lee's Summit, Jackson County
Lenexa, Johnson County	Oak Grove, Jackson County
Odessa, Lafayette County	Olathe, Johnson County
Peculiar, Cass County	Pleasant Hill, Cass County
Raymore, Cass County	Raytown, Jackson County
Sibley, Jackson County	Sugar Creek, Jackson County

# DBS ELECTION NOTICE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <span style="font-size: 2em; font-weight: bold;">X</span> <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes                      If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="font-size: 1.2em; font-family: cursive;">Comcast of MO, LLC                      One Comcast Center                      Philadelphia, Pa                      19103</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail    <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered    <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail    <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) <span style="float: right; font-family: monospace;">7012 1010 0001 8573 4132</span></p>	
<p>PS Form 3811, February 2004 <span style="float: right;">Domestic Return Receipt <span style="margin-left: 100px;">102595-02-M-1540</span></span></p>	

U.S. Postal Service™  
 CERTIFIED MAIL™ RECEIPT  
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To Comcast of MO

Street, Apt. No.; or PO Box No. KSMO

City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7012 1010 0001 8573 4132

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 1010 0001 8573 4156) to the following:

Operator: KSMO  
 Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.**
- mandatory carriage ("must-carry") on the following: (check one):**
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
 Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
 Phone: 913-677-7238  
 Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
 Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

Community Wireless Communications Co.

Lawrence, Douglas County

# DBS ELECTION NOTICE

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 3460 0001 2395 3521) to the following:

Operator: KSMO  
Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.**
- mandatory carriage ("must-carry") on the following: (check one):**
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
Phone: 913-677-7238  
Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
Name/Title: Dale Jacobson, Director of Programming



# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

Council Grove Telephone Company

Morris County

Dickinson County

Marion County

# DBS ELECTION NOTICE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee  <i>x Ann Fuller</i></p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery  <i>9-2-14</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes                      If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:  <i>Council Grove Telephone Co</i>  <i>1568 S. 1000 Rd</i>  <i>Council Grove KS</i>  <i>66846</i></p>	<p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail    <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered        <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail       <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number- <i>7012 3460 0001 2395 3521</i>                      (Transfer from service label)</p>	
<p>PS Form 3811, February 2004                      Domestic Return Receipt                      102595-02-M-1540</p>	

U.S. Postal Service™  
 CERTIFIED MAIL™ RECEIPT  
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)®

OFFICIAL USE

Postage \$ _____	Postmark Here
Certified Fee _____	
Return Receipt Fee (Endorsement Required) _____	
Restricted Delivery Fee (Endorsement Required) _____	
Total Postage & Fees \$ _____	

Sent To *Council Grove*

Street, Apt. No., or PO Box No. *KS40*

City, State, ZIP+4 \_\_\_\_\_

PS Form 3800, August 2006 See Reverse for Instructions

7012 3460 0001 2395 3521

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 1010 0001 8573 4163) to the following:

Operator: KSMO  
 Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.**
- mandatory carriage ("must-carry") on the following: (check one):**
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
 Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
 Phone: 913-677-7238  
 Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
 Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

Cox Communications Kansas LLC  
Lecompton, Douglas County

# DBS ELECTION NOTICE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p><b>X</b> <i>[Handwritten Signature]</i></p> <p>B. Received by (<i>Printed Name</i>) <span style="float: right;">C. Date of Delivery</span></p> <p><i>Angela Craig McKenzie</i></p> <p>D. Is delivery address different from item 1? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p style="font-size: 1.2em;"><i>Cox Communications KS</i></p> <p style="font-size: 1.2em;"><i>6305-B Peachtree</i></p> <p style="font-size: 1.2em;"><i>Dunwoody Rd.</i></p> <p style="font-size: 1.2em;"><i>Atlanta, GA 30328</i></p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <span style="margin-left: 20px;"><input type="checkbox"/> Express Mail</span></p> <p><input type="checkbox"/> Registered <span style="margin-left: 20px;"><input type="checkbox"/> Return Receipt for Merchandise</span></p> <p><input type="checkbox"/> Insured Mail <span style="margin-left: 20px;"><input type="checkbox"/> C.O.D.</span></p> <p>4. Restricted Delivery? (<i>Extra Fee</i>) <span style="float: right;"><input type="checkbox"/> Yes</span></p>
<p>2. Article Number (<i>Transfer from service label</i>)</p>	<p style="font-size: 1.2em;">7012 1010 0001 8573 4163</p>
<p>PS Form 3811, February 2004 <span style="margin-left: 100px;">Domestic Return Receipt</span> <span style="float: right;">102595-02-M-1540</span></p>	

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

(*Domestic Mail Only; No Insurance Coverage Provided*)

For delivery information visit our website at [www.usps.com](http://www.usps.com)®

OFFICIAL USE

Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To *Cox Comm.*

Street, Apt. No.,  
or PO Box No. *KSMD*

City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7012 1010 0001 8573 4163

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 1010 0001 8573 4194) to the following:

Operator: KSMO  
Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.**
- mandatory carriage ("must-carry") on the following: (check one):**
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
Phone: 913-677-7238  
Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

Craw-Kan Telephone Cooperative, Inc.

Mound City, Linn County

# DBS ELECTION NOTICE

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

*Craw-Kan Telephone Coop  
200 N. Ogden St.  
Hiard KS 66743*

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
*[Signature]*  Addressee

B. Received by (Printed Name)  C. Date of Delivery  
*[Signature]*

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number  
(Transfer from service label)

7012 1010 0001 8573 4194

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**U.S. Postal Service™  
CERTIFIED MAIL™ RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

7012 1010 0001 8573 4194

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$</b>

Postmark  
Here

Sent To *Craw-Kan*  
 Street, Apt. No., or PO Box No. *KS MO*  
 City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions



# DBS ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This DBS Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 3460 0001 2395 3668) to the following DBS Operator (check one):

- DirecTV, Inc. 2260 East Imperial Highway, Mail Stop: N344, El Segundo, CA 90245, Attn: Local-into-Local Elections.
- DISH Satellite, LLC, 9601 S. Meridian Boulevard, Englewood, CO 80112, Attn: Melisa Ordonez.

**With respect to the retransmission in the above-listed DMA(s) by the above-listed DBS Operator between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (check one):**

- retransmission consent.
- mandatory carriage ("must-carry").

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
Phone: 913-677-7238  
Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.66.

Signature: \_\_\_\_\_  
Name/Title: Dale Jacobson, Director of Programming

# DBS ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This DBS Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 3460 0001 2395 3651) to the following DBS Operator (check one):

- DirecTV, Inc. 2260 East Imperial Highway, Mail Stop: N344, El Segundo, CA 90245, Attn: Local-into-Local Elections.
- DISH Satellite, LLC, 9601 S. Meridian Boulevard, Englewood, CO 80112, Attn: Melisa Ordonez.

**With respect to the retransmission in the above-listed DMA(s) by the above-listed DBS Operator between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (check one):**

- retransmission consent.**
- mandatory carriage ("must-carry").**

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
Phone: 913-677-7238  
Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.66.

Signature: \_\_\_\_\_  
Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 3460 0001 2395 3552) to the following:

Operator: KSMO  
 Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e)) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.
- mandatory carriage ("must-carry") on the following: (check one):
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
 Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
 Phone: 913-677-7238  
 Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
 Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

Eagle Communications

Clay Center, Clay County

Abilene, Dickinson County

# DBS ELECTION NOTICE

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 1010 0001 8573 4200) to the following:

Operator: KSMO  
 Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e)) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.**
- mandatory carriage ("must-carry") on the following: (check one):**
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
 Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
 Phone: 913-677-7238  
 Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
 Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

EXOP of Missouri, Inc.

Kearney, Platte County

# DBS ELECTION NOTICE



# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 11 day of September 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7014 1200 0002 1603 9730) to the following:

Operator: KCTV  
 Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e)) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.**
- mandatory carriage ("must-carry") on the following: (check one):**
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
 Address: KCTV  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
 Phone: 913-677-7238  
 Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
 Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

Fair Point Communications

Kearney, MO

# DBS ELECTION NOTICE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p><b>X</b> <i>[Signature]</i></p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="font-size: 1.2em; margin-left: 20px;"><i>FairPoint Comm.</i></p> <p style="font-size: 1.2em; margin-left: 20px;"><i>P.O. Box 11021</i></p> <p style="font-size: 1.2em; margin-left: 20px;"><i>Leicester, ME</i></p> <p style="font-size: 1.2em; margin-left: 20px;"><i>04243-9472</i></p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <span style="margin-left: 100px;"><input type="checkbox"/> Express Mail</span></p> <p><input type="checkbox"/> Registered <span style="margin-left: 100px;"><input type="checkbox"/> Return Receipt for Merchandise</span></p> <p><input type="checkbox"/> Insured Mail <span style="margin-left: 100px;"><input type="checkbox"/> C.O.D.</span></p> <p>4. Restricted Delivery? (Extra Fee) <span style="float: right;"><input type="checkbox"/> Yes</span></p>
<p>2. Article Number (Transfer from service label)</p>	<p style="font-size: 1.2em; text-align: center;">7014 1200 0002 1603 9730</p>
<p>PS Form 3811, February 2004 <span style="margin-left: 100px;">Domestic Return Receipt</span> <span style="float: right;">102595-02-M-1540</span></p>	

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OFFICIAL USE

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To *LSMD*

Street, Apt. No.,  
or PO Box No. *DairPoint*

City, State, ZIP+4 *Communication*

PS Form 3800, August 2006 See Reverse for Instructions

7014 1200 0002 1603 9730

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 1010 0001 8573 4255) to the following:

Operator: KSMO  
 Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.**
- mandatory carriage ("must-carry") on the following: (check one):**
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
 Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
 Phone: 913-677-7238  
 Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
 Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

Fidelity Cablevision Inc.

Harrisonville, Cass County

# DBS ELECTION NOTICE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Debra Parks</i>      <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)      C. Date of Delivery  <i>Debra Parks</i>      <i>9-2-14</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes                      If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:  <i>Fidelity Cablevision Inc.</i>  <i>104 N. Clark Street</i>  <i>Sullivan, MO</i>  <i>63080</i></p>	<p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail      <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered      <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail      <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee)      <input type="checkbox"/> Yes</p>
<p>2. Article Number                      (Transfer from service label)      <b>7012 1010 0001 8573 4255</b></p>	
<p>PS Form 3811, February 2004      Domestic Return Receipt      102595-02-M-1540</p>	

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Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To *Fidelity Cable*

Street, Apt. No.; or PO Box No. *CSMO*

City, State, ZIP+4

PS Form 3800, August 2006      See Reverse for Instructions

7012 1010 0001 8573 4255

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 11 day of September 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7014 1200 0002 1603 9792) to the following:

Operator: KCTV  
Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e)) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.**
- mandatory carriage ("must-carry") on the following: (check one):**
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
Address: KCTV  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
Phone: 913-677-7238  
Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

Fidelity Communications

Nevada, MO



# DBS ELECTION NOTICE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Debra Parks</i> <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span>  <i>Debra Parks</i> <span style="float: right;">9-15-14</span></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes                      If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="font-size: 1.2em; margin-left: 20px;"><i>Fidelity Communications</i>  <i>14 North Clark St.</i>  <i>Sullivan, MO</i>  <i>63080</i></p>	<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input checked="" type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number                      (Transfer from service label)</p> <p style="text-align: center; font-size: 1.2em;"><i>7014 1200 0002 1603 9792</i></p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To *Fidelity R.S.M.O.*

Street, Apt. No.;  
or PO Box No. *14 North Clark St.*

City, State, ZIP+4 *Sullivan MO 63080*

PS Form 3800, August 2006 See Reverse for Instructions

7014 1200 0002 1603 9792

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 3460 0001 2395 3699) to the following:

Operator: KSMO  
 Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.**
- mandatory carriage ("must-carry") on the following: (check one):**
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
 Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
 Phone: 913-677-7238  
 Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
 Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

Galva Cable Company

Princeton Missouri

# DBS ELECTION NOTICE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span>  <span style="float: right;">09-02-2014</span>  <span style="float: right;">Mark Johnson</span></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes                      If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="font-size: 1.2em; margin-left: 20px;">Halva Cable Company                      3230 Peachtree Corners Cir.                      Suite H                      Norcross GA                      30092</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number                      (Transfer from service label)</p>	<p style="font-size: 1.2em; text-align: center;">7012 3460 0001 2395 3699</p>

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To Halva

Street, Apt. No., or PO Box No. KSHO

City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7012 3460 0001 2395 3699

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 1010 0001 8574 3998) to the following:

Operator: KSMO  
 Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.**
- mandatory carriage ("must-carry") on the following: (check one):**
  - The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
 Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
 Phone: 913-677-7238  
 Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
 Name/Title: Dale Jacobson, Director of Programming

# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

Google Fiber Kansas, LLC

Kansas City, Wyandotte County

Kansas City, Jackson County

# DBS ELECTION NOTICE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p><b>X</b> <i>Murray</i></p> <p>B. Received by (<i>Printed Name</i>) <span style="float: right;">C. Date of Delivery</span></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="font-size: 1.2em; font-family: cursive;">Hoegle Diber Kansas 1600 Amphitheater Pkwy Mountain View, CA 94043</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (<i>Extra Fee</i>) <input type="checkbox"/> Yes</p>
<p>2. Article Number (<i>Transfer from service label</i>)</p>	<p style="font-size: 1.2em; font-family: monospace;">7012 1010 0001 8574 3998</p>
<p>PS Form 3811, February 2004 <span style="margin-left: 100px;">Domestic Return Receipt</span> <span style="float: right;">102595-02-M-1540</span></p>	

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OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Postmark Here

Sent To Hoegle

Street, Apt. No.; or PO Box No. KS MO

City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7012 1010 0001 8574 3998

# CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2012-13 NSI
KSMO	KANSAS CITY, MISSOURI	KANSAS CITY, MISSOURI
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
47	62.1	MEREDITH CORPORATION

This Cable Election Notice is sent this 30 day of August 2014 via Certified Mail/Return Receipt Requested (Receipt Number 7012 1010 0001 8573 4002) to the following:

Operator: KSMO  
Address: 4500 Shawnee Mission Parkway  
Fairway, KS 66205

**With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e)) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2015, and December 31, 2017, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):**

- retransmission consent.
- mandatory carriage ("must-carry") on the following: (check one):
- The Station's PSIP major channel number ("virtual channel").
  - The cable channel on which the Station was carried on July 19, 1985.
  - The cable channel on which the Station was carried on January 1, 1992.

Further, we hereby notify you of our election not to renew, extend, or roll-over the term of any retransmission consent agreement that may be in place between our companies at this time. For further information or to request consent to the retransmission of any program stream to which a "must-carry" election does not apply, please contact:

Name: Dale Jacobson  
Address: KSMO  
4500 Shawnee Mission Parkway  
Fairway, KS 66205  
Phone: 913-677-7238  
Email: dale.jacobson@kctv5.com

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.64.

Signature: \_\_\_\_\_  
Name/Title: Dale Jacobson, Director of Programming



# CABLE ELECTION NOTICE

## Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
KSMO	Kansas City, Missouri	Meredith Corporation

Communities in the Station's television market that are covered by the Cable Election Notice to which this Exhibit A is attached:

**System:**

**The communities served by the System as of the date hereof are listed below.**

Green Hills Communications Inc.

- Avalon, Livingston County
- Bogard, Carroll County
- Breckenridge, Caldwell County
- Cowgill, Caldwell County
- Dawn, Livingston County
- Knoxville, Ray County
- Lock Springs, Daviess County
- Ludlow, Livingston County
- Mooreville, Livingston County
- Norborne, Carroll County
- Polo, Caldwell County
- Stet, Carroll County
- Tina, Carroll County
- Wheeling, Livingston County

# DBS ELECTION NOTICE

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Green Hills Communications  
7926 NE St Rt. M  
Breckenridge, MO  
64625

2. Article Number  
(Transfer from service label)

7012 1010 0001 8573 4002

## COMPLETE THIS SECTION ON DELIVERY

A. Signature  Agent  Addressee  
X Robin Mattar

B. Received by (Printed Name) C. Date of Delivery  
9-3-14

D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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7012 1010 0001 8573 4002

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Postmark  
Here

Sent To Green hills  
 Street, Apt. No.; or PO Box No. KSMO  
 City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions