



VIA: CERTIFIED MAIL, RETURN RECEIPT REQUESTED

December 16, 2016

HITN

Jonathan Guerra
63 Flushing Avenue
Building 292, Suite 211
Brooklyn, NY 11205

RE: Certification of Compliance with Children's Television Laws & Closed Captioning

To Whom It May Concern:

Mediacom is requesting a certificate from HITN for your networks (listed below) in order to be in compliance with our record keeping obligations as a cable operator under the Children's Television Act of 1990 and the FCC rules implementing the Act (Ref 76.1703, 76.225). We need certificates for the three months ended December 31, 2016.

1. HITN

In addition, we respectfully request a certification for closed captioning as required by the FCC Rules and Regulation. (Ref 79.3(b)(3), 79.3(e)(3)(i))

Please have the appropriate officer of your company review the Children's Programming practices and Closed Captioning requirements for the quarters stated above and send us certification. In addition, please make a detailed notation of any instances in which your programs exceeded the limits on commercial time. When complete, please send notification(s) to my attention at the address listed below or you can email an electronic version to: djanssen@mediacomcc.com.

As you probably are aware, under FCC Rules, we must place certification in our files before the 10th of the month following the end of each quarter. We therefore appreciate your prompt attention to this matter.

Sincerely,

A handwritten signature in cursive script that reads "Dawn Janssen".

Dawn Janssen

PS Form 3800, August 2006
See Reverse for Instructions

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

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Return Receipt Fee (Endorsement Required)

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HITN

Jonathan Guerra
63 Flushing Ave., Bldg. 292, Suite 211
Brooklyn, NY 11205

Sent to
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 City, State

Postmark Here

7014 1200 0002 3144 0853



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL[™]

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

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

HITN
Jonathan Guerra
63 Flushing Ave., Bldg. 292, Suite 211
Brooklyn, NY 11205

2. Article Number
 (Transfer from service label)
7014 1200 0002 3144 0853

3. Service Type

☒ Certified Mail
☐ Registered Mail
☐ Insured Mail

☒ Return Receipt for Merchandise
☐ C.O.D.

4. Restricted Delivery? (Extra Fee)
☐ Yes
☐ No

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Addressee ☐ Agent

B. Received by (Printed Name)

C. Date of Delivery

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