



David G. O'Neil
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September 28, 2017

BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED

General Manager/Office Manager
Pavlov Media
HE Location: San Antonio
206 North Randolph Street
Champaign, IL 61820

Re: Election of Must Carry-Status

Dear Sir or Madam:

Please be advised that, pursuant to Section 76.64(f) of the rules of the Federal Communications Commission (FCC), SATV10, LLC, licensee of television station KYVV-DT, San Antonio, TX (the "Station"), located in the SAN ANTONIO DMA, hereby gives notice to Pavlov Media of their election of must carry status with respect to your cable system in this market for the period commencing January 1, 2018 through December 31, 2020.

Pursuant to Section 76.57(d) of the Commission's Rules, KYVV elects continued carriage on the same cable channel the Station was carried on during the 2015-2017 period. If necessary, we are prepared to discuss with you another mutually-acceptable channel position.

Call sign of the station electing must carry:

Station KYVV-DT

Community of license of the station electing must carry:

Del Rio, TX

Name and official mailing address of the television licensee electing must carry:

SATV10, LLC
3680 South Maryland Parkway, #102
Las Vegas, NV 89169

1200 New Hampshire Ave., NW | Suite 600 | Washington, DC 20036
Voice: 202.296.2007 | Fax: 202.296.2014
www.rinioneil.com | www.telecommunicationslaw.com

Contact person for the station electing must carry:

Ricardo Reyna
775-382-2757

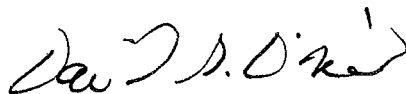
Copies of any correspondence, notices and other communications should be sent to the following:

Randy E. Nonberg
President
CNZ Communications, LLC
15200 Sunset Boulevard
Suite 202
Pacific Palisades, CA 90272
310.573-1600
randynonberg@cnzcommunications.com

You may receive more than one copy of this letter in our effort to ensure that this letter reaches the appropriate party at your cable system.

If you have any questions concerning this election please do not hesitate to contact me at (202) 955-3931. Our partnership with you is very important to us. We look forward to an ongoing and mutually beneficial relationship with your company.

Sincerely,



David G. O'Neil
Counsel for SATV10, LLC

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>1. General Manager/Office Manager Pavlov Media HE Location: San Antonio 206 North Randolph Street Champaign, IL 61820</p>		<p>A. Signature X</p> <p><input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>	
		B. Received by (Printed Name)	C. Date of Delivery
		<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>2. Article Number (Transfer from service label) 7017 1000 0000 4505 8444</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Mail <input type="checkbox"/> Mail Restricted Delivery</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

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<input type="checkbox"/> Adult Signature Required	\$ _____

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General Manager/Office Manager
Pavlov Media
HE Location: San Antonio
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Champaign, IL 61820

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions