



P.O. Box 320
 Tupelo MS
 38802
 662-842-7620

September 11, 2017

Via Certified U.S. Mail, Return Receipt Requested

Mr. Layne Sisk (Layne@Realchoice.tv)
 Real Choice TV
 P.O. Box 970842
 Orem, UT 84097

Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madam:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require [insert name of cable company] to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,


 Jerry Jones
 General Manager

Enclosure

cc: Public File

7015 1520 0002 2169 8489

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®

OFFICIAL

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$

Total Postage and Fees
 \$ 6.56

Sent To

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

City, State, ZIP+4®

Postmark Here
SEP 11 2017

38866

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

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Mississippi

Alabama



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Richard Levine
AT&T U-Verse
1880 Century Park E, Ste 1101
Los Angeles, CA 90067

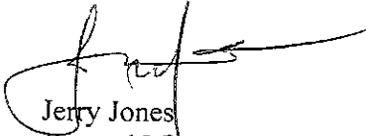
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require AT&T U-Verse to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

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Sincerely,


Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Water Valley and Yalobusha County, MS



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

ATT&T U-Verse
System Manager
1010 N St. Mary's St #1318
San Antonio, TX 78215-2109

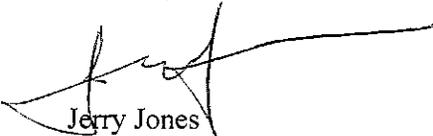
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir:

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Sincerely,


Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

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Water Valley and Yalobusha County, MS

723269

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3.
- 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:

ATT & T U-Verse
System Manager
1010 N. ST. Mary's Street
#1318
San Antonio, TX 78215-2109

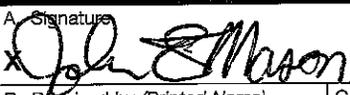


9590 9401 0157 5234 2326 98

2. Article Number (Transfer from service label)

015 1520 0002 2169 8212

COMPLETE THIS SECTION ON DELIVERY

A. Signature


Agent
 Addressee

B. Received by (Printed Name)
 C. Date of Delivery
 8/29/17

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

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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For delivery information, visit our website at www.usps.com

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fees as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.05
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage
 \$ 0.46

Total Postage and Fees
 \$ 6.56

Sent To
 ATT & T U-Verse
 Street and Apt. No., or PO Box No.
 1010 N. ST. Mary's Street #1318
 City, State, ZIP+4®
 San Antonio TX 78215-2109

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

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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For delivery information, visit our website at www.usps.com

OFFICIAL MAIL

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fees as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.05
<input type="checkbox"/> Return Receipt (electronic)	\$
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<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

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 1010 N. ST. Mary's Street #1318
 City, State, ZIP+4®
 San Antonio TX 78215-2109

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

SALTILLO, MS
 AUG 23 2017
 38866



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

BCI Mississippi Broadband LLC
Ivelisse Cruz
P.O. Box 190
Booneville, MS 38829

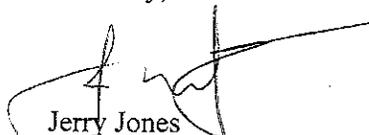
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Madam:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **BCI Mississippi Broadband LLC** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Bruce, Pittsboro, Derma, Calhoun, Vardaman, Calhoun City, Calhoun Co., Houston, Mathiston, Shannon, Nettleton, Guntown, Saltillo, Amory, Aberdeen, Smithville, Hatley, Nettleton, Starkville, Oktibbeha Co., Maben, Miss. State, Pontotoc, Ecu, Booneville, Baldwyn, Jumpertown, Iuka, Belmont, Golden, Tishomingo Co., Burnsville, Dennis, New Albany, Ingomar, Myrtle, Louisville, Noxapater, Coffeerville, Water Valley, Oxford, Aboville, University of Miss., MS.

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

*BCI Mississippi Broadband LLC
Ivelisse Cruz
P.O. Box 190
Booneville, MS 38829*



9590 9401 0157 5234 2326 81

2. Article Number (Transfer from service label)

7015 1520 0002 2169 8229

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Ivelisse Cruz

- Agent
- Addressee

see
ery

B. Received by (Printed Name)

C. Date of Delivery

8/25/17

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

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)

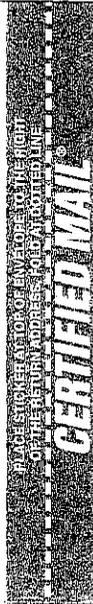
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

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PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7015 1520 0002 2169 8229



7015 1520 0002 2169 8229

**U.S. Postal Service™
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Certified Mail Fee

\$ *3.35*

Extra Services & Fees (check box, add fees as appropriate)

- Return Receipt (hardcopy) \$ *2.75*
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postmark
Here

Postage

\$ *0.46*

Total Postage and Fees

\$ *6.56*

Sent To

*BCI Mississippi Broadband LLC
Ivelisse Cruz*

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

P.O. Box 190

City, State, ZIP+4®

Booneville MS 38829

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7015 1520 0002 2169 8229

**U.S. Postal Service™
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For delivery information, visit our website at www.usps.com®.

OFFICIAL RECEIPT

Certified Mail Fee

\$ *3.35*

Extra Services & Fees (check box, add fees as appropriate)

- Return Receipt (hardcopy) \$ *2.75*
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postage

\$ *0.46*

Total Postage and Fees

\$ *6.56*

Sent To

*BCI Mississippi Broadband LLC
Ivelisse Cruz*

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

P.O. Box 190

City, State, ZIP+4®

Booneville MS 38829

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions





P.O. Box 320
Tupelo MS
38802
662-842-7620

August 23, 2017

Via Certified U.S. Mail, Return Receipt Requested

BCI Mississippi Broadband LLC
Ivelisse Cruz
Chief Strategy Officer
486 N. Third Street
Booneville, MS 38829

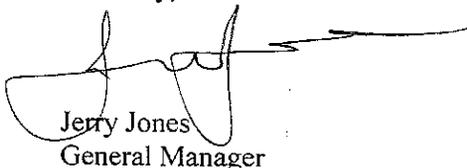
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madam:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require BCI Mississippi Broadband LLC to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

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Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Bruce, Pittsboro, Derma, Calhoun, Vardaman, Calhoun City, Calhoun Co., Houston, Mathiston, Shannon, Nettleton, Guntown, Saltillo, Amory, Aberdeen, Smithville, Hatley, Nettleton, Starkville, Oktibbeha Co., Maben, Miss. State, Pontotoc, Ecpu, Booneville, Baldwin, Jumpertown, Iuka, Belmont, Golden, Tishomingo Co., Burnsville, Dennis, New Albany, Ingomar, Myrtle, Louisville, Noxapater, Coffeerville, Water Valley, Oxford, Abbeville, University of Miss., MS.

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

*Manuseth Broadband
Attn: Ivelisse Cruz
Chief Strategy Officer
486 N. Third Street
Booneville, MS 38829*



9590 9403 0516 5173 9253 06

2. Article Number (Transfer from service label)

7015 1520 0002 2169 8366

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Ivelisse Cruz*

- Agent
- Addressee

- Agent
 - Addressee
- Date of Delivery

B. Received by (Printed Name)

C. Date of Delivery ?

8/25/07

- Yes
- No

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

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

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ature Confirmation
stricted Delivery

ic Return Receipt

Domestic Return Receipt

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®



9590 9403 0516 5173 9253 06
7015 1520 0002 2169 8366

Certified Mail Fee
\$ *3.35*

Extra Services & Fees (check box, add fees as appropriate)

- Return Receipt (hardcopy) \$ *2.75*
- Return Receipt (electronic) \$ _____
- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postage
\$ *0.46*

Total Postage and Fees
\$ *6.56*

Sent To
Manuseth Broadband Ivelisse Cruz
Street and Apt. No., or PO Box No.
486 N. Third Street
City, State, ZIP+4®
Booneville, MS 38829

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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OFFICIAL USE

Certified Mail Fee
\$ *3.35*

Extra Services & Fees (check box, add fees as appropriate)

- Return Receipt (hardcopy) \$ *2.75*
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- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

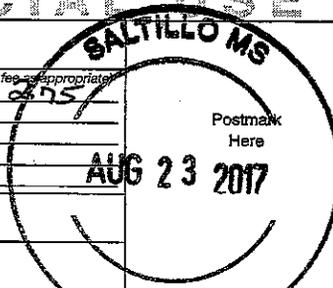
Postage
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Total Postage and Fees
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Manuseth Broadband Ivelisse Cruz
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486 N. Third Street
City, State, ZIP+4®
Booneville, MS 38829

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



9590 9403 0516 5173 9253 06
7015 1520 0002 2169 8366



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

BCI Mississippi Broadband LLC
Rick Ferrall
105 Allison Cove
Oxford, MS 38655

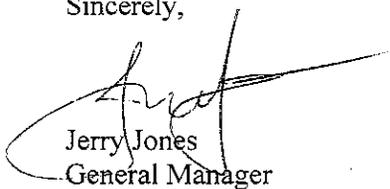
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General Manager

Enclosure

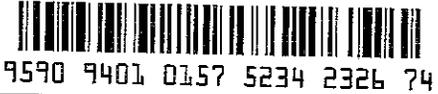
cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

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Bruce, Pittsboro, Derma, Calhoun, Vardaman, Calhoun City, Calhoun Co., Houston, Mathiston, Shannon, Nettleton, Guntown, Sattillo, Amory, Aberdeen, Smithville, Hatley, Nettleton, Starkville, Oktibbeha Co., Maben, Miss. State, Pontotoc, Ecpu, Booneville, Baldwin, Jumpertown, Iuka, Belmont, Golden, Tishomingo Co., Burnsville, Dennis, New Albany, Ingomar, Myrtle, Louisville, Noxapater, Coffeerville, Water Valley, Oxford, Aberville, University of Miss., MS.

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) Tyler Bayer</p> <p>C. Date of Delivery 8-26-17</p>																
<p>1. Article Addressed to: BEI Mississippi Broadband LLC Rick Ferrall 105 Allison Cove Oxford, MS 38655</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>																
<p>2. Article Number (Transfer from service label) 7015 1520 0002 2169 8281</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	



PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 1520 0002 2169 8281
 PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE
CERTIFIED MAIL®



U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®	
OFFICIAL USE	
Certified Mail Fee \$ 3.35	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy) \$ 2.15	
<input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$ 0.46	Total Postage and Fees \$ 6.56
Sent to BEI Mississippi Broadband, LLC Rick Ferrall Street and Apt. No., or PO Box No. 105 Allison Cove City, State, ZIP+4® Oxford, MS 38655	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®	
OFFICIAL USE	
Certified Mail Fee \$ 3.35	Postmark Here SALTILLO MS AUG 23 2017
Extra Services & Fees (check box, add fee as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy) \$ 2.15	
<input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$ 0.46	Total Postage and Fees \$ 6.56
Sent to BEI Mississippi Broadband, LLC Rick Ferrall Street and Apt. No., or PO Box No. 105 Allison Cove City, State, ZIP+4® Oxford, MS 38655	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

7015 1520 0002 2169 8281



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Cable One
Michelle Cameron, VP
210 E. Earll Drive
Phoenix, AZ 85012

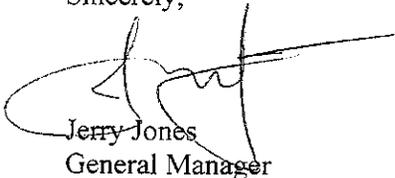
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Cable One** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Columbus AFB, Columbus, Lowndes Cty,
New Hope, Steens, Rural Hill, Caledonia,
Hamilton, MS

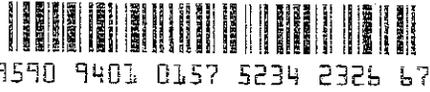
Duck Hill, Winona, Kilmichael, Grenada Cty,
Grenada, Carrollton, North Carrollton,
Vaiden, Sumner, Tutwiler, Webb and
Charleston, MS

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

*Cable One
Michelle Cameron VP
210 E. Earl Drive
Phoenix, AZ 85012*



9590 9401 0157 5234 2326 67

2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

7015 1520 0002 2169 8236
 CERTIFIED MAIL®
 PLEASE STICK TO THE RIGHT OF THE RETURN ADDRESS TO KEEP MAIL ON TRACK



9528 6912 2000 2169 8236
 7015 1520 0002 2169 8236
 7015 1520 0002 2169 8236

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

Certified Mail Fee	\$ 3.35
Extra Services & Fees (check box, add fee as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.95
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$ 0.46
Total Postage and Fees	\$ 6.56

Sent To
Cable One Michelle Cameron VP
 Street and Apt. No., or PO Box No.
210 E. Earl Drive
 City, State, ZIP+4®
Phoenix AZ 85012

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

9528 6912 2000 2169 8236
 7015 1520 0002 2169 8236

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee	\$ 3.35
Extra Services & Fees (check box, add fee as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.95
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$ 0.46
Total Postage and Fees	\$ 6.56

Sent To
Cable One Michelle Cameron VP
 Street and Apt. No., or PO Box No.
210 E. Earl Drive
 City, State, ZIP+4®
Phoenix AZ 85012

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

SALT LAKE CITY, UT 84103
AUG 23 2017
 38866



P.O. Box 320
Tupelo MS
38802
662-842-7620

August 23, 2017

Via Certified U.S. Mail, Return Receipt Requested

Cable One
Donna Chatman
P.O. Box 1468
Columbus, MS 39701

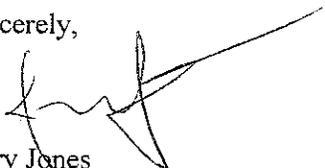
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Cable One** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Columbus AFB, Columbus, Lowndes Cty,
New Hope, Steens, Rural Hill, Caledonia,
Hamilton, MS

Duck Hill, Winona, Kilmichael, Grenada Cty,
Grenada, Carrollton, North Carrollton,
Vaiden, Sumner, Tutwiler, Webb and
Charleston, MS

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Cable One
 Donna Chatman
 P.O. Box 1468
 Columbus, MS 39701



9590 9401 0157 5234 2326 50

2. Article Number (Transfer from service label)

7015 1520 0002 2169 8243

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Ginga Carter

- Agent
- Addressee
- 3. Date of Delivery

B. Received by (Printed Name)

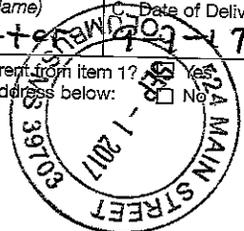
Ginga Carter

C. Date of Delivery

8-17

- Yes
- No

D. Is delivery address different from item 1? If YES, enter delivery address below:



3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery
- Electronic Return Receipt

U.S. Postal Service CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee

\$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ 2.15
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postmark Here

Postage

\$ 0.46

Total Postage and Fees

\$ 6.56

Sent To

Cable One
 Donna Chatman
 P.O. Box 1468
 Columbus, MS 39701

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7015 1520 0002 2169 8243



7015 1520 0002 2169 8243

7015 1520 0002 2169 8243

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

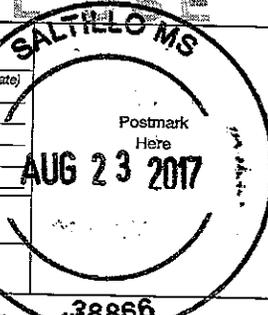
OFFICIAL USE

Certified Mail Fee

\$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ 2.15
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$



Postage

\$ 0.46

Total Postage and Fees

\$ 6.56

Sent To

Cable One
 Donna Chatman
 P.O. Box 1468
 Columbus, MS 39701

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7015 1520 0002 2169 8243



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Cable One

Deron Lindsay
2247 Commerce Street
Grenada, MS 38901

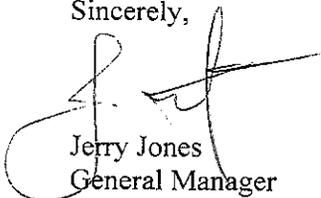
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Cable One** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

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Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

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Columbus AFB, Columbus, Lowndes Cty,
New Hope, Steens, Rural Hill, Caledonia,
Hamilton, MS

Duck Hill, Winona, Kilmichael, Grenada Cty,
Grenada, Carrollton, North Carrollton,
Vaiden, Sumner, Tutwiler, Webb and
Charleston, MS

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Cable One
 Deron Lindsay
 2247 Commerce Street
 Grenada, MS 38901



9590 9401 0157 5234 2326 43

2. Article Number (Transfer from service label)

7015 1520 0002 2169 8250

COMPLETE THIS SECTION ON DELIVERY

A. Signature see ary
 x Maria Coffey Agent Addressee

B. Received by (Printed Name) C. Date of Delivery
 Maria Coffey 8-25-17

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

3. Service Type Priority Mail Express®

Adult Signature Registered Mail™

Adult Signature Restricted Delivery Registered Mail Restricted Delivery

Certified Mail® Return Receipt for Merchandise

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery (over \$500)

Insured Mail

Insured Mail Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053 11

Domestic Return Receipt

7015 1520 0002 2169 8250



7015 1520 0002 2169 8250

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.15

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage
 \$ 0.46

Total Postage and Fees
 \$ 6.56

Sent To
 Cable One Deron Lindsay
 Street and Apt. No., or PO Box No.
 2247 Commerce Street
 City, State, ZIP+4®
 Grenada, MS 38901

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

7015 1520 0002 2169 8250

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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For delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.15

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage
 \$ 0.46

Total Postage and Fees
 \$ 6.56

Sent To
 Cable One Deron Lindsay
 Street and Apt. No., or PO Box No.
 2247 Commerce Street
 City, State, ZIP+4®
 Grenada, MS 38901

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

SALTILLO MS
 AUG 23 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

August 23, 2017

Via Certified U.S. Mail, Return Receipt Requested

Cable TV
Andy Williams
P.O. Box 2598
Starkville, MS 39760

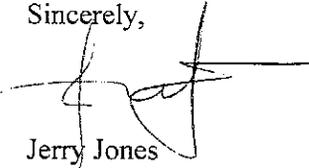
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Cable TV** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

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Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Artesia, Brooksville, Crawford, Eupora,
Macon, Shuqualak, Oktibbeha Co., MS

723263

SENDER: COMPLETE THIS SECTION

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Cable TV
 Andy Williams
 P.O. Box 2598
 Sikeville, MS 39760



9590 9401 0157 5234 2326 36

2. Article Number (Transfer from service label)

7015 1520 0002 2169 8267

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent Addressee

B. Received by (Printed Name) *James Hollis* Date of Delivery *08/24/11*

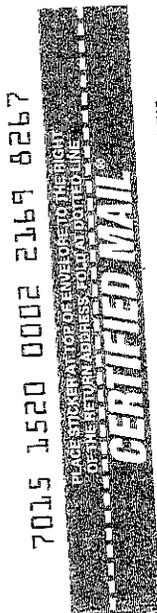
D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt



7015 1520 0002 2169 8267
 7015 1520 0002 2169 8267

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.05
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage
 \$ 0.46

Total Postage and Fees
 \$ 6.56

Sent To
 Cable TV
 Street and Apt. No., or PO Box No.
 P.O. Box 2598
 City, State, ZIP+4®
 Sikeville, MS 39760

Postmark Here

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

7015 1520 0002 2169 8267
 7015 1520 0002 2169 8267

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.05
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage
 \$ 0.46

Total Postage and Fees
 \$ 6.56

Sent To
 Cable TV
 Street and Apt. No., or PO Box No.
 P.O. Box 2598
 City, State, ZIP+4®
 Sikeville, MS 39760

Postmark
 AUG 23 2011
 38866

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



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail. Return Receipt Requested

Cebridge Acquisition, L.P.

Chris Bartlow

520 Maryville Centre Drive, Suite 300

St. Louis, MO 63131

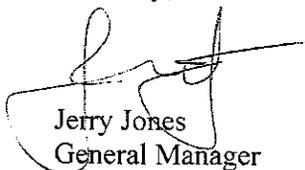
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Cebridge Acquisition, L.P.** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Carroll County, MS

SENDER: COMPLETE THIS SECTION

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Cebridge Acquisition, L.P.
 Chris Barlow
 520 Maryville Centre Drive
 Suite 300
 St. Louis, MO 63131



9590 9403 0516 5173 9254 29

2. Article Number (Transfer from service label)

7015 1520 0002 2169 8274

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

C. Date of Delivery

8/28/17

D. Is delivery address different from item #? If YES, enter delivery address below:

Yes No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery over \$500

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9063

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com®



7015 1520 0002 2169 8274
7015 1520 0002 2169 8274

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fees as appropriate)

- Return Receipt (hardcopy) \$ 2.05
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage
 \$ 0.46

Total Postage and Fees
 \$ 6.56

Sent To
 Cebridge Acquisition, L.P. Chris Barlow
 Street and Apt. No., or PO Box No.
 520 Maryville Centre Drive
 City, State, ZIP+4®
 St. Louis MO 63131

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

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com®

OFFICIAL FORM NO. 3800

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fees as appropriate)

- Return Receipt (hardcopy) \$ 2.05
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage
 \$ 0.46

Total Postage and Fees
 \$ 6.56

Sent To
 Cebridge Acquisition, L.P. Chris Barlow
 Street and Apt. No., or PO Box No.
 520 Maryville Centre Drive
 City, State, ZIP+4®
 St. Louis MO 63131

PS Form 3800, April 2015 PSN 7530-02-000-9047

AUG 23 2017

38866

7015 1520 0002 2169 8274



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Centurytel Broadband Services, LLC
625 Cherry Street
Columbia, MO 65201

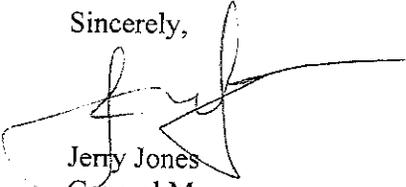
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Centurytel Broadband Services, LLC** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,


Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Columbus-West Point-Houston, MS DMA

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Centinatel Broadband Services, LLC
625 Cherry Street
Columbia, MO 65201



9590 9403 0516 5173 9254 05

2. Article Number (Transfer from service label)

7016 0750 0001 0071 5321

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Luther Triller*

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery
8-28-17

- Yes
- No

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

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Mail Express®
Registered Mail™
Registered Mail Restricted Delivery

Return Receipt for Merchandise
Signature Confirmation™
Signature Confirmation Restricted Delivery

Return Receipt

Domestic Return Receipt

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee

\$ 3.35

Extra Services & Fees (check box, add fees as appropriate)

- Return Receipt (hardcopy) \$ 2.75
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage

\$ 0.46

Total Postage and Fees

\$ 6.56

Sent To

Centinatel Broadband Services, LLC
Street and Apt. No., or PO Box No.
625 Cherry Street
City, State, ZIP+4®
Columbia, MO 65201

PS Form 3800, April 2015 PSN 7530-02-000-9047

Postmark Here

7016 0750 0001 0071 5321



7016 0750 0001 0071 5321

7016 0750 0001 0071 5321

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee

\$ 3.35

Extra Services & Fees (check box, add fees as appropriate)

- Return Receipt (hardcopy) \$ 2.75
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage

\$ 0.46

Total Postage and Fees

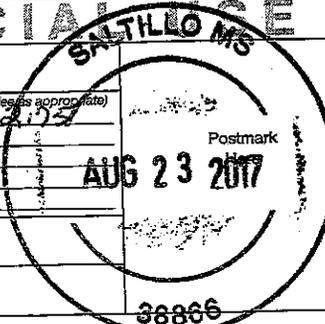
\$ 6.56

Sent To

Centinatel Broadband Services, LLC
Street and Apt. No., or PO Box No.
625 Cherry Street
City, State, ZIP+4®
Columbia, MO 65201

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



7016 0750 0001 0071 5321



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Charter Communications

Attn: General Counsel
400 Atlantic Street
Stamford, CT 06901

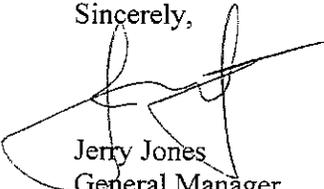
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Charter Communications** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,


Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Sulligent, Vernon, Lamar County, Beaverton,
Marion Co., Guin, AL

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

*Chaste Communications
Attn: General Counsel
400 Atlantic Street
Stamford, Connecticut 06901*



9590 9403 0516 5173 9253 82

2. Article Number (Transfer from service label)

7015 1520 0002 2169 8298

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
[Signature] Agent Addressee

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

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

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

Domestic Return Receipt

7015 1520 0002 2169 8298



7015 1520 0002 2169 8298
7015 1520 0002 2169 8298

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.75
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage
 \$ 0.46

Total Postage and Fees
 \$ 6.56

Sent To
Chaste Communications Attn: General Counsel
 Street and Apt. No., or PO Box No.
400 Atlantic Street
 City, State, ZIP+4®
Stamford, Connecticut 06901

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

7015 1520 0002 2169 8298

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL SALTILOMS

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.75
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage
 \$ 0.46

Total Postage and Fees
 \$ 6.56

Sent To
Chaste Communications Attn: General Counsel
 Street and Apt. No., or PO Box No.
400 Atlantic Street
 City, State, ZIP+4®
Stamford, Connecticut 06901

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

AUG 23 2017
 38866



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Charter Communications

P.O. Box 244
Athens, AL 35612

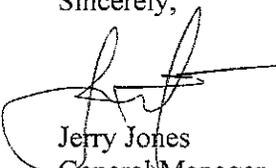
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Charter Communications** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,


Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Sulligent, Vernon, Lamar County, Beaverton,
Marion Co., Guin, AL

WTVA
TUPALO COLUMBUS abc
P.O. Box 320
Tupelo, Mississippi 38802

Charter Communications
Attn: General Counsel
P.O. Box 244
Athens, AL 35612

7016 0750 0001 0071 5338



COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
X
 B. Received by (Printed Name) C. Date of Delivery
 D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

Service Type Priority Mail Express®
 Adult Signature Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restricted Delivery
 Certified Mail® Return Receipt for Merchandise
 Certified Mail Restricted Delivery Signature Confirmation™
 Collect on Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Insured Mail Restricted Delivery (over \$500)

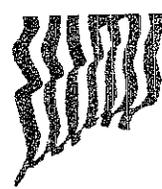
Domestic Return Receipt

**Service™
FIRST CLASS MAIL® RECEIPT**

For more information, visit our website at www.usps.com

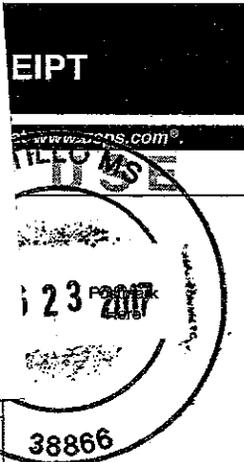
Postage (add fees as appropriate)
 \$ 2.75
 Postmark Here
 Delivery \$

Charter Communications General Counsel
 P.O. Box No. 244
 35612
 See Reverse for Instructions



ZIP 38866
041M11272984

NEOPOST
08/23/2017
FIRST-CLASS MAIL
US POSTAGE \$006.56



UTF BC: 38802032020
 MIXIE 352 FE 1
 RETURN TO SENDER
 AS ADDRESSED
 NOT DELIVERABLE
 UNABLE TO FORWARD
 *1047-13115-23-44

[Handwritten signature]

[Handwritten: 825]

Total Postage and Fees \$6.56
 Sent To Charter Communications General Counsel
 Street and Apt. No., or PO Box No. P.O. Box 244
 City, State, ZIP+4 Athens, AL 35612
 PS Form 3800, April 2015 PSN 7530-02-000-8047 See Reverse for Instructions



P.O. Box 320
Tupelo MS
38802
662-842-7620

August 23, 2017

Via Certified U.S. Mail, Return Receipt Requested

Charter Communications

ATTN: VP Broadcaster Relations
6399 S. Fiddler's Green Circle
6th Floor
Greenwood Village, CO 80111

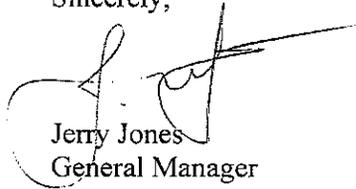
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Charter Communications** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Sulligent, Vernon, Lamar County, Beaverton,
Marion Co., Guin, AL

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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
 ATTN: VP Broadcaster Relations
 6399 S. Fiddler's Green Circle
 6th Floor
 Greenwood Village, Colorado 80111



9590 9403 0516 5173 9253 68

2. Article Number (Transfer from service label)

15 1520 0002 2169 8304

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

- Agent
 - Addressee
- C. Date of Delivery

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

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

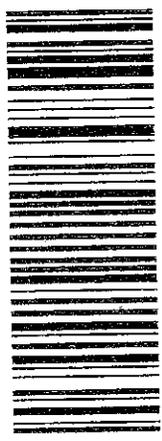
Priority Mail Express®
Registered Mail™
Registered Mail Restricted Delivery

Return Receipt for Merchandise
Signature Confirmation™
Signature Confirmation Restricted Delivery

Electronic Return Receipt

Domestic Return Receipt

7015 1520 0002 2169 8304
 CERTIFIED MAIL
 REGISTERED MAIL
 RETURN RECEIPT (HARDOOPY)
 RETURN RECEIPT (ELECTRONIC)
 CERTIFIED MAIL RESTRICTED DELIVERY
 ADULT SIGNATURE REQUIRED
 ADULT SIGNATURE RESTRICTED DELIVERY



4036 4916 8304
 7015 1520 0002 2169 8304
 7015 1520 0002 2169 8304
 7015 1520 0002 2169 8304

Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee

\$ 3.35

Extra Services & Fees (check box, add fees as appropriate)

- Return Receipt (hardcopy) \$ 2.95
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postmark Here

Postage

\$ 0.46

Total Postage and Fees

\$ 6.56

Sent To

Charter Communications VP Broadcaster Relations
 Street and Apt. No., or PO Box No.
 6399 S. Fiddler's Green Circle 6th Floor
 City, State, ZIP+4®
 Greenwood Village, Colorado 80111

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL SALTILLO MS

Certified Mail Fee

\$ 3.35

Extra Services & Fees (check box, add fees as appropriate)

- Return Receipt (hardcopy) \$ 2.95
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage

\$ 0.46

Total Postage and Fees

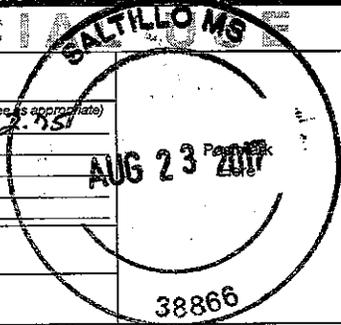
\$ 6.56

Sent To

Charter Communications VP Broadcaster Relations
 Street and Apt. No., or PO Box No.
 6399 S. Fiddler's Green Circle 6th Floor
 City, State, ZIP+4®
 Greenwood Village, Colorado 80111

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



7015 1520 0002 2169 8304
 7015 1520 0002 2169 8304
 7015 1520 0002 2169 8304
 7015 1520 0002 2169 8304



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Comcast Cable

Attn: General Counsel
One Comcast Center
1701 John F. Kennedy Blvd
Philadelphia, PA 19103-2838

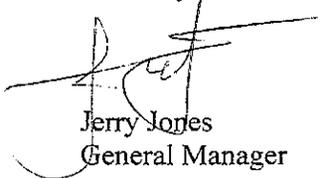
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Comcast Cable** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Okolona, West Point, Clay County, Fulton,
Tremont, Mantachie, Mooreville, Itawamba
Co., Tupelo, Verona, Plantersville, Lee Co.,
Sherman, Marietta, Corinth, Alcorn Co.,
Brownfield, Walnut and Tippah Co., MS



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Comcast Cable
P.O. Box 1544
Tupelo, MS 38801

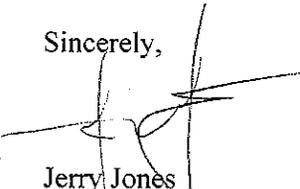
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Comcast Cable** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Okolona, West Point, Clay County, Fulton,
Tremont, Mantachie, Mooreville, Itawamba
Co., Tupelo, Verona, Plantersville, Lee Co.,
Sherman, Marietta, Corinth, Alcorn Co.,
Brownfield, Walnut and Tippah Co., MS

Tupelo, Mississippi 38802

P.O. Box 320



Comcast Cable Communications LLC
P.O. Box 1544
Tupelo, MS 38801

7015 1520 0002 2169 8328



CERTIFIED MAIL

NIXIE

381 NFE 1

1710008/23/17

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

RC: 38802032020

*1047-13120-23-44

1127



08/23/2017
US POSTAGE

\$006.56

ZIP 38866
041M11272984

NEOPOST

FIRST-CLASS MAIL

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) _____ C. Date of Delivery _____

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

3. Service Type

Adult Signature Priority Mail Express®
 Adult Signature Restricted Delivery Registered Mail™
 Certified Mail® Registered Mail Restricted Delivery
 Certified Mail Restricted Delivery Return Receipt for Merchandise
 Collect on Delivery Signature Confirmation™
 Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery
 Insured Mail Signature Confirmation Restricted Delivery (over \$500)
 Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

Postmark Here

Certified Mail Fee \$3.35

Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Weight _____

Total Postage and Fees \$6.56

Sent To
Comcast Cable Communications, LLC
Street and Apt. No., or PO Box No.
P.O. Box 1544
City, State, ZIP+4®
Tupelo, MS 38801

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

**U.S. Postal Service™
FIRST-CLASS MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

Postmark
AUG 23 2017

38866

Total Postage and Fees \$6.56

Sent To
Comcast Cable Communications, LLC
Street and Apt. No., or PO Box No.
P.O. Box 1544
City, State, ZIP+4®
Tupelo, MS 38801

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

1127

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Comcast Cable Communications
 Attn: General Counsel
 ONE Comcast Center
 1701 John F Kennedy Blvd.
 Philadelphia, PA 19103-2838



9590 9403 0516 5173 9253 75

2. Article Number (Transfer from service label)

7015 1520 0002 2169 8311

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Return Address (Printed Name)

COMCAST CORPORATION
 ONE COMCAST CENTER
 PHILADELPHIA, PA 19103-2838

C. Date of Delivery

D. Is delivery address here a return address?

Yes No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)

- Priority Mail Express® for
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

press®
TM
Restricted

Receipt

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7015 1520 0002 2169 8311
CERTIFIED MAIL



7015 1520 0002 2169 8311
7015 1520 0002 2169 8311

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com®

Certified Mail Fee

\$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ 2.05
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postmark
Here

Postage

\$ 0.46

Total Postage and Fees

\$ 6.56

Sent To

Comcast Cable Comm. LLC, Attn: General Counsel
 Street and Apt. No., or PO Box No.
 1701 John F. Kennedy Boulevard
 City, State, ZIP+4®
 Philadelphia, PA 19103-2838

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7015 1520 0002 2169 8311

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com®

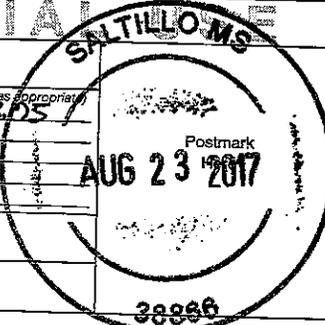
OFFICIAL RECEIPT

Certified Mail Fee

\$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ 2.05
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$



Postage

\$ 0.46

Total Postage and Fees

\$ 6.56

Sent To

Comcast Cable Comm. LLC, Attn: General Counsel
 Street and Apt. No., or PO Box No.
 1701 John F. Kennedy Boulevard
 City, State, ZIP+4®
 Philadelphia, PA 19103-2838

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Comcast Cable

ATTN: Senior Vice President
Broadcaster Relations
One Comcast Center
1701 John F. Kennedy Blvd
Philadelphia, PA 19103-2838

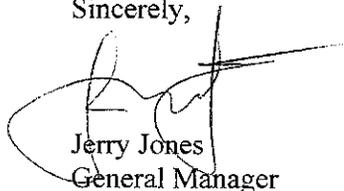
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Comcast Cable** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Okolona, West Point, Clay County, Fulton,
Tremont, Mantachie, Mooreville, Itawamba
Co., Tupelo, Verona, Plantersville, Lee Co.,
Sherman, Marietta, Corinth, Alcorn Co.,
Brownfield, Walnut and Tippah Co., MS

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Comcast Cable Communications, LLC
 Attn: Sr. VP Broadcast Relations
 One Comcast Center
 1701 John F. Kennedy Boulevard
 Philadelphia, PA 19103-2838



9590 9403 0516 5173 9253 51

2. Article Number (Transfer from service label)

7016 0750 0001 0071 5345

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

COMCAST CORPORATION
 ONE COMCAST CENTER
 PHILADELPHIA, PA 19103-2838

- Agent
- Addressee
- Date of Delivery

B. Received by (Printed Name) Agent Addressee

D. Is delivery address the same as the return address? Yes No
 If YES, enter delivery address below: No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery
- Return Receipt

Domestic Return Receipt

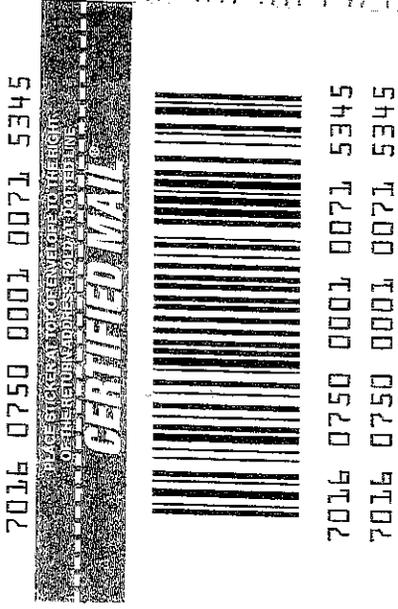
U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee	\$ 3.35
Extra Services & Fees (check box, add fees as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.75
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$ 0.46
Total Postage and Fees	\$ 6.56
Sent To	Comcast Cable COMM, LLC Sr. VP Broadcast Relations Street and Apt. No., or PO Box No. One Comcast Center 1701 John F. Kennedy Blvd City, State, ZIP+4® Philadelphia, PA 19103-2838

Postmark Here

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



U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee	\$ 3.35
Extra Services & Fees (check box, add fees as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.75
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$ 0.46
Total Postage and Fees	\$ 6.56
Sent To	Comcast Cable COMM, LLC Sr. VP Broadcast Relations Street and Apt. No., or PO Box No. One Comcast Center 1701 John F. Kennedy Blvd City, State, ZIP+4® Philadelphia, PA 19103-2838

Postmark Here

SALTILLO MS
AUG 23 2017

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



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Community Cable & Broadband LLC
Berry Ward
P.O. Box 65
Meridian, MS 39302

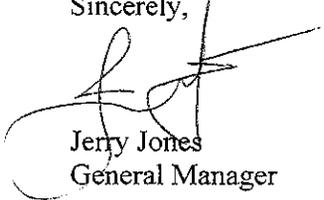
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Community Cable & Broadband LLC** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Eutaw, AL

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Community Cable Broadband, LLC
 Berry Ward
 P.O. Box 65
 Mendon, ms 39302



9590 9403 0516 5173 9252 14

2. Article Number (Transfer from service label)

7015 1520 0002 2169 8458

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Laureen Newell*

- Agent
- Addressee

B. Received by (Printed Name)

Laureen Newell

C. Date of Delivery

8-29

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

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee

\$ *3.35*

Extra Services & Fees (check box, add fees as appropriate)

- Return Receipt (hardcopy) \$ *2.25*
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage

\$ *0.46*

Total Postage and Fees

\$ *6.56*

Sent To

Community Cable Broadband, LLC Berry Ward
 Street and Apt. No., or PO Box No.
P.O. Box 65
 City, State, ZIP+4®
Mendon, ms 39302

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7015 1520 0002 2169 8458



7015 1520 0002 2169 8458

7015 1520 0002 2169 8458

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee

\$ *3.35*

Extra Services & Fees (check box, add fees as appropriate)

- Return Receipt (hardcopy) \$ *2.25*
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage

\$ *0.46*

Total Postage and Fees

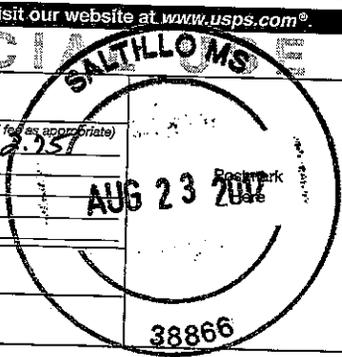
\$ *6.56*

Sent To

Community Cable Broadband, LLC Berry Ward
 Street and Apt. No., or PO Box No.
P.O. Box 65
 City, State, ZIP+4®
Mendon, ms 39302

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions





P.O. Box 320
Tupelo MS
38802
662-842-7620

August 23, 2017

Via Certified U.S. Mail, Return Receipt Requested

Dixie Cable
Andy Williams
P.O. Box 2598
Starkville, MS 39760

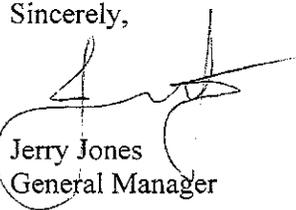
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Dixie Cable** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,


Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Adaton, Artesia, Crawford, Oktibbeha
County, MS

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Dixie Cable
 Mr. Andy Williams
 P.O. Box 2598
 Starkville, MS 39760



9590 9403 0516 5173 9253 37

2. Article Number (Transfer from service label)

7015 1520 0002 2169 8335

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *James Bellis*

- Agent
- Addressee

B. Received by (Printed Name)

James Bellis

C. Date of Delivery

08/24/17

- Agent
 - Addressee
- C. Date of Delivery

1 item? Yes
 below: No

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

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7015 1520 0002 2169 8335



7015 1520 0002 2169 8335

7015 1520 0002 2169 8335

CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ 2.75
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postmark
 Here

Postage
 \$ 0.41

Total Postage and Fees
 \$ 16.56

Sent To
 Dixie Cable Mr. Andy Williams
 Street and Apt. No., or PO Box No.
 P.O. Box 2598
 City, State, ZIP+4®
 Starkville, MS 39760

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7015 1520 0002 2169 8335

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fees as appropriate)

- Return Receipt (hardcopy) \$ 2.75
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postmark
 Here

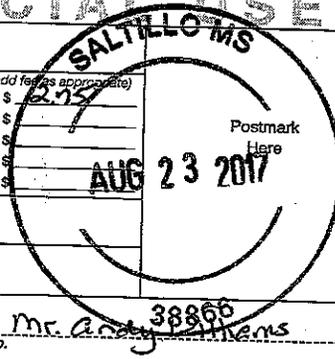
Postage
 \$ 0.41

Total Postage and Fees
 \$ 16.56

Sent To
 Dixie Cable Mr. Andy Williams 38866
 Street and Apt. No., or PO Box No.
 P.O. Box 2598
 City, State, ZIP+4®
 Starkville, MS 39760

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions





August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Maxxsouth Broadband
Ivelisse Cruz - Chief Strategy Officer
P.O. Box 190
Booneville, MS 38829

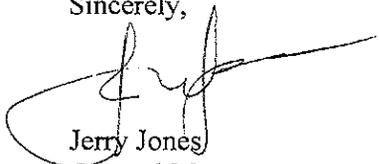
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Maxxsouth Broadband** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Aberdeen, Amory, Galdwyn, Gelmont,
Booneville, Bruce, Burnsville, Calhoun City,
Coffeeville, Dennis, Derma, Ecu, Golden,
Guntown, Hatley, Houston, Ingomar, Iuka,
Jumpertown, Louisville, Maben, Mathiston,
Mississippi State University, Myrtle,
Nettleton, New Albany, Noxapater,
Pittsboro, Pontotoc, Saltillo, Shannon,
Smithville, Starkville, Tishomingo,
Vardaman, Water Valley, MS

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Max South Broadband
 Ivethisse Cruz - Chief Strategy Officer
 P.O. Box 190
 Booneville, MS 38829



9590 9403 0516 5173 9253 20

2. Article Number (Transfer from service label)

7015 1520 0002 2169 8342

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Handwritten Signature]

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

8/25/17

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

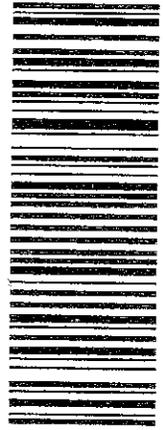
3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053/ 111

Domestic Return Receipt

7015 1520 0002 2169 8342
 CERTIFIED MAIL®
 REGISTERED MAIL™
 RETURN RECEIPT FOR MERCHANDISE



7015 1520 0002 2169 8342
 7015 1520 0002 2169 8342

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.15

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage
 \$ 0.46

Total Postage and Fees
 \$ 6.56

Sent To
 Max South Broadband Ivethisse Cruz
 Street and Apt. No., or PO Box No.
 P.O. Box 190
 City, State, ZIP+4®
 Booneville, MS 38829

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

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.15

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage
 \$ 0.46

Total Postage and Fees
 \$ 6.56

Sent To
 Max South Broadband Ivethisse Cruz
 Street and Apt. No., or PO Box No.
 P.O. Box 190
 City, State, ZIP+4®
 Booneville, MS 38829

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

SALTILLO MS
 AUG 23 2017
 38866



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Maxxsouth Broadband
Rick Ferrall
105 Allison Cove
Oxford, MS 38655

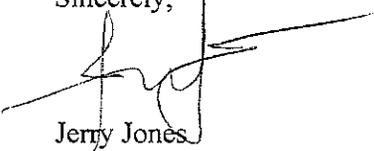
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Maxxsouth Broadband** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Aberdeen, Amory, Galdwyn, Gelmont,
Booneville, Bruce ,Burnsville, Calhoun City,
Coffeeville, Dennis, Derma, E cru, Golden,
Guntown, Hatley, Houston, Ingomar, Iuka,
Jumpertown, Louisville, Maben, Mathiston,
Mississippi State University, Myrtle,
Nettleton, New Albany, Noxapater,
Pittsboro, Pontotoc, Saltillo, Shannon,
Smithville, Starkville, Tishomingo,
Vardaman, Water Valley, MS

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Max South Broadband
Rick Ferrall
105 Allison Cove
Oxford, MS 38655



9590 9403 0516 5173 9253 13

2. Article Number (Transfer from service label)

7015 1520 0002 2169 8359

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *[Signature]* Agent Addressee of Delivery

B. Received by (Printed Name) *Tyler Buyer* C. Date of Delivery *8-26-17*

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

3. Service Type

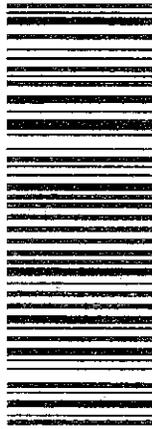
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

Express®
Mail™
Mail Restricted
Receipt for
Jibe
e Confirmation™
Signature Confirmation
ed Delivery

Return Receipt

Domestic Return Re

7015 1520 0002 2169 8359



7015 1520 0002 2169 8359

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only**

For delivery information, visit our website at www.usps.com®.

Certified Mail Fee
\$ *3.35*

Extra Services & Fees (check box, add fees as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <i>2.15</i>
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark
Here

Postage
\$ *0.46*

Total Postage and Fees
\$ *6.56*

Sent To
Max South Broadband Rick Ferrall
 Street and Apt. No., or PO Box No.
105 Allison Cove
 City, State, ZIP+4®
Oxford, MS 38655

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

7015 1520 0002 2169 8359

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only**

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee
\$ *3.35*

Extra Services & Fees (check box, add fees as appropriate)

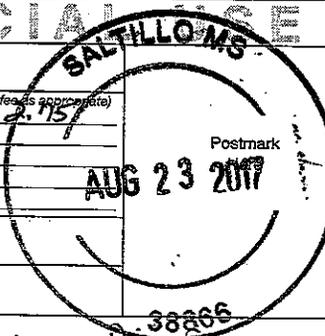
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <i>2.15</i>
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage
\$ *0.46*

Total Postage and Fees
\$ *6.56*

Sent To
Max South Broadband Rick Ferrall
 Street and Apt. No., or PO Box No.
105 Allison Cove
 City, State, ZIP+4®
Oxford, MS 38655

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





August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Metrocast

Ivelisse Cruz - Chief Strategy Officer
P.O. Box 190
Booneville, MS 38829

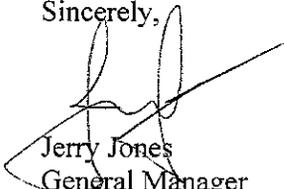
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Metrocast** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Bruce, MS

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Metocast
Ivelisse Cruz
Chief Strategy Officer
P.O. Box 190
Boonville, MS 38829



9590 9403 0516 5173 9252 83

2. Article Number (Transfer from service label)

015 1520 0002 2169 8380

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *[Signature]* Agent Addressee

B. Received by (Printed Name) C. Date of Delivery
 8/25/17

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

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7015 1520 0002 2169 8380



0888 6972 2000 0251 5107

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee	\$ 3.35
Extra Services & Fees (check box, add fees as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.75
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$ 0.46
Total Postage and Fees	\$ 6.56

Sent To
Metocast Ivelisse Cruz
 Street and Apt. No., or PO Box No.
P.O. Box 190
 City, State, ZIP+4®
Boonville, MS 38829

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

7015 1520 0002 2169 8380

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL RECEIPT

SALTILLO, MS

Certified Mail Fee	\$ 3.35
Extra Services & Fees (check box, add fees as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.75
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$ 0.46
Total Postage and Fees	\$ 6.56

Sent To
Metocast Ivelisse Cruz
 Street and Apt. No., or PO Box No.
P.O. Box 190
 City, State, ZIP+4®
Boonville, MS 38829

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



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Metrocast

Rick Ferrall
105 Allison Cove
Oxford, MS 38655

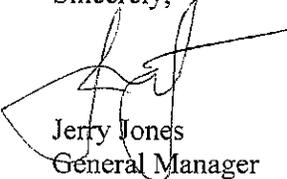
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Metrocast** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Bruce, MS

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Metro CAST
Rick Ferrari
105 Allison Cove
Oxford, MS 38655



9590 9403 0516 5173 9252 90

2. Article Number (Transfer from service label)

7015 1520 0002 2169 8373

PS Form 3811, April 2015 PSN 7530-02-000-9063

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Tyler Buyer*

- Agent
- Addressee

B. Received by (Printed Name)

Tyler Buyer

C. Date of Delivery

8-23-17

D. Is delivery address different from item 1? If YES, enter delivery address below:

- Yes
- No

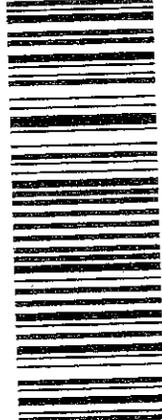
- Agent
- Addressee
- C. Date of Delivery
- Is item 1? Yes No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt



7015 1520 0002 2169 8373
7015 1520 0002 2169 8373

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

Certified Mail Fee
\$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ 2.75
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage
\$ 0.46

Total Postage and Fees
\$ 6.56

Sent To
Metro CAST
Street and Apt. No., or PO Box No.
105 Allison Cove
City, State, ZIP+4®
Oxford, MS 38655

Postmark Here

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

7015 1520 0002 2169 8373

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee
\$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ 2.75
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage
\$ 0.46

Total Postage and Fees
\$ 6.56

Sent To
Metro CAST
Street and Apt. No., or PO Box No.
105 Allison Cove
City, State, ZIP+4®
Oxford, MS 38655

Postmark Here
SALTILLO MS
AUG 23 2017
38666

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



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Northland Cable Television
Paul Milan - Vice President and
General Counsel
101 Stewart Street, Suite 700,
Seattle, WA 98101

Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Northland Cable Television** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Kennedy, Millport, Lamar County, Gordo, Aliceville, Reform, Carrollton, Pickens Co., AL

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:
 Northland Cable Television, Inc.
 ATTN: Paul Milan - VP and General Counsel
 101 Stewart Street
 Suite 700
 Seattle, WA 98101



9590 9403 0516 5173 9252 45

2. A
71

PSI

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
X [Signature] Agent Addressee

B. Received by (Printed Name) *S. Pierce* C. Date of Delivery Yes No

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

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery
 - Return Receipt
 - Mail Restricted
 - Receipt for Mail
 - Confirmation™
 - Confirmation Delivery

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®

Certified Mail Fee \$ <u>3.35</u>	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy) \$ <u>2.75</u>	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ <u>0.46</u>	
Total Postage and Fees \$ <u>6.56</u>	
Sent To <u>Northland Cable TV, Inc</u> <u>Paul Milan</u> Street and Apt. No., or PO Box No. <u>101 Stewart Street</u> <u>Suite 700</u> City, State, ZIP+4® <u>Seattle, WA 98101</u>	

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

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®

OFFICIAL

Certified Mail Fee \$ <u>3.35</u>	Postmark Here AUG 23 2017 38866
Extra Services & Fees (check box, add fee as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy) \$ <u>2.75</u>	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ <u>0.46</u>	
Total Postage and Fees \$ <u>6.56</u>	
Sent To <u>Northland Cable TV, Inc</u> <u>Paul Milan</u> Street and Apt. No., or PO Box No. <u>101 Stewart Street</u> <u>Suite 700</u> City, State, ZIP+4® <u>Seattle, WA 98101</u>	

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



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Northland Cable Television
System Manager
P.O. Box 1269
Reform, AL 35481

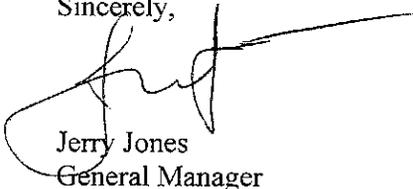
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Northland Cable Television** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Kennedy, Millport, Lamar County, Gordo, Aliceville, Reform, Carrollton, Pickens Co., AL

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Northland Cable Television
System Manager
P.O. Box 1269
Reform, AL 35481

2. Article Number (Transfer from service label)

015 1520 0002 2169 8403

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
x Kelli Shetton Agent Addressee

B. Received by (Printed Name) *Kelli Shetton*

C. Date of Delivery Yes No

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

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

USPS



7015 1520 0002 2169 8403



7015 1520 0002 2169 8403

U.S. Postal Service CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee \$ 3.35

Extra Services & Fees (check box, add fees as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>2.75</u>
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$ 0.46

Total Postage and Fees \$ 6.56

Sent To *Northland Cable TV System Manager*
 Street and Apt. No., or PO Box No. *P.O. Box 1269*
 City, State, ZIP+4® *Reform, AL 35481*

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

7015 1520 0002 2169 8403

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL RECEIPT

Certified Mail Fee \$ 3.35

Extra Services & Fees (check box, add fees as appropriate)

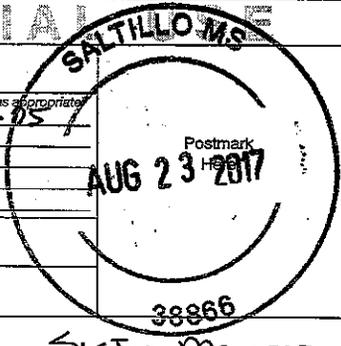
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>2.75</u>
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$ 0.46

Total Postage and Fees \$ 6.56

Sent To *Northland Cable TV System Manager*
 Street and Apt. No., or PO Box No. *P.O. Box 1269*
 City, State, ZIP+4® *Reform, AL 35481*

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





August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Northland Cable Television
System Manager
307 First Street
Reform AL 35481

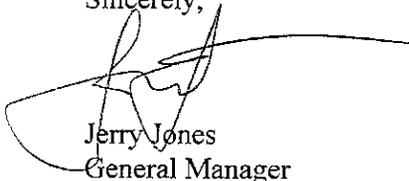
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Northland Cable Television** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Kennedy, Millport, Lamar County, Gordo, Aliceville, Reform, Carrollton, Pickens Co., AL

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Northland Cable Television
System Manager
307 First Street
Reform, AL 35481



9590 9403 0516 5173 9252 76

2. Article Number (Transfer from service label)

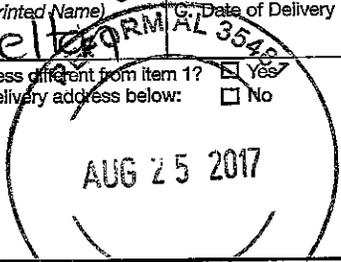
7015 1520 0002 2169 8397

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
x delli Shelton

B. Received by (Printed Name) Date of Delivery
delli Shelton *AL 35481*

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



3. Service Type Priority Mail Express® Registered Mail™ Registered Mail Restricted Delivery Return Receipt for Merchandise Signature Confirmation™ Signature Confirmation Restricted Delivery

Adult Signature Certified Mail® Certified Mail Restricted Delivery Collect on Delivery Insured Mail Insured Mail Restricted Delivery (over \$500)

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7015 1520 0002 2169 8397



7015 1520 0002 2169 8397
7015 1520 0002 2169 8397

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee
\$ 3.35

Extra Services & Fees (check box, add fee as appropriate):
 Return Receipt (hardcopy) \$ 2.25
 Return Receipt (electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____

Postage
\$ 0.46

Total Postage and Fees
\$ 6.56

Sent to
Northland Cable Television
 Street and Apt. No., or PO Box No.
307 First Street
 City, State, ZIP+4®
Reform, AL 35481

PS Form 3800, April 2015 PSN 7530-02-000-3047 See Reverse for Instructions

7015 1520 0002 2169 8397

U.S. Postal Service™
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Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee
\$ 3.35

Extra Services & Fees (check box, add fee as appropriate):
 Return Receipt (hardcopy) \$ 2.25
 Return Receipt (electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____

Postage
\$ 0.46

Total Postage and Fees
\$ 6.56

Sent to
Northland Cable Television
 Street and Apt. No., or PO Box No.
307 First Street
 City, State, ZIP+4®
Reform, AL 35481

SALTILLO MS
 AUG 23 2017
 38866

PS Form 3800, April 2015 PSN 7530-02-000-3047 See Reverse for Instructions



P.O. Box 320
Tupelo MS
38802
662-842-7620

August 23, 2017

Via Certified U.S. Mail, Return Receipt Requested

Northland Cable Television
Lee Johnson
32 East Vine Street
Statesboro, GA 30458

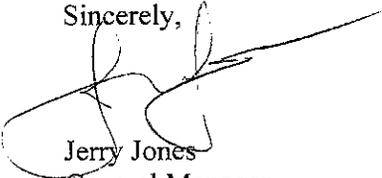
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Northland Cable Television** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

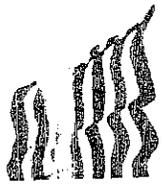
cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Kennedy, Millport, Lamar County, Gordo, Aliceville, Reform, Carrollton, Pickens Co., AL

NEOPOST
 08/23/2017
 US POSTAGE \$006.56⁰
 ZIP 38866
 041M11272984



8-31-17

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2



7015 17-
 0008127117
 304584843 CDD7
 30458
 0008127117
 30458

WTVA
 TUPELO • COLUMBIUS abc
 P.O. Box 320
 Tupelo, Mississippi 38802

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) _____ C. Date of Delivery _____

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

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

Domestic Return Receipt

Special Service™ REGISTERED MAIL® RECEIPT
 Mail Only

For more information, visit our website at www.usps.com

Fees (check box, add fees appropriate)		Postmark Here
(hardcopy) \$	0.75	
(electronic) \$		
Restricted Delivery \$		
Required \$		
Restricted Delivery \$		

Additional Fees _____

Northland Cable TV Lee Johnson
 or PO Box No. _____
 32 East Vine Street
 Tupelo, MS 38802
 April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Special Service™ REGISTERED MAIL® RECEIPT

For more information, visit our website at www.usps.com

SPECIAL USE

SALTILLO MS
 AUG 23 2017
 Postmark Here

\$6.56
 Sent To Northland Cable TV Lee Johnson
 Street and Apt. No., or PO Box No. _____
 32 East Vine Street
 City, State, ZIP+4®
 Tupelo, MS 38802
 PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



P.O. Box 320
Tupelo MS
38802
662-842-7620

August 23, 2017

Via Certified U.S. Mail, Return Receipt Requested

Ripley Video Cable

Leon M. Bailey, Jr - General Manager
P.O. Box 368
Ripley, MS 38663

Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Ripley Video Cable** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Ripley, Tippah County, Blue Mountain, MS

SENDER: COMPLETE THIS SECTION

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Ripley Video Cable
 Attn: Leon M. Bailey, Jr.
 General Manager
 P.O. Box 368
 Ripley, MS 38663



9590 9403 0516 5173 9252 38

2. Article Number (Transfer from service label)

7015 1520 0002 2169 8434

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name)

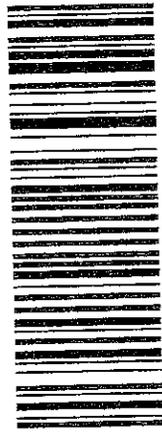
C. Date of Delivery

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

Box 368
 Leon M. Bailey, Jr.

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

Domestic Return Receipt



7015 1520 0002 2169 8434
 7015 1520 0002 2169 8434

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.75

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage
 \$ 0.46

Total Postage and Fees
 \$ 6.56

Sent To
 Ripley Video Cable Leon M. Bailey, Jr.
 Street and Apt. No., or PO Box No.
 P.O. Box 368
 City, State, ZIP+4®
 Ripley, MS 38663

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

4E4R 69T2 2169 0002 5T02 7015

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.75

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage
 \$ 0.46

Total Postage and Fees
 \$ 6.56

Sent To
 Ripley Video Cable Leon M. Bailey, Jr.
 Street and Apt. No., or PO Box No.
 P.O. Box 368
 City, State, ZIP+4®
 Ripley, MS 38663

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

SALTHLO MS
AUG 23 2017
 38866



P.O.Box 320
Tupelo MS
38802
662-842-7620

August 23, 2017

Via Certified U.S. Mail, Return Receipt Requested

Ripley Video Cable

Leon M. Bailey, Jr - General Manager
115 North Main Street
Ripley, MS 38663

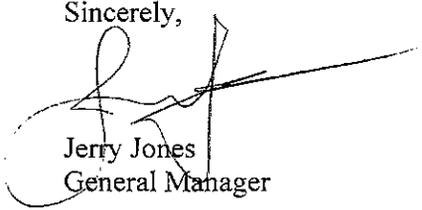
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Ripley Video Cable** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

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Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Ripley, Tippah County, Blue Mountain, MS

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:
 Ripley Video Cable
 Leon M Bailey, Jr.
 General Manager
 115 North Main Street
 Ripley, MS 38663



9590 9403 0516 5173 9252 21

2. Article Number (Transfer from service label)
 7015 1520 0002 2169 8441

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Leon M Bailey Jr
 Agent
 Addressee

B. Received by (Printed Name)
 C. Date of Delivery

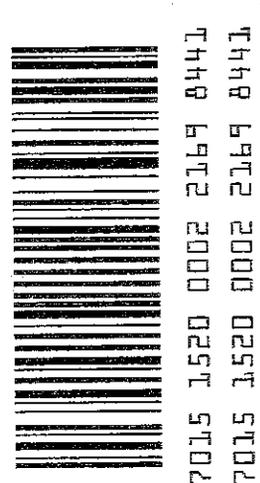
D. Is delivery address different from item 1?
 If YES, enter delivery address below:

Box 368
 Yes No
 USPS
 23 2017
 MS 38663

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 1520 0002 2169 8441
 CERTIFIED MAIL



CERTIFIED MAIL RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee
 \$ 3.35
 Extra Services & Fees (check box, add fees as appropriate)
 Return Receipt (hardcopy) \$ 2.15
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Postage
 \$ 0.46
 Total Postage and Fees
 \$ 6.56

Sent To
 Ripley Video Cable Leon M Bailey, Jr.
 Street and Apt. No., or PO Box No.
 115 North Main Street
 City, State, ZIP+4®
 Ripley, MS 38663

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee
 \$ 3.35
 Extra Services & Fees (check box, add fees as appropriate)
 Return Receipt (hardcopy) \$ 2.15
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Postage
 \$ 0.46
 Total Postage and Fees
 \$ 6.56

Sent To
 Ripley Video Cable Leon M Bailey, Jr.
 Street and Apt. No., or PO Box No.
 115 North Main Street
 City, State, ZIP+4®
 Ripley, MS 38663

Postmark
 SALTILLO MS
 AUG 23 2017
 38865

PS Form 3890, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

Telapex and Affiliated Companies
Brooks Derryberry
1018 Highland Colony, Suite 700
Ridgeland, MS 39157

Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **Telapex and Affiliated Companies** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,

Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Ackerman, Chester, Artesia, Crawford, Starkville, MS

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Telepek & Affiliated Companies
 Brooks Derryberry
 1018 Highland Colony
 Suite 200
 Ridgeland, MS 39157



9590 9403 0516 5173 9252 07

2. Article Number (Transfer from service label)

7015 1520 0002 2169 8465

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *MR [Signature]*

B. Received by (Printed Name) *MR [Signature]* C. Date of Delivery *8-25*

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

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7015 1520 0002 2169 8465



7015 1520 0002 2169 8465

7015 1520 0002 2169 8465

**U.S. Postal Service™
 CERTIFIED MAIL® RECEIPT**
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.75
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark
 Here

Postage
 \$ 0.46

Total Postage and Fees
 \$ 6.56

Sent To
 Telepek & Affiliated Companies Brooks Derryberry
 Street and Apt. No., or PO Box No.
 1018 Highland Colony Suite 200
 City, State, ZIP+4®
 Ridgeland, MS 39157

7015 1520 0002 2169 8465

**U.S. Postal Service™
 CERTIFIED MAIL® RECEIPT**
 Domestic Mail Only

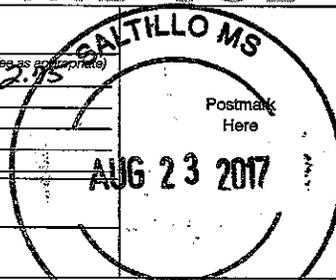
For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee
 \$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.75
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$



Postmark
 Here

Postage
 \$ 0.46

Total Postage and Fees
 \$ 6.56

Sent To
 Telepek & Affiliated Companies Brooks Derryberry
 Street and Apt. No., or PO Box No.
 1018 Highland Colony Suite 200
 City, State, ZIP+4®
 Ridgeland, MS 39157

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



August 23, 2017



P.O. Box 320
Tupelo MS
38802
662-842-7620

Via Certified U.S. Mail, Return Receipt Requested

West Alabama TV Cable Co
ATTN: Kyle South
P.O. Box 930
Fayette, AL 35555

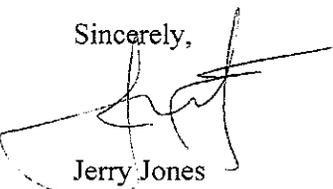
Re: 2018-2020 Three-Year Election for Retransmission Consent

Dear Sir or Madame:

In accordance with Section 76.64 of the Rules of the Federal Communications Commission ("FCC"), this is to notify you that Station WTVA, Tupelo, MS (the "Station") elects to require **West Alabama TV Cable Co** to obtain the consent of the Station for retransmission of its broadcast signal effective January 1, 2018, through December 31, 2020, for all geographical areas. Consent of the Station for retransmission of its signal will be required for, but not limited to, the system(s) serving the community(ies) and county(ies) listed on the enclosed 2018-2020 Retransmission Consent Election Statement.

I would appreciate your contacting me to discuss the terms under which the system(s) may retransmit the Station's signal. If you already have a retransmission consent agreement with the Station or with USA Television Holdings, LLC or an affiliate thereof (collectively, "USA") that covers the Station for all or a portion of the January 1, 2018, through December 31, 2020, cycle, then the terms of that agreement will govern for the period specified in the agreement. If such an agreement expires prior to December 31, 2020, then it will be necessary for you to negotiate for retransmission consent following that expiration. In addition, if any retransmission consent agreement between you and the Station or USA contains an automatic renewal provision, then this letter shall also serve as notice of termination of that agreement, and it will be necessary for the system(s) to negotiate for retransmission consent following expiration of the current term of that agreement.

Sincerely,



Jerry Jones
General Manager

Enclosure

cc: **Public File**

2018-2020 Retransmission Consent Election Statement- WTVA

This election shall apply to all system(s) that serve communities located wholly or in part within the station's defined market (Columbus-Tupelo-West Point-Houston, MS DMA) including but not limited to the communities, counties and surrounding areas of:

Hamilton, Marion County, Brilliant, Winfield, Fayette, AL

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

West Alabama TV Cable Co.
 ATTN: Kyle South
 P.O. Box 930
 Fayette, AL 35555



9590 9403 0516 5173 9251 91

2. Article Number (Transfer from service label)

7015 1520 0002 2169 8472

PS Form 3811, April 2015 PSN 7530-02-000-9053

A. Signature

X *Jerrad Locke*

- Agent
- Addressee

B. Received by (Printed Name)

Jerrad Locke

C. Date of Delivery

Yes
No

D. Is delivery address different from item 1? If YES, enter delivery address below:

- Yes
- No



3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collection Delivery
- Collection Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Agent of Delivery
 Restricted
 for
 Information
 Receipt

Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

Certified Mail Fee

\$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ 2.75
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage

\$ 0.46

Total Postage and Fees

\$ 6.56

Sent To

West Alabama TV Cable Co. Kyle South
 Street and Apt. No., or PO Box No.
 P.O. Box 930
 City, State, ZIP+4®
 Fayette AL 35555

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7015 1520 0002 2169 8472



7015 1520 0002 2169 8472

7015 1520 0002 2169 8472

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL BALTIMORE

Certified Mail Fee

\$ 3.35

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ 2.75
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage

\$ 0.46

Total Postage and Fees

\$ 6.56

Sent To

West Alabama TV Cable Co. Kyle South
 Street and Apt. No., or PO Box No.
 P.O. Box 930
 City, State, ZIP+4®
 Fayette AL 35555

PS Form 3800, April 2015 PSN 7530-02-000-9047

Postmark Here
AUG 23 2017

38866

7015 1520 0002 2169 8472