

June 30, 2014

Certified Mail, Return Receipt Requested

Ms. Jennifer Rise
Director of Finance
702 Communications
702 Main Avenue
Moorhead, MN 56560

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent' status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

A handwritten signature in black ink, appearing to read "Mari Ossenfort". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Mari Ossenfort
Director of Broadcasting
Forum Communications Company

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7007 3020 0001 4707 9874

Postage	\$	Postmark Here
Certified Fee	.	
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Pos		
Sent To	Ms. Jennifer Rise	
	Director of Finance	
	702 Communications	
	702 Main Avenue	
	Moorhead, MN 56560	
Street, Apt. or PO Box		
City, State,		

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Ms. Jennifer Rise
 Director of Finance
 702 Communications
 702 Main Avenue
 Moorhead, MN 56560

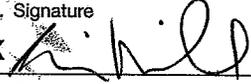
2. Article Number
(Transfer from service label)

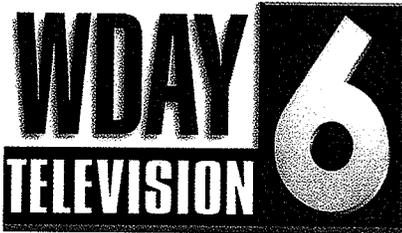
7007 3020 0001 4707 9874

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature		<input type="checkbox"/> Agent
X 		<input type="checkbox"/> Addressee
B. Received by <i>(Printed Name)</i>	C. Date of Delivery	
Kaci Wendt	7-2-14	
D. Is delivery address different from item 1? <input type="checkbox"/> Yes		
If YES, enter delivery address below: <input type="checkbox"/> No		
3. Service Type		
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Priority Mail Express™	
<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Return Receipt for Merchandise	
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> Collect on Delivery	
4. Restricted Delivery? <i>(Extra Fee)</i> <input type="checkbox"/> Yes		



June 30, 2014

Certified Mail, Return Receipt Requested

Mr. Frank Beaver
Bagley Public Utilities
P.O. Box M
Bagley, MN 56621

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent" status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

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Mari Ossenfort
Director of Broadcasting
Forum Communications Company

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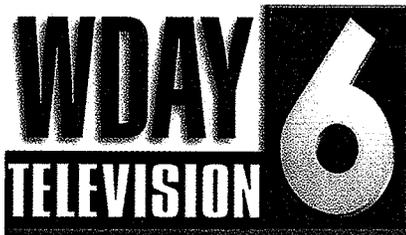
7007 3020 0001 4707 9881

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Post		
Sent To	Mr. Frank Beaver	
Street, Apt. or PO Box	Bagley Public Utilities	
City, State	P.O. Box M	
	Bagley, MN 56621	

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature: <u>X FAYE JACOBS</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name): <u>FAYE JACOBS</u></p> <p>C. Date of Delivery: <u>JUL 07 2014</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Mr. Frank Beaver Bagley Public Utilities P.O. Box M Bagley, MN 56621</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p style="text-align: center;">7007 3020 0001 4707 9881</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>





June 30, 2014

Certified Mail, Return Receipt Requested

Mr. Guy Swenson
T.E.C. Coordinator
Barnesville, Municipal TV
P.O. Box 550
Barnesville, MN 56514

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent" status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

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Mari Ossenfort
Director of Broadcasting
Forum Communications Company

7007 3020 0001 4707 9904

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

Total Postage

Sent To

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

City, State, ZIP+

Mr. Guy Swenson
T.E.C. Coordinator
Barnesville, Municipal TV
P.O. Box 550
Barnesville, MN 56514

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mr. Guy Swenson
T.E.C. Coordinator
Barnesville, Municipal TV
P.O. Box 550
Barnesville, MN 56514

2. Article Number
(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x *Shana Chak* 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

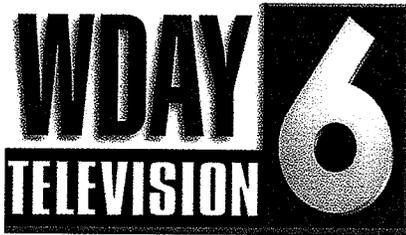
Certified Mail® Priority Mail Express™

Registered Return Receipt for Merchandise

Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

7007 3020 0001 4707 9904



June 30, 2014

Certified Mail, Return Receipt Requested

Ms. Carmen Biesterfeld
Regulatory Reporting Coordinator
BEK Communications
P. O Box 230
Steele, ND 58482

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent" status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

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Very truly yours,

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Mari Ossenfort
Director of Broadcasting
Forum Communications Company

BOX 2466 FARGO, NORTH DAKOTA 58108 (701) 237-6500 FAX (701) 241-5368

WEBSITE: www.wday.com

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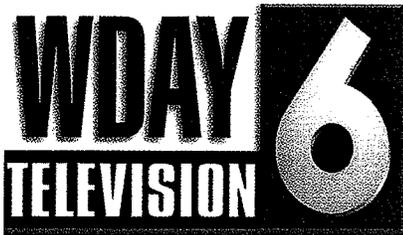
For delivery information visit our website at www.usps.com®

OFFICIAL USE

7007 3020 0001 4707 9911

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage		
Sent To Ms. Carmen Biesterfeld Regulatory Reporting Coordinator BEK Communications P. O Box 230 Steele, ND 58482		
Street, Apt. No. or PO Box No. City, State, ZIP		
PS Form 3800, August 2006 See Reverse for Instructions		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature x <i>Jennifer Kidd</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee
	B. Received by (Printed Name) <i>Jennifer Kidd</i>
	C. Date of Delivery 7/2/14
1. Article Addressed to: Derrick Bulawa, CEO BEK Comm. Coop. PO Box 230 Steele, ND 58482	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
	3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery
2. Article Number (Transfer from service label)	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
	7007 3020 0001 4708 0191



June 30, 2014

Certified Mail, Return Receipt Requested

Sr. Vice President-Operations
Cable One, Inc.
1314 N. 3rd Street, 3rd Floor
Phoenix, AZ 85004

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent" status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

A handwritten signature in cursive script that reads "Mari Ossenfort". The signature is written in black ink and is positioned above the printed name.

Mari Ossenfort
Director of Broadcasting
Forum Communications Company

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7007 3020 0001 4707 9898

Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total F	
Sent To	Sr. Vice President-Operations Cable One, Inc. 1314 N. 3rd Street, 3rd Floor Phoenix, AZ 85004
Street, or PO B	
City, Sta	

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Sr. Vice President-Operations
Cable One, Inc.
1314 N. 3rd Street, 3rd Floor
Phoenix, AZ 85004

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

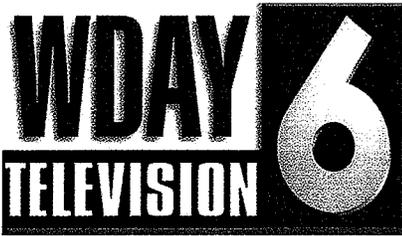
B. Received by (Printed Name) C. Date of Delivery

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

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) 7007 3020 0001 4707 9898



June 30, 2014

Certified Mail, Return Receipt Requested

Mr. Roy Sheppard, President
Cable Service
P.O Box 608
Jamestown, ND 58402

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent" status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

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Very truly yours,

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Mari Ossenfort
Director of Broadcasting
Forum Communications Company

U.S. Postal Service™
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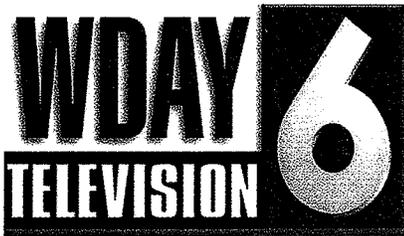
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7007 3020 0001 4707 9928

Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Post	Mr. Roy Sheppard, President Cable Services, Inc. P.O. Box 608 Jamestown, ND 58402
Sent To	
Street, Apt. 1 or PO Box A	
City, State, Z	
PS Form 3800, August 2006 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Matthew Sheppard</i> C. Date of Delivery <i>9-3-14</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Mr. Roy Sheppard, President Cable Services, Inc. P.O. Box 608 Jamestown, ND 58402</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™</p> <p><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>7007 3020 0001 4707 9928</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>



June 30, 2014

Certified Mail, Return Receipt Requested

Mr. Keith Larson
General Manager
Central Dakota TV, Inc.
P.O. Box 299
Carrington, ND 58421

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent" status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

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Mari Ossenfort
Director of Broadcasting
Forum Communications Company

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7007 3020 0001 4707 9935

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

General Manager
 Central Dakota TV, Inc.
 P.O. Box 299
 Carrington, ND 58421

Sent To _____
 Street, Apt. N
 or PO Box No. _____
 City, State, Z. _____

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

General Manager
 Central Dakota TV, Inc.
 P.O. Box 299
 Carrington, ND 58421

2. Article Number
 (Transfer from service label)

7007 3020 0001 4707 9935

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

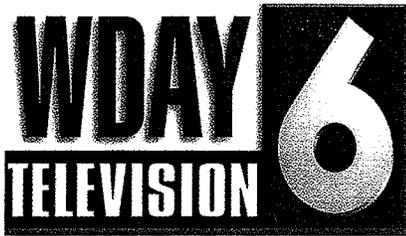
A. Signature  Agent Addressee

B. Received by (Printed Name) Julie Thompson C. Date of Delivery 7-2-14

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

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes



June 30, 2014

Certified Mail, Return Receipt Requested

Mr. Gregory L. Doody
Executive Vice President
Programming and Legal Affairs
Charter Communications
12405 Powerscourt Drive
St. Louis, MO 63131

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent" status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

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Mari Ossenfort
Director of Broadcasting
Forum Communications Company

BOX 2466 FARGO, NORTH DAKOTA 58108 (701) 237-6500 FAX (701) 241-5368

WEBSITE: www.wday.com

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OFFICIAL USE

7007 3020 0001 4707 9942

Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Pos	Mr. Gregory L. Doody Programming and Legal Affairs Charter Communications 12405 Powerscourt Drive St. Louis, MO 63131
Sent To	
Street, Apt. or PO Box	
City, State,	

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mr. Gregory L. Doody
 Programming and Legal Affairs
 Charter Communications
 12405 Powerscourt Drive
 St. Louis, MO 63131

2. Article Number
(Transfer from service label)

7007 3020 0001 4707 9942

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature X *[Signature]* Agent Addressee

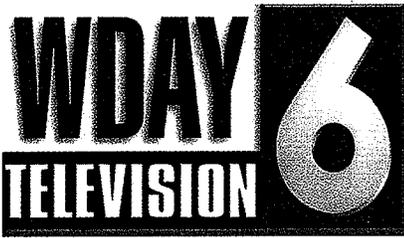
B. Received by *(Printed Name)* C. Date of Delivery *7/7/13*

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

3. Service Type

- Certified Mail® Priority Mail Express™
- Registered Return Receipt for Merchandise
- Insured Mail Collect on Delivery

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



June 30, 2014

Certified Mail, Return Receipt Requested

Mr. Charles Lucken
City of Fosston Cable TV
P. O. Box 239
Fosston, MN 56542

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent' status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

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Mari Ossenfort
Director of Broadcasting
Forum Communications Company

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OFFICIAL USE

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Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	
Sent To Street, Apt. No. or PO Box No. City, State, Zi.	

Mr. Charles Lucken
 City of Fosston Cable TV
 P. O. Box 239
 Fosston, MN 56542

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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- 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:

Mr. Charles Lucken
 City of Fosston Cable TV
 P. O. Box 239
 Fosston, MN 56542

2. Article Number
 (Transfer from service label)

7007 3020 0001 4707 9959

PS Form 3811, July 2013

Domestic Return Receipt

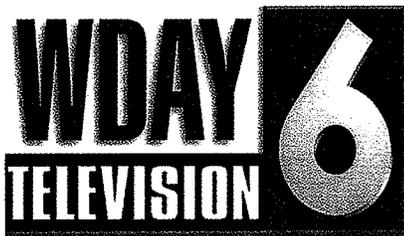
COMPLETE THIS SECTION ON DELIVERY

A. Signature		<input type="checkbox"/> Agent
x <i>Cassie Heide</i>		<input type="checkbox"/> Addressee
B. Received by (Printed Name)	C. Date of Delivery	
<i>Cassie Heide</i>	<i>7-2-14</i>	
D. Is delivery address different from item 1? <input type="checkbox"/> Yes		
If YES, enter delivery address below: <input type="checkbox"/> No		

3. Service Type

<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Priority Mail Express™
<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes



June 30, 2014

Certified Mail, Return Receipt Requested

DIRECTV, Inc.
2230 East Imperial Highway
El Segundo, CA 90245

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects "retransmission consent" status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

A handwritten signature in black ink, appearing to read "Mari Ossenfort". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Mari Ossenfort
Director of Broadcasting
Forum Communications Company

BOX 2466 FARGO, NORTH DAKOTA 58108 (701) 237-6500 FAX (701) 241-5368

WEBSITE: www.wday.com

A Division of Forum Communications Company

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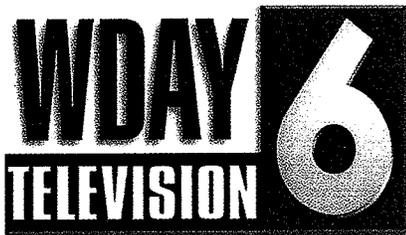
OFFICIAL USE

7007 3020 0001 4707 9966

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage		
DIRECTV, Inc. 2230 East Imperial Highway El Segundo, CA 90245		
Sent To Street, Apt or PO Box City, State		
PS Form 3800, August 2006		See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <u>L. THOMAS</u> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to:	B. Received by (Printed Name) <u>[Signature]</u> C. Date of Delivery <u>7/11/14</u>
DIRECTV, Inc. 2230 East Imperial Highway El Segundo, CA 90245	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
2. Article Number (Transfer from service label)	3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery
PS Form 3811, July 2013	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes 7007 3020 0001 4707 9966

Domestic Return Receipt



June 30, 2014

Certified Mail, Return Receipt Requested

Mr. R. Stanton Dodge
Executive Vice President & General Counsel
DISH Network, L.L.C
9601 S. Meridian Boulevard
Englewood, CO 80112

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects "retransmission consent" status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

A handwritten signature in black ink that reads "Mari Ossenfort". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Mari Ossenfort
Director of Broadcasting
Forum Communications Company

U.S. Postal Service™
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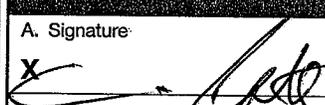
OFFICIAL USE

7007 3020 0001 4707 9973

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Post	Mr. R. Stanton Dodge Executive Vice President & General Counsel DISH Network, L.L.C 9601 S. Meridian Boulevard Englewood, CO 80112	
Sent To		
Street, Apt. 1 or PO Box N		
City, State, Z		

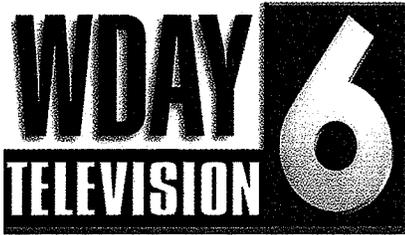
PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature:  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery <u>7/2</u></p>
<p>1. Article Addressed to:</p> <p>Mr. R. Stanton Dodge Executive Vice President & General Counsel DISH Network, L.L.C 9601 S. Meridian Boulevard Englewood, CO 80112</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>2. Article Number (Transfer from service label)</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7007 3020 0001 4707 9973</p>	

PS Form 3811, July 2013

Domestic Return Receipt



June 30, 2014

Certified Mail, Return Receipt Requested

Dickey Rural Services, Inc.
P.O. Box 69
Ellendale, ND 58436

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent' status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

A handwritten signature in black ink, appearing to read "Mari Ossenfort". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Mari Ossenfort
Director of Broadcasting
Forum Communications Company

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OFFICIAL USE

7007 3020 0001 4707 9997

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

Postmark
Here

Dickey Rural Services, Inc.
P.O. Box 69
Ellendale, ND 58436

Sent To
Street, Apt.
or PO Box
City, State

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Dickey Rural Services, Inc.
P.O. Box 69
Ellendale, ND 58436

2. Article Number
(Transfer from service label)

PS Form 3811, July 2013

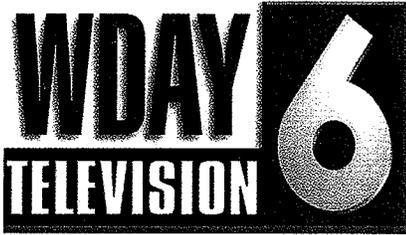
COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent
[Signature] Addressee
- B. Received by (Printed Name)
Tray Redemaher
- C. Date of Delivery
7-11-14
- D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
- Certified Mail® Priority Mail Express™
- Registered Return Receipt for Merchandise
- Insured Mail Collect on Delivery
4. Restricted Delivery? (Extra Fee) Yes

7007 3020 0001 4707 9997

Domestic Return Receipt



June 30, 2014

Certified Mail, Return Receipt Requested

Federated Telephone
P. O. Box 156
Chokio, MN 56221

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent' status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

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Very truly yours,

A handwritten signature in black ink that reads "Mari Ossenfort". The signature is written in a cursive, flowing style.

Mari Ossenfort
Director of Broadcasting
Forum Communications Company

BOX 2466 FARGO, NORTH DAKOTA 58108 (701) 237-6500 FAX (701) 241-5368

WEBSITE: www.wday.com

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OFFICIAL USE

7007 3020 0001 4708 0054

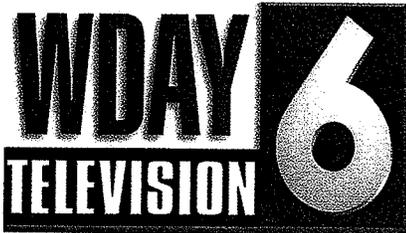
Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	

Federated Telephone
 P.O. Box 156
 Chokio, MN 56221

Sent To
 Street, Apt. No.,
 or PO Box No.
 City, State, ZIP+

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <i>x Tammy Dierks</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	
	B. Received by (Printed Name) <i>Tammy Dierks</i>	C. Date of Delivery <i>7/3/14</i>
1. Article Addressed to: Federated Telephone P.O. Box 156 Chokio, MN 56221	3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery	
2. Article Number (Transfer from service label)	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
	7007 3020 0001 4708 0054	



July 8, 2014

Certified Mail, Return Receipt Requested

Galva Cable Company, LLC
3230 Peachtree Corners Circle, Suite H
Norcross, GA 30092

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent' status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

A handwritten signature in cursive script, appearing to read "Mari Ossenfort". The signature is written in black ink and includes a stylized flourish at the end.

Mari Ossenfort
Director of Broadcasting
Forum Communications Company

BOX 2466 FARGO, NORTH DAKOTA 58108 (701) 237-6500 FAX (701) 241-5368

WEBSITE: www.wday.com

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7007 3020 0001 4708 0351

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

Postmark
Here

Sent To Galva Cable Company, LLC
 Street, Apt. No., or PO Box No. 3230 Peachtree Corners Circle
 City, State, ZIP+4 Norcross, GA 30092 Suite H

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Galva Cable Company, LLC
3230 Peachtree Corners
Circle, Suite H
Norcross, GA 30092

2. Article Number
(Transfer from service label)

7007 3020 0001 4708 0351

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

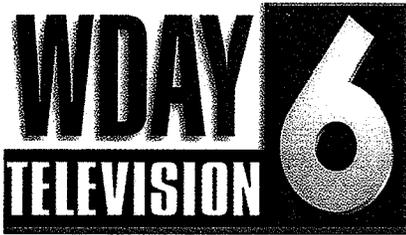
CM Murphy 7/14/14

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

3. Service Type

- Certified Mail® Priority Mail Express™
- Registered Return Receipt for Merchandise
- Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes



June 30, 2014

Certified Mail, Return Receipt Requested

Mr. George W. Fish
Garden Valley Telephone Company
P.O. Box 259
Erskine, MN 56535

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent' status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

A handwritten signature in cursive script, appearing to read "Mari Ossenfort". The signature is written in black ink and is positioned above the typed name.

Mari Ossenfort
Director of Broadcasting
Forum Communications Company

BOX 2466 FARGO, NORTH DAKOTA 58108 (701) 237-6500 FAX (701) 241-5368

WEBSITE: www.wday.com

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OFFICIAL USE

7007 3020 0001 4708 0061

Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	Mr. George W. Fish General Manager Garden Valley Telephone Company P.O. Box 259 Erskine, MN 56535
Sent To	
Street, Apt. N or PO Box No	
City, State, Zi	

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mr. George W. Fish
 General Manager
 Garden Valley Telephone Company
 P.O. Box 259
 Erskine, MN 56535

COMPLETE THIS SECTION ON DELIVERY

A. Signature <i>Ken Moly</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name) <i>Ken Moly</i>	C. Date of Delivery <i>7-2-14</i>
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	

3. Service Type

<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Priority Mail Express™
<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> Collect on Delivery

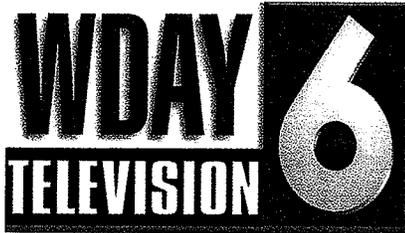
4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
 (Transfer from service label)

7007 3020 0001 4708 0061

PS Form 3811, July 2013

Domestic Return Receipt



June 30, 2014

Certified Mail, Return Receipt Requested

Halstad Telephone Company
P. O Box 55
Halstad, MN 56548

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent' status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

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Very truly yours,

A handwritten signature in black ink, appearing to read "Mari Ossenfort". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Mari Ossenfort
Director of Broadcasting
Forum Communications Company

BOX 2466 FARGO, NORTH DAKOTA 58108 (701) 237-6500 FAX (701) 241-5368

WEBSITE: www.wday.com

A Division of Forum Communications Company

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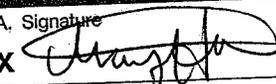
For delivery information visit our website at www.usps.com

OFFICIAL USE

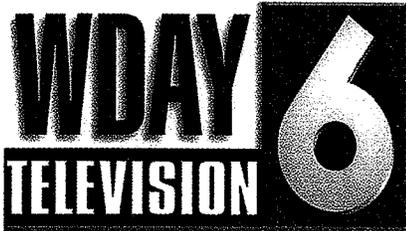
7007 3020 0001 4708 0078

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage		
Sent To Halstad Telephone Company P. O Box 55 Halstad, MN 56548		
Street, Apt. or PO Box City, State		

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to: Halstad Telephone Company P. O Box 55 Halstad, MN 56548	B. Received by (Printed Name) Tracy Holte
	C. Date of Delivery 7-2-14
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No
	3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

2. Article Number (Transfer from service label) 7007 3020 0001 4708 0078
 PS Form 3811, July 2013 Domestic Return Receipt



*Tom -
I know we have
completed the retrans
agreement for this
upcoming cycle, but
wanted to abide by the
"letter of the law" by
sending you a Declaration
Letter. Thanks again for
the agreement! Sue
Eider*

June 30, 2014

Certified Mail, Return Receipt Requested

Halstad Telephone Company
P. O Box 55
Halstad, MN 56548

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects "retransmission consent" status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

Mari Ossenfort
Director of Broadcasting
Forum Communications Company



June 30, 2014

Certified Mail, Return Receipt Requested

Mr. David Schornack
Loretel Systems, Inc.
d/b/a/ Loretel Cablevision
150 Second Street SW
Perham, MN 56573

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent' status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

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Very truly yours,

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Mari Ossenfort
Director of Broadcasting
Forum Communications Company

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OFFICIAL USE

7007 3020 0001 4708 0085

Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Post:	
Sent To	Mr. David Schornack
Street, Apt. 1 or PO Box N	Loretel Systems, Inc.
City, State, Z	150 Second Street SW
	Perham, MN 56573

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mr. David Schornack
 Loretel Systems, Inc.
 150 Second Street SW
 Perham, MN 56573

2. Article Number
(Transfer from service label)

7007 3020 0001 4708 0085

COMPLETE THIS SECTION ON DELIVERY

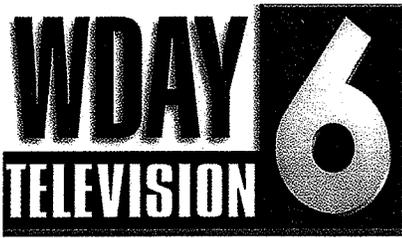
A. Signature Agent
 Addressee

B. Received by (Printed Name) Jackie Siler
 C. Date of Delivery 7-2-14

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

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes



June 30, 2014

Certified Mail, Return Receipt Requested

Midcontinent Communications
3600 Minnesota Drive, Suite 700
Minneapolis, Minnesota 55435

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects "retransmission consent" status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

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Mari Ossenfort
Director of Broadcasting
Forum Communications Company

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

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

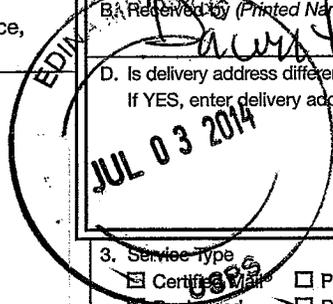
OFFICIAL USE

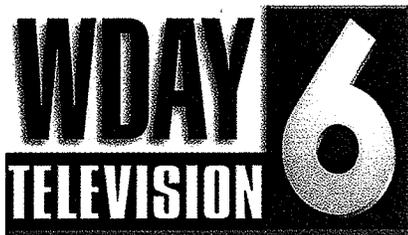
7007 3020 0001 4708 0047

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage	Midcontinent Communications 3600 Minnesota Drive, Suite 700 Minneapolis, Minnesota 55435	
Sent To		
Street, Apt. No., or PO Box No.		
City, State, ZIP+		
Attn: Wynn Haakenstad		

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Midcontinent Communications 3600 Minnesota Drive, Suite 700 Minneapolis, Minnesota 55435 Attn: Wynn Haakenstad</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p>7007 3020 0001 4708 0047</p>





June 30, 2014

Certified Mail, Return Receipt Requested

Mr. Tyler Kilde
MLGC, LLC
301 Dewey Street
Enderlin, ND 58027

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent" status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

A handwritten signature in cursive script that reads "Mari Ossenfort".

Mari Ossenfort
Director of Broadcasting
Forum Communications Company

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

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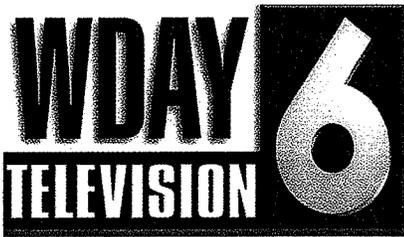
7007 3020 0001 4708 0030

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total F		
Sent To Street, A or PO B. City, Sta		

Mr. Tyler Kilde
 MLGC, LLC
 301 Dewey Street
 Enderlin, ND 58027

PS Form 3800, August 2006 See Reverse for Instructions

<p>SENDER: COMPLETE THIS SECTION</p> <ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. <p>1. Article Addressed to:</p> <p style="text-align: center;">Mr. Tyler Kilde MLGC, LLC 301 Dewey Street Enderlin, ND 58027</p> <p>2. Article Number (Transfer from service label)</p>	<p>COMPLETE THIS SECTION ON DELIVERY</p> <p>A. Signature: X <i>Loren J. Briss</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Loren J. Briss</i></p> <p>C. Date of Delivery <i>7-2-14</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7007 3020 0001 4708 0030</p>	



June 30, 2014

Certified Mail, Return Receipt Requested

Mr. Richard Ellison
North Dakota Telephone
211 22nd Street NW
Devils Lake, ND 58301

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent' status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

A handwritten signature in black ink that reads "Mari Ossenfort". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Mari Ossenfort
Director of Broadcasting
Forum Communications Company

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7007 3020 0001 4708 0092

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

Mr. Richard Ellison
 North Dakota Telephone
 211 22nd Street NW
 Devils Lake, ND 58301

Sent To _____
 Street, Apt. N or PO Box No _____
 City, State, Zi _____

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mr. Richard Ellison
 North Dakota Telephone
 211 22nd Street NW
 Devils Lake, ND 58301

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x *Bobbie Jo Mertens* Agent Addressee

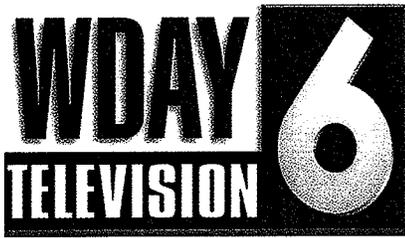
B. Received by (Printed Name) C. Date of Delivery
Bobbie Jo Mertens 7-7-11

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

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) 7007 3020 0001 4708 0092



June 30, 2014

Certified Mail, Return Receipt Requested

Mr. Dave Bickett
Otter Com, Inc.
P.O. Box 277
Underwood, MN 56586

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice; pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent' status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

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Mari Ossenfort
Director of Broadcasting
Forum Communications Company

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7007 3020 0001 4708 0108

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

Total Post:

Sent To
 Street, Apt. or PO Box #
 City, State, & Zip

Mr. Dave Bickett
 Otter Com, Inc.
 P.O. Box 277
 Underwood, MN 56586

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mr. Dave Bickett
 Otter Com, Inc.
 P.O. Box 277
 Underwood, MN 56586

2. Article Number
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x *Christel Samuelson* Agent
 Addressee

B. Received by (Printed Name)
Christel Samuelson

C. Date of Delivery
 7-2-14

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

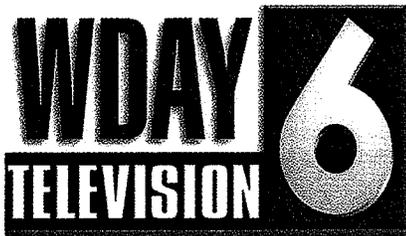
3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

7007 3020 0001 4708 0108

PS Form 3811, July 2013

Domestic Return Receipt



June 30, 2014

Certified Mail, Return Receipt Requested

Mr. Keith Hunt
Paul Bunyan Rural Telephone Cooperative
1831 Anne Street NW
Bemidji, MN 56601

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent' status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

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Mari Ossenfort
Director of Broadcasting
Forum Communications Company

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OFFICIAL USE

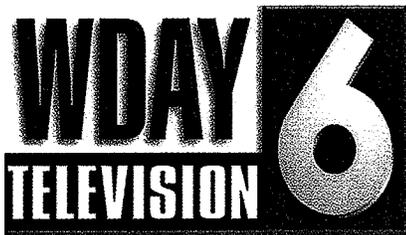
Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage		

Mr. Keith Hunt
Paul Bunyan Rural Telephone
Cooperative
1831 Anne Street NW
Bemidji, MN 56601

PS Form 3800, August 2006 See Reverse for Instructions

7007 3020 0001 4708 0115

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature X <i>Steve Helle</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery <i>Steve Helle</i> 7-3</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Mr. Keith Hunt Paul Bunyan Rural Telephone Cooperative 1831 Anne Street NW Bemidji, MN 56601</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>Article Number (Transfer from service label) 7007 3020 0001 4708 0115</p>	



June 30, 2014

Certified Mail, Return Receipt Requested

Runestone Telephone Association
P.O Box 336
Hoffman, MN 56339

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects "retransmission consent" status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

A handwritten signature in black ink, appearing to read "Mari Ossenfort". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Mari Ossenfort
Director of Broadcasting
Forum Communications Company

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7007 3020 0001 4708 0122

Postage \$		Postmark Here						
Certified Fee								
Return Receipt Fee (Endorsement Required)								
Restricted Delivery Fee (Endorsement Required)								
Total								
Runestone Telephone Association P.O. Box 336 Hoffman, MN 56339								
<table border="1"> <tr> <td>Sent To</td> <td></td> </tr> <tr> <td>Street, or PO Box</td> <td></td> </tr> <tr> <td>City, State</td> <td></td> </tr> </table>			Sent To		Street, or PO Box		City, State	
Sent To								
Street, or PO Box								
City, State								
PS Form 3800, August 2006		See Reverse for Instructions						

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Runestone Telephone Association
P.O. Box 336
Hoffman, MN 56339

2. Article Number
(Transfer from service label)

7007 3020 0001 4708 0122

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature:

X Linda Estenson Agent
 Addressee

B. Received by (Printed Name)

Linda Estenson

C. Date of Delivery

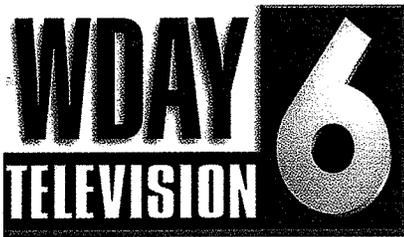
D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type

- Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee)

Yes



June 30, 2014

Certified Mail, Return Receipt Requested

Mr. Dick Sjoberg
President
Sjoberg's Cable TV, Inc.
315 Main Avenue North
Thief River Falls, MN 56701

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent' status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

A handwritten signature in black ink, appearing to read "Mari Ossenfort". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Mari Ossenfort
Director of Broadcasting
Forum Communications Company

7007 3020 0001 4708 0023

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

Total Postage

Sent To

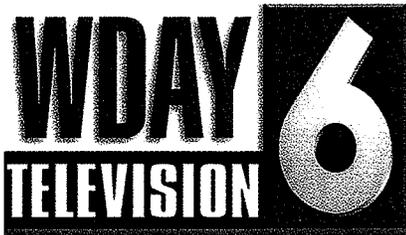
Street, Apt. No.
or PO Box No.
City, State, ZIP

Mr. Dick Sjoberg
President
Sjoberg's Cable TV, Inc.
315 Main Avenue North
Thief River Falls, MN 56701

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>x Steph Morinville</i></p> <p>B. Received by (Printed Name) <input type="checkbox"/> Date of Delivery</p> <p><i>Steph Morinville</i> <i>7-31-14</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Mr. Dick Sjoberg President Sjoberg's Cable TV, Inc. 315 Main Avenue North Thief River Falls, MN 56701</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™</p> <p><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p>
<p>2. Article Number (Transfer from service label)</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

7007 3020 0001 4708 0023



June 30, 2014

Certified Mail, Return Receipt Requested

David Pratt
Tekstar Cablevision, Inc.
d/b/a Arvig Communications Systems
150 Secon Street SW
Perham, MN 56573

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent" status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

A handwritten signature in black ink that reads "Mari Ossenfort". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Mari Ossenfort
Director of Broadcasting
Forum Communications Company

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7007 3020 0001 4708 0139

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

Total Posta

David Pratt
 Tekstar Cablevision, Inc.
 d/b/a Arvig Communications Systems
 150 Secon Street SW
 Perham, MN 56573

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

David Pratt
 Tekstar Cablevision, Inc.
 d/b/a Arvig Communications Systems
 150 Secon Street SW
 Perham, MN 56573

2. Article Number
 (Transfer from service label)

7007 3020 0001 4708 0139

COMPLETE THIS SECTION ON DELIVERY

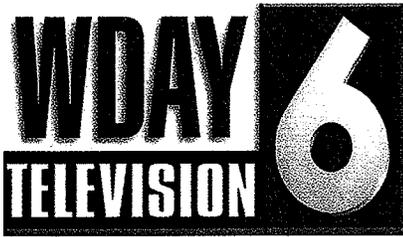
A. Signature  Agent
 Addressee

B. Received by (Printed Name) Jackie Sifer C. Date of Delivery 7-2-14

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

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes



June 30, 2014

Certified Mail, Return Receipt Requested

Mr. Dennis Hansel
United Telephone Mutual Aid Corp
411 7th Avenue
Langdon, ND 58249

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent' status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

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Mari Ossenfort
Director of Broadcasting
Forum Communications Company

U.S. Postal Service™
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OFFICIAL USE

7007 3020 0001 4708 0146

Postage \$		Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total F		
Sent To	Mr. Dennis Hansel	
Street, or PO Box	United Telephone Mutual Aid Corp	
City, St.	411 7th Avenue	
	Langdon, ND 58249	

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mr. Dennis Hansel
 United Telephone Mutual Aid Corp
 411 7th Avenue
 Langdon, ND 58249

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
Linda Balsdon

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

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:
PO BOX 729
Langdon ND 58249

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

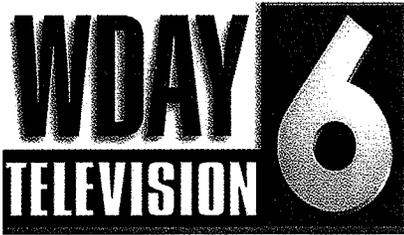
4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
 (Transfer from service label)

7007 3020 0001 4708 0146

PS Form 3811, July 2013

Domestic Return Receipt



June 30, 2014

Certified Mail, Return Receipt Requested

Viking Electronics d/b/a
Polar Cablevision
P.O. Box 270
Park River, ND 58270

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent' status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

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Very truly yours,

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Mari Ossenfort
Director of Broadcasting
Forum Communications Company

7007 3020 0001 4708 0153

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OFFICIAL USE

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage		
Sent To		Viking Electronics d/b/a
Street, Apt. No., or PO Box No.		Polar Cablevision
City, State, ZIP+		P.O. Box 270
		Park River, ND 58270

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Viking Electronics d/b/a
Polar Cablevision
P.O. Box 270
Park River, ND 58270

2. Article Number
(Transfer from service label)

7007 3020 0001 4708 0153

COMPLETE THIS SECTION ON DELIVERY

A. Signature <i>Janice Gaxnd</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name) <i>Janice Gaxnd</i>	C. Date of Delivery

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

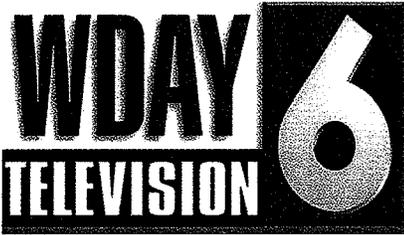
3. Service Type

<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Priority Mail Express™
<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, July 2013

Domestic Return Receipt



June 30, 2014

Certified Mail, Return Receipt Requested

West Central Telephone Association
308 Frontage Road
Sebeka, MN 56477

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects 'retransmission consent' status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

A handwritten signature in black ink, appearing to read "Mari Ossenfort". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Mari Ossenfort
Director of Broadcasting
Forum Communications Company

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

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

OFFICIAL USE

7007 3020 0001 4708 0016

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

Postmark
Here

West Central Telephone Association
 308 Frontage Road
 Sebeka, MN 56477

Sent To
 Street, Apt. 1
 or PO Box N
 City, State, Z

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

West Central Telephone Association
 308 Frontage Road
 Sebeka, MN 56477

2. Article Number
 (Transfer from service label)

7007 3020 0001 4708 0016

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

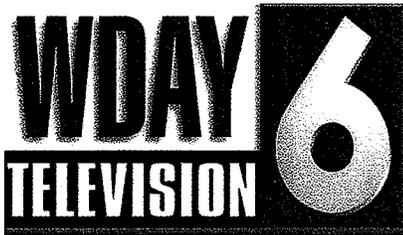
A. Signature
 X *Duln Schoa* Agent
 Addressee

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
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes



June 30, 2014

Certified Mail, Return Receipt Requested

Mr. Alen Lundeen
Wikstrom Systems, LLC
P.O. Box 217
Karstad, MN 56732

RE: Election of Retransmission Consent Status

Dear Sir/Madam:

Forum Communications Company, licensee of television stations, WDAY-Fargo, ND, and WDAZ-Devils Lake/Grand Forks, ND, hereby provides written notice, pursuant to Section 76.64(f) of the Rules and Regulations of the Federal Communications Commission, that it elects "retransmission consent" status on all your cable systems for the period beginning on January 1, 2015 and ending on December 31, 2017. It is our intent that this election be effective as to each community served by all your cable systems serving the Fargo DMA.

We look forward to agreeing on a mutually beneficial retransmission consent agreement.

Very truly yours,

A handwritten signature in cursive script, appearing to read "Mari Ossenfort". The signature is written in black ink and is positioned above the printed name and title.

Mari Ossenfort
Director of Broadcasting
Forum Communications Company

7007 3020 0001 4707 9980

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

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

OFFICIAL USE

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

Total Postage

Sent To

Street, Apt. No.
or PO Box No.

City, State, Zip

Mr. Alen Lundeen
Wikstrom Systems, LLC
P.O. Box 217
Karstad, MN 56732

PS Form 3800, August 2006 See Reverse for Instructions

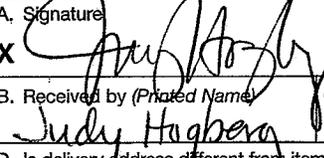
SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mr. Alen Lundeen
Wikstrom Systems, LLC
P.O. Box 217
Karstad, MN 56732

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X 

B. Received by (Printed Name)
Judy Hagberg

C. Date of Delivery
7-7-14

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

3. Service Type

Certified Mail® Priority Mail Express™

Registered Return Receipt for Merchandise

Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) 7007 3020 0001 4707 9980