

CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2015-16 NSI
WFOX-TV	JACKSONVILLE, FL	JACKSONVILLE/BRUNSWICK
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
32 (CURRENT) 14 (AFTER REPACK)	30.1	COX TELEVISION JACKSONVILLE, LLC

This Cable Election Notice is sent this 1st day of September 2017 via Certified Mail/Return Receipt Requested (Receipt Number 7005-3110-0002-6234-0228) to the following:

Operator: BroadbandCTI
 Address: ATTN: David Surface – President
 245 Riverside Ave - Suite 250
 Jacksonville, FL 32202

With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e)) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2018, and December 31, 2020, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):

☒ **retransmission consent.**

☐ **mandatory carriage ("must-carry") on the following: (check one):**

- ☐ The Station's PSIP major channel number ("virtual channel").
- ☐ The cable channel on which the Station was carried on July 19, 1985.
- ☐ The cable channel on which the Station was carried on January 1, 1992.

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

Name: James D. Zerwekh
 Address: WFOX-TV
 11700 Central Parkway – Unit 2
 Jacksonville, FL 32082
 Phone: 904-996-
 Email: james.serwekh@coxinc.com

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

Signature: 
 Name/Title: James D. Zerwekh, Vice President & General Manager

CABLE ELECTION NOTICE

Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
WFOX-TV	JACKSONVILLE, FL	COX TELEVISION JACKSONVILLE, LLC

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

Duval County

Nassau County

U.S. Postal ServiceTM

CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

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

Postmark
Here

Sent To

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

BroadbandCTI
ATTN: David Surface - President
245 Riverside Ave - Suite 250
Jacksonville, FL 32202

PS Form 3800, Ju

SENDER: COMPLETE THIS SECTION

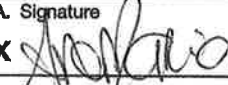
- Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

BroadbandCTI
ATTN: David Surface - President
245 Riverside Ave - Suite 250
Jacksonville, FL 32202

2. Article Number
(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
 ☐ Addressee

B. Received by (Printed Name) _____ C. Date of Delivery 9/29/17

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"/> Express Mail
<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7005 3110 0002 6234 0228

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2015-16 NSI
WFOX-TV	JACKSONVILLE, FL	JACKSONVILLE/BRUNSWICK
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
32 (CURRENT) 14 (AFTER REPACK)	30.1	COX TELEVISION JACKSONVILLE, LLC

This Cable Election Notice is sent this 1st day of September 2017 via Certified Mail/Return Receipt Requested (Receipt Number 7005-3110-0002-6234-0235) to the following:

Operator: BroadbandCTI
Address: ATTN: Joanna Lorenzo – Cable System Manager
245 Riverside Ave - Suite 250
Jacksonville, FL 32202

With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e)) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2018, and December 31, 2020, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):

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☐ mandatory carriage ("must-carry") on the following: (check one):

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

Name: James D. Zerwekh
Address: WFOX-TV
11700 Central Parkway – Unit 2
Jacksonville, FL 32082
Phone: 904-996-
Email: james.serwekh@coxinc.com

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

Signature: 
Name/Title: James D. Zerwekh, Vice President & General Manager

CABLE ELECTION NOTICE

Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
WFOX-TV	JACKSONVILLE, FL	COX TELEVISION JACKSONVILLE, LLC


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

Duval County

Nassau County

7005 3110 0002 6234 0235

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT <i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage \$ _____ Certified Fee _____ Return Receipt Fee (Endorsement Required) _____ Restricted Delivery Fee (Endorsement Required) _____ Total Postage & Fees \$ _____	Postmark Here
Sent To Street, Apt. No., or PO Box No. City, State, ZIP+4	BroadbandCTI ATTN: Joanna Lorenzo – Cable System Manager 245 Riverside Ave - Suite 250 Jacksonville, FL 32202
PS Form 3800, Ju	

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  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) _____ C. Date of Delivery <u>9/29/17</u> D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below: _____
1. Article Addressed to: <div style="text-align: center;"> BroadbandCTI ATTN: Joanna Lorenzo – Cable System Manager 245 Riverside Ave - Suite 250 Jacksonville, FL 32202 </div>	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
2. Article Number (Transfer from service label)	7005 3110 0002 6234 0235

CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2015-16 NSI
WFOX-TV	JACKSONVILLE, FL	JACKSONVILLE/BRUNSWICK
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
32 (CURRENT) 14 (AFTER REPACK)	30.1	COX TELEVISION JACKSONVILLE, LLC

This Cable Election Notice is sent this 1st day of September 2017 via Certified Mail/Return Receipt Requested (Receipt Number 7005 3110 0002 6234 8064) to the following:

Operator: Florida Cable
 Address: ATTN: John Russo
 COO
 1827 Westover Reserve Blvd
 Windermere, FL 34786

With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e)) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2018, and December 31, 2020, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):

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- ☐ The Station's PSIP major channel number ("virtual channel").
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 - ☐ The cable channel on which the Station was carried on January 1, 1992.

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Name: James D. Zerwekh
 Address: WFOX-TV
 11700 Central Parkway – Unit 2
 Jacksonville, FL 32082
 Phone: 904-996-
 Email: james.serwekh@coxinc.com

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

Signature: 
 Name/Title: James D. Zerwekh, Vice President & General Manager

CABLE ELECTION NOTICE

Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
WFOX-TV	JACKSONVILLE, FL	COX TELEVISION JACKSONVILLE, LLC

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

Union County

Bradford County

Clay County

Lake County

USPS Tracking® Results

[FAQs > \(http://faq.usps.com/?articleId=220900\)](http://faq.usps.com/?articleId=220900)
[Track Another Package +](#)

Florida
Cable

[Remove X](#)

Tracking Number: 70053110000262348064

In-Transit

Product & Tracking Information

[See Available Actions](#)

Postal Product:

 Features:
Certified Mail™

DATE & TIME	STATUS OF ITEM	LOCATION
October 17, 2017, 3:18 am	Departed USPS Regional Facility	FORT MEYERS FL DISTRIBUTION CENTER
Your item departed our USPS facility in FORT MEYERS FL DISTRIBUTION CENTER on October 17, 2017 at 3:18 am. The item is currently in transit to the destination.		
October 17, 2017, 2:02 am	Arrived at USPS Regional Facility	FORT MEYERS FL DISTRIBUTION CENTER
September 17, 2017, 9:02 am	In Transit to Destination	ON ITS WAY TO WINDERMERE, FL 347866213
September 16, 2017, 9:02 am	In Transit to Destination	ON ITS WAY TO WINDERMERE, FL 347866213

[See More V](#)

Available Actions

[Text & Email Updates](#)

7005 3110 0002 6234 8064

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

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

Florida Cable
 ATTN: John Russo - COO
 1827 Westover Reserve Blvd
 Windermere, FL 34786

Postmark
 Here

PS Form 3800

CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2015-16 NSI
WFOX-TV	JACKSONVILLE, FL	JACKSONVILLE/BRUNSWICK
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
32 (CURRENT) 14 (AFTER REPACK)	30.1	COX TELEVISION JACKSONVILLE, LLC

This Cable Election Notice is sent this 1st day of September 2017 via Certified Mail/Return Receipt Requested (Receipt Number 7005-3110-0002-6234-0242) to the following:

Operator: Florida Cable
 Address: ATTN: James Pierce – General Manager
 23505 Florida 40
 Astor, FL 32102

With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e)) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2018, and December 31, 2020, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):

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☐ mandatory carriage ("must-carry") on the following: (check one):

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Name: James D. Zerwekh
 Address: WFOX-TV
 11700 Central Parkway – Unit 2
 Jacksonville, FL 32082
 Phone: 904-996-
 Email: james.serwekh@coxinc.com

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

Signature: 
 Name/Title: James D. Zerwekh, Vice President & General Manager

CABLE ELECTION NOTICE

Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
WFOX-TV	JACKSONVILLE, FL	COX TELEVISION JACKSONVILLE, LLC

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

Union County

Bradford County

Clay County

Lake County

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

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

Postmark
Here

Florida Cable
ATTN: James Pierce - General
Manager
 23505 Florida 40
 Astor, FL 32102

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

PS Form 3800, JUN 2000

2420 4E29 2000 011E 5002

CERTIFIED MAIL



7005 3110 0002 6234 0242

Florida Cable
ATTN: James Pierce - General
Manager
 23505 Florida 40
 A

NIXIE



ZIP 02026
 041L11230168

Cox Media Group
ATTN Eric Casella - Program Director
 25 Fox Drive
 Dedham, MA 02027

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 0202674595

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 NOT RETURN TO SENDER
 DELIVERABLE AS ADDRESS
 UNABLE TO FORWARD
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CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2015-16 NSI
WFOX-TV	JACKSONVILLE, FL	JACKSONVILLE/BRUNSWICK
DTV CHANNEL (OVER THE AIR)	PRIMARY CHANNEL (VIRTUAL CHANNEL, E.G., 15.1)	LICENSEE NAME
32 (CURRENT) 14 (AFTER REPACK)	30.1	COX TELEVISION JACKSONVILLE, LLC

This Cable Election Notice is sent this 1st day of September 2017 via Certified Mail/Return Receipt Requested (Receipt Number 7005-3110-0002-6234-0266) to the following:

Operator: Opitcaltel
 Address: ATTN: C/O Cable System Manager
 1360 S. Dixie Highway - Suite #200
 Coral Gables, FL 33146

With respect to all communities within the Station's "television market" (as defined in 47 C.F.R. § 76.55(e)) served by cable systems owned or managed by your company (including those listed in EXHIBIT A hereto) between January 1, 2018, and December 31, 2020, the Licensee elects the following status for the primary video stream of the Station's digital signal (licensee to check one box below):

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Name: James D. Zerwekh
 Address: WFOX-TV
 11700 Central Parkway – Unit 2
 Jacksonville, FL 32082
 Phone: 904-996-
 Email: james.serwekh@coxinc.com

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

Signature: 
 Name/Title: James D. Zerwekh, Vice President & General Manager

CABLE ELECTION NOTICE

Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
WFOX-TV	JACKSONVILLE, FL	COX TELEVISION JACKSONVILLE, LLC

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

Union County

Bradford County

Clay County

Lake County

Cox Media Group
ATTN Eric Casella - Program Director
25 Fox Drive
Dedham, MA 02027

U.S. Postal ServiceTM
CERTIFIED MAILTM 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 & Fees	\$	
Sent To		
Street, Apt. No., or PO Box No.		
City, State, ZIP+4		
PS Form 3800, Jun 2005		

Opitcaltel
ATTN: C/O Cable System Manager
5811 N. Andrews Way
Ft. Lauderdale, FL 33309

22

7005 3110 0002 6234 0266

Opitcaltel
ATTN: C/O Cable System Manager
5811 N. Andrews Way
Ft. Lauderdale, FL 33309

NIXIE

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0202674595

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RETURN TO SENDER
UNABLE TO FORWARD
BC: 02026459525
*0769-04018-26-38
2010/03/17
ZIP 02026
041L11230168

CABLE ELECTION NOTICE

CALL LETTERS	COMMUNITY OF LICENSE	DMA TO WHICH NIELSEN MEDIA RESEARCH ASSIGNED STATION IN 2015-16 NSI
WFOX-TV	JACKSONVILLE, FL	JACKSONVILLE/BRUNSWICK
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This Cable Election Notice is sent this 1st day of September 2017 via Certified Mail/Return Receipt Requested (Receipt Number 7005-3110-0002-6234-0259) to the following:

Operator: Opitcaltel
 Address: ATTN: C/O Cable System Manager
 1360 S. Dixie Highway - Suite #200
 Coral Gables, FL 33146

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 11700 Central Parkway – Unit 2
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 Phone: 904-996-
 Email: james.serwekh@coxinc.com

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

Signature: 
 Name/Title: James D. Zerwekh, Vice President & General Manager

CABLE ELECTION NOTICE

Exhibit A

CALL LETTERS	COMMUNITY OF LICENSE	LICENSEE
WFOX-TV	JACKSONVILLE, FL	COX TELEVISION JACKSONVILLE, LLC

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

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Clay County

Lake County

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

Postmark
Here

Sent To

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

City, State, ZIP+4

Opitcaltel
ATTN: C/O Cable System Manager
1360 S. Dixie Highway - Suite #200
Coral Gables, FL 33146

PS Form 3800, July 2002

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:

Opitcaltel
ATTN: C/O Cable System Manager
1360 S. Dixie Highway - Suite #200
Coral Gables, FL 33146

2. Article Number

(Transfer from service label)

7005 3110 0002 6234 0259

PS Form 3811, February 2004

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

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

Domestic Return Receipt

102595-02-M-1540