DBS ELECTION NOTICE

| CALL LETTERS | COMMUNITY OF LICENSE | DMA |
|----------------|-------------------------------|---------------------------------|
| WUCF-TV | ORLANDO, FL | ORLANDO-DAYTONA BEACH-MELBOURNE |
| DTV CHANNEL | PRIMARY CHANNEL | LICENSEE NAME |
| (OVER THE AIR) | (VIRTUAL CHANNEL, E.G., 15.1) | |
| 23 | 24.1 | UNIVERSITY OF CENTRAL FLORIDA |
| | | |

| This DBS Election | Notice is sent this 1st | _ day of | September | _ 2017 via Certified |
|-------------------|--|----------|----------------|----------------------|
| Mail/Return Recei | pt Requested (Receipt Nu | ımber | 7013 2250 0001 | 1669 8641) to |
| the following DBS | Operator (check one): | | | |
| | DirecTV, Inc. 2260 E CA 90245, Attn: Loc | | U , 1 | : N321, El Segundo, |
| _X_ | Teresa Cain, Local Pr 9601 South Meridian | 0 | • | etwork, |

With respect to carriage in the above-listed DMA(s) by the above-listed DBS Operator 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:

⋈ mandatory carriage ("must-carry").

For further information, please contact:

| Name: | William Dotson |
|----------|-----------------------------------|
| Address: | 12461 Research Parkway, Suite 550 |
| | Orlando, FL 32826 |
| | |
| Phone: | 407-823-3280 |
| Email: | bill.dotson@wucftv.org |

The Licensee provides this Election Notice pursuant to 47 C.F.R. Section 76.66.

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: Teresa Cain
 Local frogramming Operations
 DISH Network
 9601 South Meridian Blvd

Englewood, CO 80112

A. Signature ☐ Agent ☐ Addressee C. Date of Delivery B. Received by (Printed Name) ☐ Yes D. Is delivery address different from item 1? ☐ No if YES, enter delivery address below: 3. Service Type Certified Mail ☐ Express Mail Registered Return Receipt for Merchandise

☐ C.O.D.

COMPLETE THIS SECTION ON DELIVERY

2. Article Number
(Transfer from service label)

7013 2250 0001 1669 8641

☐ Insured Mail

4. Restricted Delivery? (Extra Fee)

☐ Yes

United States Postal Service CO 802 05 SEP 17

SE MES

|--|

First-Class Mail Postage & Fees Paid USPS Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

WVEFTV AHn: William Dotson 12401 Research Pkmy Ste 550 Orlando FL 32826