



Philip C. Wilkinson
President/Chief Operating Officer

ENTRAVISION COMMUNICATIONS CORPORATION 2425 Olympic Blvd. Suite 6000 West Santa Monica, CA 90404 T 310.447.3870 F 310.447.3899

June 11, 2009

VIA CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Ms. Stacey Conway
General Manager
Dish Network
9601 South Meridian Boulevard
Englewood, Colorado 80112

Re: **Must Carry Election**

Dear Sir or Madam:

The Satellite Home Viewer Improvement Act of 1999 (“SHVIA”) and the Satellite Home Viewer Extension and Reauthorization Act of 2004 (“SHVERA”) require that you carry all local stations in a market where you carry at least one station pursuant to a compulsory copyright license, and the Federal Communications Commission’s Rules and Regulations implementing SHVIA and SHVERA requires us to make an election such carriage.

Section 76.66(d)(3) of the FCC’s Rules provides that new television stations (i.e., stations providing over-the-air service in a market for the first time on or after July 1, 2001) have the right to make their carriage election during the period beginning 60 days prior to commencing broadcasting and ending 30 days after commencing broadcasting. Entravision Holdings, LLC is the licensee of television station KDCU licensed to Wichita, Kansas (the “Station”), and we currently expect that the Station will commence broadcasting on or around August 1, 2009. Consequently, the instant carriage election is timely submitted.

We hereby elect carriage by must-carry for the Station in the Wichita-Hutchinson Plus Nielsen Designated Market Area (DMA) so that the Station's signal is required to be available to all of your company's subscribers in the DMA.

Further, in accordance with Section 76.66(d)(1)(iii) of the Commission’s Rules, we hereby provide you with the following information:

1. The contact person for the Station is Philip Wilkinson, who may be reached at (858) 503-6019;
2. The Station’s call sign is KDCU;

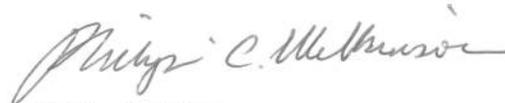
3. The Station's address for receiving official correspondence is:

KDCU-TV
Entravision Communications Corporation
2425 Olympic Blvd., Suite 6000 West
Santa Monica, CA 90404

4. The community of license for the Station pursuant to our FCC authorization is Wichita, Kansas;
5. The DMA assignment for the Station is Wichita-Hutchison Plus, Kansas; and
6. We elect for the Station to be carried by must carry.

If you have any questions, please do not hesitate to contact us.

Respectfully submitted, ~



Philip C. Wilkinson
President and Chief Operating Officer

cc: Timothy Spillane, Univision Communications, Inc.

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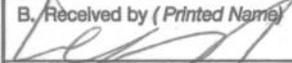
7008 1300 0001 0000 9380

Postage	\$	
Certified Fee		\$1.70
Return Receipt Fee (Endorsement Required)		\$2.70
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$5.54



Sent To Ms. Stacey Conway
 General Manager
 Street, Apt. No., or PO Box No. Dish Network
 City, State, ZIP+4 9601 South Meridian Boulevard
Englewood, Colorado 80112

PS Form 3800

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 checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) </p> <p>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>Ms. Stacey Conway General Manager Dish Network 9601 South Meridian Boulevard Englewood, Colorado 80112</p>	<p>3. Service Type</p> <p><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.</p>
<p>2. Article Number (Transfer from service label)</p> <p>7008 1300 0001 0000 9380</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>PS Form 3811, February 2004</p>	<p>Domestic Return Receipt 102595-02-M-1540</p>