



December 19, 2019

Mr. Fred Mytty Dodge County Clerk 435 N Park Fremont, NE 68025 2019 DEC 23 PM 12: 08

Dear Mr. Mytty:

Charter Communications ("Charter"), locally known as Spectrum, was recently informed that on or around December 1<sup>st</sup>, VICELAND located on Spectrum Channel 133, was rebranded from VICELAND to VICE on the channel lineup serving your community. To view a current Spectrum channel lineup visit <a href="https://www.spectrum.com/channels">www.spectrum.com/channels</a>.

If you have any questions about this change, please feel free to contact me at (402) 421-0378 or via email at <a href="mailto:jeremiah.blake@charter.com">jeremiah.blake@charter.com</a>.

Sincerely,

Jeremiah Blake

**Director, Government Affairs** 



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/17/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

ADDITIONAL INCURED, the policy/ies) must have ADDITIONAL INSURED provisions or be endorsed.

IMPORTANT: If the certificate holder is If SUBROGATION IS WAIVED, subject this certificate does not confer rights to	to the to	erms and conditions of th	e polic	y, certain p	olicies may i	equire an endorsement	. As	tatement on
PRODUCER	≠ ene cel	tanoate norder in neu of St	CONTA	CT	<i>!</i>			
Marsh USA Inc.				NAME: PHONE FAX				
701 Market Street, Suite 1100 St. Louis, MO 63101-1830			(A/C, No E-MAIL	o, Ext):		[A/C, No):		
Attn: StLouis, MO 63 to 1-1830 Attn: StLouis.CertRequest@marsh.com Fax: 2	212-948-08	11	ADDRE		NIDEBIO:	DING COVERAGE		NAIC#
						IDING COVERAGE		19410
				INSURER A : Commerce & Industry Insurance Company				19445
INSURED Charter Communications, Inc. and all Subsidiaries 400 Atlantic Street Stamford, CT 06901				INSURER B : Mailuidi Officii File ilis. Co. of Filosodiyii, i A				
				INSURER C: New Hampsine insurance company				
				INSURER D : ACL Floperty and Casacity sisultance Company				
				INSURER E : AIO IIISGIdite CO				
			INSURER F :					
COVERAGES CER	TIFICAT	E NUMBER:		-009189933-04		REVISION NUMBER: 0	JE DO	HCV BEBIOD
THIS IS TO CERTIFY THAT THE POLICIES INDICATED. NOTWITHSTANDING ANY RECERTIFICATE MAY BE ISSUED OR MAY BE EXCLUSIONS AND CONDITIONS OF SUCH	QUIREM PERTAIN POLICIES	ENT, TERM OR CONDITION , THE INSURANCE AFFORDI S. LIMITS SHOWN MAY HAVE	of an' Ed by	Y CONTRACT THE POLICIE REDUCED BY	` or other i 's describei Paid Claims.	OCCUMENT WITH RESPECT TO	O ALL	WHICH THIS
LTR TYPE OF INSURANCE	ADDL SUB INSD WV	D POLICY NUMBER				LIMIT		0.000.000
A X COMMERCIAL GENERAL LIABILITY		3629906		01/01/2020	01/01/2021	EACH OCCURRENCE DAMAGE TO RENTED	\$	2,000,000
CLAIMS-MADE X OCCUR			,			PREMISES (Ea occurrence)	\$	500,000
						MED EXP (Any one person)	\$	10,000
						PERSONAL & ADV INJURY	\$	2,000,000
GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	2,000,000
X POLICY PRO- LOC						PRODUCTS - COMP/OP AGG	\$	2,000,000
OTHER:							\$	
B AUTOMOBILE LIABILITY	1	1921838 (AOS)		01/01/2020	01/01/2021	COMBINED SINGLE LIMIT (Ea accident)	\$	2,000,000
B X ANY AUTO		1921839 (MA)		01/01/2020	01/01/2021	BODILY INJURY (Per person)	\$	
B OWNED SCHEDULED AUTOS ONLY X HIRED X NON-OWNED		1921840 (VA)		01/01/2020	01/01/2021	BODILY INJURY (Per accident)	\$	
X HIRED X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$	
AUTOS ONLY AUTOS ONLY							\$	
D X UMBRELLALIAB X OCCUR		G28119616 005		01/01/2020	01/01/2021	EACH OCCURRENCE	\$	5,000,000
EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$	5,000,000
OLFGINO NIVIDE				1			\$	
DED RETENTION \$ C WORKERS COMPENSATION		014122399 (AOS)		01/01/2020	01/01/2021	X PER OTH-		
AND EMPLOYERS' HARBITY		4595566 (OH)		01/01/2020	01/01/2021	E.L. EACH ACCIDENT	\$	2,000,000
C ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? N N	N/A	014122396 (MA, WA, WI, WY) 12716987 (NY)		01/01/2020 01/01/2021 01/01/2020 01/01/2021	01/01/2021	E.L. DISEASE - EA EMPLOYEE	<u> </u>	2,000,000
□ If ves. describe under					01/01/2021	E.L. DISEASE - POLICY LIMIT		2,000,000
DÉSCRIPTION OF OPERATIONS below	<del>                                     </del>	· · · · · · · · · · · · · · · · · · ·	DAILT	01/01/2020	01/01/2021	E.E. DIOLAGE * POLICY EIWIII	\$	2,000,000
C Workers Compensation /		014122397 (AZ,IL,KY,NC,NH,NJ,	, A,U1,	01/01/2020	0 110 112021			_,2.2,000
Employers Liability		VA,VT)						
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICI THE COUNTY OF DODGE, ITS OFFICERS, AGENTS and or agreement with the Named Insured. Additional Insured	d EMPLOYI	EES is/are added as Additional Insure	d to the C	Commercial Gener	rał Liability policy b	Led) ed) out only with respects to the require	ements o	of the witten contrac
CERTIFICATE HOLDER			CAN	CELLATION				
DODGE COUNTY Attn: DODGE COUNTY CLERK 435 N. PARK, ROOM 102 FREMONT, NE 68025				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.				
				AUTHORIZED REPRESENTATIVE of Marsh USA Inc.				-
	Manashi Mukherjee			Mariaohi Mukrufei				

AGENCY CUSTOMER ID: CN102616700

LOC #: St. Louis



## ADDITIONAL REMARKS SCHEDULE

Page 2 of 3

AGENCY Marsh USA Inc. POLICY NUMBER	NAMED INSURED Charler Communications, Inc. and all Subsidiaries 400 Atlantic Street				
		Stamford, CT 06901			
CARRIER	NAIC CODE	EFFECTIVE DATE:			

## ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

WORKERS COMPENSATION CONT'D:
CARRIER: AMERICAN HOME ASSURANCE COMPANY
POLICY NUMBER: 014122398 (CA)
EFFECTIVE DATE: 01/01/2020
EXPIRATION DATE: 01/01/2021

LIMITS: REFER TO WORKERS COMPLIMITS ON CERTIFICATE

CARRIER: ILLINOIS NATIONAL INSURANCE CO.
POLICY NUMBER: 014122400 (FL)
EFFECTIVE DATE: 01/01/2020
EXPIRATION DATE: 01/01/2021

LIMITS: REFER TO WORKERS COMP LIMITS ON CERTIFICATE

Charter Communications, Inc. Branded Spectrum, Spectrum Business, Spectrum Enterprise and their:

- subsidiaries, associated, affiliated and inter-related companies;
- controlled or majority (more than 50%) owned partnerships, limited flability companies;
- interest only in (or its subsidiaries' interest in) any other partnerships or joint ventures or limited liability companies;
- interest in (or its subsidiaries' interest in) any company or organization coming under its active management or control;
- any entity or party required to be insured under any contract or agreement which may now exist, may have previously existed, or may hereafter be created or acquired.

Bresnan Broadband Holdings, LLC; Bresnan Broadband of Colorado, LLC; Bresnan Broadband of Montana, LLC; Bresnan Broadband of Utah, LLC; Bresnan Broadband of Wyoming, ŁŁC; Bresnan Digital Services, LLC; Bresnan Microwave of Montana, LLC; Bright House Networks Information Services (Alabama), LLC; Bright House Networks Information Services (California), LLC; Bright House Networks Information Services (Florida), LLC; Bright House Networks Information Services (Indiana), LLC; Bright House Networks Information Services (Michigan), LLC; Bright House Networks, LLC; CC Systems, LLC; CCH II, LLC (CCHII); Charter Advanced Services VIII (MN), LLC; Charter Communications Entertainment I, LLC; Charter Communications Holding Company, LLC; Charter Communications Holdings, LLC; Charter Communications Operating, LLC; Charter Communications VI, ŁLC; Charter Communications VII, ŁLC; Charter Communications, Inc.; Charter Communications, LLC; Charter Fiberlink - Alabama, ŁLC; Charter Fiberlink - Georgia, LLC; Charter Fiberlink - Illinois, LLC; Charter Fiberlink - Maryland II, LLC; Charter Fiberlink - Michigan, LLC; Charter Fiberlink - Missouri, LLC; Charter Fiberlink - Mi Nebraska, LLC; Charter Fiberlink - Tennessee, LLC; Charter Fiberlink CC VIII, LLC; Charter Fiberlink CCO, LLC; Charter Fiberlink CT-CCO, LLC; Charter Fiberlink LA-CCO, LLC; Charter Fiberlink MA-CCO, LLC; Charter Fiberlink MS-CCVI, LLC; Charter Fiberlink NC-CCO, LLC; Charter Fiberlink NH-CCO, LLC; Charter Fiberlink NV-CCVII, LLC; Charter Fiberlink NV-CCVII, LLC; Charter Fiberlink NV-CCVII, LLC; Charter Fiberlink NV-CCVIII, LLC; Charter Fiberlink NV-CCVIIII, LLC; Charter Fiberlink NV-CCVIIII, LLC; Charter Fiberlink NV-CCVIIII, LLC; Charter Fiberlink NV-CCVIIIII (LC); Charter Fiberlink NV-CCVIIII (LC); Charter Fiberlink NV-CCVIIII (LC); Charter Fiberlink NV-CCVIIII (LC); Charter Fiberlink NV-CCVIIIII (LC); Charter Fiberlink NV-CCVIIII (LC); Charte Fiberlink NY-CCO, LLC; Charter Fiberlink OR-CCVII, LLC; Charter Fiberlink SC-CCO, LLC; Charter Fiberlink TX-CCO, LLC; Charter Fiberlink VA-CCO, LLC; Charter Fiberlink VT-CCO, LLC; Charter Fiberlink WA-CCVII, LLC; Charter Gateway, ŁLC; Charter Helicon, LŁC; Coaxial Communications of Central Ohio LLC; DukeNet Communications, LLC; Falcon Cable Communications, LLC; Insight Blocker LLC; Insight Communications Company LLC; Marcus Cable Associates, LLC; Spectrum Advanced Services, LLC; Spectrum Captive Holdings, LLC; Spectrum Gulf Coast, ŁLC; Spectrum Management Holding Company, ŁLC; Spectrum Mid-America, LLC; Spectrum Mobile LLC; Spectrum New York Metro, ŁLC; Spectrum NLP, LLC; Spectrum Northeast, LLC; Spectrum Oceanic, LLC; Spectrum Pacific West, LLC; Spectrum Reach, LLC; Spectrum RSN, LLC; Spectrum Security, LLC; Spectrum Southeast, LLC; Spectrum Stamford, ŁŁC; Spectrum TV Essentials, ŁŁC; The Helicon Group, L.P.; Time Warner Cable Business, LLC; Time Warner Cable Enterprises LLC; Time Warner Cable Information Services (Alabama), LLC; Time Warner Cable Information Services (Arizona), LLC; Time Warner Cable Information Services (California), LLC; Time Warner Cable Information Services (Colorado), LLC; Time Warner Cable Information Services (Hawaii), LLC; Time Warner Cable Information Services (Idaho), LLC; Time Warner Cable Information Services (Illinois), ŁŁC; Time Warner Cable Information Services (Indiana), ŁŁC; Time Warner Cable Information Services (Kansas), ŁLC; Time Warner Cable Information Services (Kentucky), LLC; Time Warner Cable Information Services (Maine), LLC; Time Warner Cable Information Services (Massachusetts), LLC; Time Warner Cable Information Services (Michigan), LLC; Time Warner Cable Information Services (Missouri), LLC; Time Warner Cable Information Services (Nebraska), LLC; Time Warner Cable Information Services (New Hampshire), LLC; Time Warner Cable Information Services (New Jersey), LLC; Time Warner Cable Information Services (New Mexico), LLC; Time Warner Cable Information Services (New York), LLC; Time Warner Cable Information Services (North Carolina), LLC; Time Warner Cable Information Services (Ohio), LLC; Time Warner Cable Information Services (Pennsylvania), LLC; Time Warner Cable Information Services (South Carolina), LLC; Time Warner Cable Information Services (Tennessee), LLC; Time Warner Cable Information Services (Texas), LLC; Time Warner Cable Information Services (Virginia), LLC; Time Warner Cable Information Services (Washington), LLC; Time Warner Cable Information Services (West Virginia), LLC; Time Warner Cable Information Services (Wisconsin), LLC; Time Warner Cable, LLC; TWC Administration LLC; TWC Sports Newco LLC

...and any corporation or other business organization other than a joint venture in which the Named Insured shown in the declarations has or acquires during the policy period an ownership of more than 50% and which is domiciled within the United States of America, its territories or possessions, Puerto Rico or Canada.

AGENCY CUSTOMER ID: CN102616700

LOC #: St. Louis



## ADDITIONAL REMARKS SCHEDULE

Page 3 of 3

ADDITIONAL	- 17F1AIV	INITO OCITEDOLL	<u> </u>	
AGENCY Marsh USA Inc.	NAMED INSURED Charter Communications, Inc. and all Subsidiaries			
POLICY NUMBER		400 Atlantic Street Stamford, CT 06901		
CARRIER	NAIC CODE	EFFECTIVE DATE:		
ADDITIONAL REMARKS				
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACO	DD FORM			
FORM NUMBER: 25 FORM TITLE: Certificate of Lia	ibility Insurai	nce		
FORM NUMBER: 25 FORM TITLE: Octamodic of Ele	Dinty inodia.			
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DODGE COUNTY Attn: DODGE COUNTY CLERK 435 N. PARK, ROOM 102 FREMONT, NE 68025



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