



**COUNTY OF LAKE**  
**CLERK OF THE BOARD**  
 Courthouse - 255 North Forbes Street  
 Lakeport, California 95453  
 TELEPHONE (707) 263-2368  
 FAX (707) 263-2207

**HEARING DATE CONFIRMATION NOTICE**  
**THIS PORTION MUST BE RETURNED**

Application No(s): 02-2024 through 09-2024  
 Assessee/Owner: Matthew Eshoo

Hearing Date: February 25, 2025 @10:00 A.M.  
 APN(s): 005-014-250-000

**YOU MUST COMPLETE AND RETURN THIS PORTION AT LEAST**  
**21 DAYS PRIOR TO THE HEARING DATE**

- Yes, I (or my agent) will be present for my scheduled hearing.
- I am unable to attend on the date specified. The request must be submitted at least 21 days prior to the hearing date and accompanied by the signed extension form below. Upon receipt of the form below, the Clerk will contact you to reschedule your hearing.
- Please withdraw my appeal(s). I do not intend to appear at my scheduled hearing.

*Matthew J. Riveras*  
 Signature: Owner/Agent

1-23-25  
 Date

Daytime Phone Number

**IT IS IMPERATIVE THAT YOU CONFIRM YOUR INTENTION TO APPEAR. FAILURE TO APPEAR**  
**WITHOUT NOTICE MAY RESULT IN YOUR APPEAL BEING DENIED.**  
 (PLEASE RETURN WHOLE PAGE)

**LAKE COUNTY**  
**LOCAL BOARD OF EQUALIZATION**  
**EXTENSION FOR TIME OF HEARING**

Application No(s): 02-2024 through 09-2024  
 Assessee/Owner: Matthew Eshoo

Hearing Date: February 25, 2025 @10:00 A.M.  
 APN(s): 005-014-250-000

I, MATTHEW RIVERAS hereby agree that, in accordance with Revenue and Taxation Code Section 1604c, the time for the hearing and determination of the above-referenced application(s) shall be extended indefinitely; provided, however, that upon written notice of my intent to terminate such extension, the two-year period in which the Local Board of Equalization is required to conduct a hearing and make a final determination on the above-referenced application(s) shall not commence to run until 120 days after delivery of such written notice on the Clerk of the Local Board of Equalization.

1-23-25  
 Date signed

DONICA, LLC  
 Company/Firm Name (Agent's)

P.O. Box 2063  
 City, State, ZIP

Daytime Phone Number

DONICA, LLC / MATTHEW RIVERAS  
 Print Name of Applicant or Agent

*Matthew J. Riveras*  
 Signature of Applicant/Agent

WINDSOR, CA 95492  
 City, State, ZIP

Alternate Telephone Number

Please return this form to:

**LAKE COUNTY**  
**CLERK OF THE BOARD**  
 255 NORTH FORBES STREET  
 LAKEPORT, CA 95453