INDEPENDENT EXPENDITURE COMMITTEE CONTROL INFORMATION

COMMITTEE NAME: NEW YORKERS FOR INDEPENDENT WORK FILER ID#: A23618

LIST REQUIRED INDIVIDUAL(S) / ENTITY / ENTITIES AND INDICATE THE CATEGORY OR CATEGORIES FOR EACH: (Attach additional sheets if necessary):

CATEGORIES:

- 1. Check box 1 if this committee is an individual, provide the required information as listed.
- 2. Check box 2 if the committee is an entity, provide the name, employer, and any related information of any individual who exerts operational or managerial influence or control over the entity.
- 3. Check box 3 if the committee is an entity, provide the name, employer and related information of any salaried employee of the committee.

Full Name: JORDAN MARKWITH	
Res. Address: 155 4TH STREET #481 OAKLAND, CA 94607	
Current Employer: LYFT, INC. Current Employer Address: 185 BERRY ST. #5000 SAN FRANCISCO, CA 94107	
Current Employer Address: 103 BETTTT 31. #3000 3AT	THANCISCO, CA 94107
Check appropriate category: [] 1 [\(\nu \)] 2 [] 3	
Full Name:	Occupation:
Res. Address:	
Current Employer:	
Current Employer Address:	
Check appropriate category: []1 []2 []3	
Full Name:	
Res. Address:	
Current Employer:	
Current Employer Address:	
Check appropriate category: []1 []2 []3	
Full Name:	Occupation:
Res. Address:	
Current Employer:	
Current Employer Address:	
Check appropriate category: []1 []2 []3	