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 Occupation: HEAD OF EXTERNAL AFFAIRS

Res. Address: 155 4TH STREET #481 OAKLAND, CA 94607

Current Employer: LYFT, INC.

Current Employer Address: 185 BERRY ST. #5000 SAN FRANCISCO, CA 94107

Check appropriate category: [ ] 1 [✓] 2 [ ] 3

Full Name: _____ Occupation: _____

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

Full Name: _____ Occupation: _____

Res. Address: _____

Current Employer: _____

Current Employer Address: _____

Check appropriate category: [ ] 1 [ ] 2 [ ] 3