

Exhibit E

CLAIM FORM

In Re: Houser Data Breach Litigation, Case No. 8:24-cv-00468-WLH-ADS
(United States District Court, Central District of California)

SUBMIT BY _____, 2025

ONLINE AT WWW.XXXXXXXXXX.COM

OR MAIL TO:

Houser Claims Administrator



GENERAL CLAIM FORM INFORMATION

This Claim Form should be filled out online or submitted by mail if you received a notice letter of the Houser Data Incident that occurred between approximately May 7, 2023 and May 9, 2023 (“Settlement Class”). Please make sure to fill out all required information, including the required Claimant Information requested on the last page of this form.

Further, there is a subclass of individuals who are residents of the State of California (“California Subclass”).

If you wish to submit a Settlement Claim by mail, please provide the information requested below. Please print clearly in blue or black ink. This Claim Form must be mailed and postmarked by **no later than DD, MM, 2025**.

Monetary Compensation

1. Verified Out-Of-Pocket Expenses: Did you incur unreimbursed out-of-pocket losses or expenses after May 7, 2023 as a result of the Houser Data Incident? (circle one)

Yes

No

If you circled yes, please write the total amount of losses and/or expenses that you seek reimbursement for through this settlement: \$_____

Please provide copies of any receipts, bank statements, reports, or other documentation supporting your Settlement Claim. This can include receipts or other documentation not “self-prepared” by you. “Self-prepared” documents such as handwritten receipts are, by themselves, insufficient to receive reimbursement, but can be considered to add clarity or support other submitted documentation. You may mark out (also known as redact) any information that is not relevant to supporting your Settlement Claim before sending in the documentation. The Claims Administrator may contact you for additional information before processing your Settlement Claim. If you do not have information supporting your Settlement Claim for ordinary or extraordinary expenses or losses, you likely will not receive compensation for this settlement benefit. Any monetary compensation you may receive under the Settlement is capped at \$5,000.

This image shows a blank sheet of white paper with horizontal black ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. A single line near the bottom of the page is highlighted in light blue.

☐ I attest under penalty of perjury that, to the best of my knowledge, I incurred these losses or expenses after May 7, 2023 as a result of the Houser Data Incident. I understand that I am required to provide third-party documentation to support my Settlement Claim for out-of-pocket losses, such as providing copies of any receipts, bank statements, reports, or other documentation supporting my Settlement Claim. This can include receipts or other documentation not “self-prepared” by me.

Yes **No**

Yes No

☐ I attest under penalty of perjury that, at some time between May 7, 2023 and May 9, 2023, I was a resident of the State of Washington.

4. ***Pro Rata Cash Payment:*** Would you like to receive a \$50 *pro rata* cash payment under the Settlement? (circle one)

Yes

No

(Important Claimant Information Requested on Following Page)
Claimant Information

Full Name of Settlement Class Member

Class Member ID

(Can be found on the postcard or Email Notice you received informing you about this Settlement. If you need additional help locating this ID, please contact the Claims Administrator.)

Street/P.O. Box

City

State

Zip Code

Phone Number

Email Address

Signature