

Exhibit E

Online Claim Form

If you are a Settlement Class Member, you must submit a completed Claim Form on this webpage on or before [insert date] to receive a payment from the Settlement.

Please carefully read the full Class Notice for this Class Action Settlement (available at www.ContinuingEdVPPAClassActionSettlement.com/[location of long-form Class Notice]) before completing and submitting this Claim Form.

Only one claim may be submitted per Settlement Class Member, and a maximum of one Cash Award will be paid to each Settlement Class Member. To complete a Claim Form, provide the information requested below and submit this form.

Unless you elect an electronic payment method below, you will receive your Cash Award by paper check sent to the postal address you provide below. The amount of your Cash Award will be the same regardless if you are paid by electronic payment method or by check. Checks may be deposited into a bank account or cashed at a bank by the expiration date stated on the check (120 days after the check's issuance date); after a check expires, it may no longer be deposited or cashed. An electronic payment will be deposited into the electronic wallet you select and will never expire. If you elect to have your Cash Award sent to you by paper check in the Claim Form below, and your address changes at some point after you submit this Claim Form, it is your responsibility to update the address to which your check should be sent by submitting a change of address change form available at www.ContinuingEdVPPAClassActionSettlement.com/[location of form] within 14 days of the Effective Date.

CLAIM ID (located on the Class Notice sent to you): _____

CONTACT DETAILS:

Name:

FIRST NAME

LAST NAME

Postal Address (Your check will be mailed to the address you provide above, unless you elect to receive an electronic payment instead – see below under the “Selection of Payment Type” section):

STREET ADDRESS

CITY

STATE

ZIP CODE

Other Contact Information:

TELEPHONE NUMBER

EMAIL ADDRESS

(If you choose to receive an electronic payment in the “Selection of Payment Type” section below, provide the email address associated with the electronic payment method you select)

SELECTION OF PAYMENT METHOD:

I elect to receive my payment from this settlement (choose one):

- ☒ by paper check sent to the postal address provided above **[[this will be checked by default]]**; or
- ☐ by electronic payment method, to an account linked to the email address provided above **[[if this is checked, the box above will become unchecked, and options for the various electronic payment methods will appear below, each alongside a checkbox, and the person will be able to check one of the boxes]]**.

CLAIMANT CERTIFICATION:

By submitting this Claim Form, I certify the following is true and correct: Between October 3, 2022, and October 3, 2024, I purchased a video product from www.pesi.com and/or www.psychotherapynetworker.org.

Signature: _____ **[[Requires person to type name]]**

Agree and Submit

[[After a person submits the Claim Form page, as shown above, the Settlement Website should display a screen with the message below:]]

Your Claim Form has been submitted to the Settlement Administrator for review. The number assigned to your submitted Claim Form is **XXXXXXXXXXXX**. Please keep a copy of this page for your records. You will also receive an email confirming the submission of your Claim Form to the email address you provided above.

Your Cash Award will be sent to you by the Settlement Administrator by check or electronic payment method, whichever you selected, within 60 days from the Settlement’s Effective Date, as described in the Settlement Agreement and Release, which is available at www.ContinuingEdVPPAClassActionSettlement.com **[[location of SA]]**. This process takes time; please be patient.