

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

COMPLETE THIS SECTION ON DELIVERY

A. Signature		☐ Agent
X		☐ Addressee
B. Received by (Printed Name)	C. Date of Delivery	
<i>Mail Room</i>	<i>1-22</i>	
D. Is delivery address different from item 1? ☐ Yes ☒ No		
If S, enter delivery address below:		

Charlotte Collins, Warden
 T. Don Hutto Detention Center
 1001 Welch Street
 Taylor, TX 76574

26cv40 dkt 1



9590 9402 9829 5266 4972 89

2. Article Number (Transfer from envelope label)
 7021 2720 0002 1466 5104

Type	
☐ Adult Signature	☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery	☒ Registered Mail™
☒ Certified Mail®	☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery	☐ Signature Confirmation™
☐ Collect on Delivery	☐ Signature Confirmation Restricted Delivery
☐ Collect on Delivery Restricted Delivery	

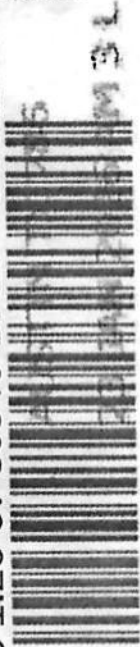
Domestic Return Receipt

PS Form 3811, July 2020 PSN 7530-02-000-9053

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USPS TRACKING#

9590 9402 9829 5266 4972 89



Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 9829 5266 4972 89

United States
Postal Service

Sender: Please print your name, address, and ZIP+4® in this box®

RECEIVED

JAN 28 2026

CLERK, U.S. DISTRICT COURT
BY DEPUTY CLERK
501 W. 5th Street, Suite 1100
Austin, Texas 78701

31-381235