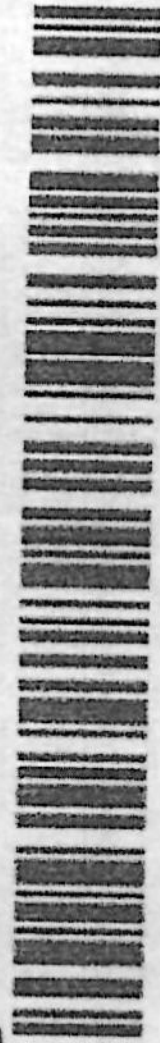


- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

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



9590 9402 8245 3094 8632 42

2. Article Number (Transfer from service label)

9589 0710 5270 2121 5145 86

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

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Mail Room

C. Date of Delivery

1-26-26

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

- ☒ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Mail Restricted Delivery

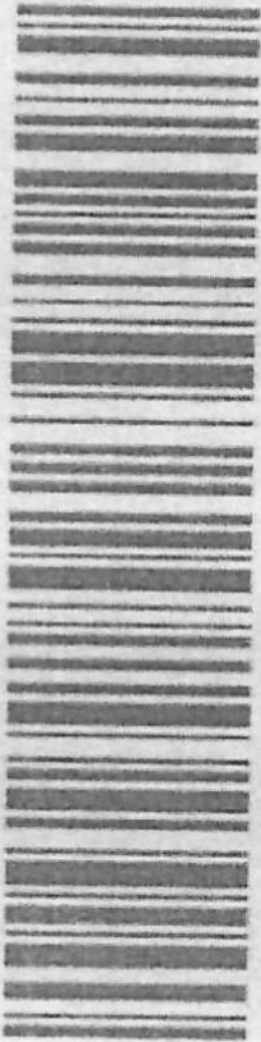
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☒ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

Case 1:26-cv-00093-RP

Document 11

Filed 01/29/26 Page 2 of 2



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 8245 3094 8632 42

United States
Postal Service

RECEIVED

JAN 29 2026

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

Clerk, U S. District Court
501 W 5th Street, Suite 1100
Austin, Texas 78701

JAN 29 2026

CLERK, U.S. DISTRICT COURT
WESTERN DISTRICT OF TEXAS

26-cv-93

BY TP
DEPUTY CLERK

