

- 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:

U.S. Attorney's Office, Civil Division
601 NW Loop 410, Suite 600
San Antonio, TX 78216



9590 9402 8245 3094 8632 28

2. Article Number (Transfer from service label)

9589 0710 5270 2121 5146 54

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

A. Signature

[Handwritten Signature]

☒ Agent
☐ Addressee

B. Received by (Printed Name)

Murphy

C. Date of Delivery

01/26/26

D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service 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 | |

Mail Restricted Delivery

Domestic Return Receipt

Case 1:26-cv-00091-ADA-SH

Document 11

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SCREENED BY CSO'S

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

United States
Postal Service

RECEIVED

• 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

FEB 04 2026

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

26-cv-91