



Harvest Hub Meal Box Distribution Event Receipt

Updated July 24, 2025

Date:

Funding Source:

F124N - HERC

Name:

Item(s) Received:

(1) Harvest Hub Meal Box
(a) (Contents may vary.)

Signature:

Waiver of Liability:

Initial

I agree to the posted waiver and release of liability.

Program Officer:

Program Officer Signature:



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garretthealth.org

Toll Free Maryland Department of Health 1-877-463-3464
TDD for Disabled Maryland Relay Service 1-800-735-2258
Equal Opportunity Employer