

**Dane County
Department of Human Services**

1202 Northport Drive, Madison WI 53704



PARENTNAME
PARENTNAME2
1234 STREETNAME AVE
STOUGHTON WI 53589

BIRTH TO 3 PROGRAM STATEMENT

Account # 0012-345678

CHILD NAME

STATEMENT DATE: 01/15/2026

CALCULATING YOUR ACCOUNT BALANCE

OPENING STATEMENT BALANCE	\$0.00
Payment(s) - Thank you	(150.00)
Fee Adjustments / Refunds:	-
BALANCE CARRIED FORWARD	(150.00)
JANUARY PARENTAL COST SHARE:	225.00
ACCOUNT BALANCE	\$225.00

PARENTAL COST SHARE

When a family has a child in the Birth to 3 Program, the county is required to assess the family's ability to contribute toward the cost of these services. This is known as the Parental Cost Share.

MAJOR FAMILY CHANGES?

The Parental Cost Share may change when there are major changes to your family such as more or less income, the birth of a child or enrollment of the child in another DHS program with a Parental Cost Share (such as the Children's Long-Term Support Program).

Talk to your service coordinator about any major changes to determine whether it affects your parental cost share.

Questions?

If you have questions regarding your statement, please reach out to your service coordinator or by emailing:

bt3.billing@danecounty.gov

ACCOUNT ACTIVITY

Trans Date	Post Date	Payment Type	Payment Description	Amount
12/19/25	01/15/26	CHECK		(\$150.00)

CHILD: CHILD NAME

Make checks payable to:

AMOUNT DUE: \$225.00

Dane County Department Human Services

DUE DATE: 02/04/2026

Indicate for Address Change

PROGRAM BT3

ACCOUNT #: 0012-345678

AMOUNT PAID: _____

Dane County accepts ONLINE PAYMENTS:

<https://danecountyhumanservices.org/collectionspayments>

Enter Dane County account # for online payment:

0012-345678

