

# Wake County Quality Supplements Parent Fee Documentation

[wakeQS@childcareservices.org](mailto:wakeQS@childcareservices.org) or 919-314-6853



Use the chart below to provide information regarding the on-going collection of parent fees from families receiving subsidies through Wake County Human Services (WCHS). Please report parent fees collected per family over the last three months. Additional lines should be added to the chart, if needed. Once complete, sign and date the form prior to returning to the Quality Supplements Program. Forms can be returned by one of the following:

- Scan and email to [wakeQS@childcareservices.org](mailto:wakeQS@childcareservices.org)
- Fax to the attention of the Quality Supplements Program at 919-403-6959
- Mail to:  
Child Care Services Association  
Attn: Wake Co. Quality Supplements  
1201 S. Briggs Ave, Ste 200  
Durham, NC 27703

Parent Last Name	# of Children on Wake Subsidy	Age Group(s) of Child(ren)	Monthly Parent Fee	Time Period	Total Payment Collected	Additional Notes
Example Family 1	2	1 Infant, 1 Toddler	\$100.00	April 2015-June 2015	\$300	
Example Family 2	1	Preschool	\$250.00	February 2015-April 2015	\$500	Voucher ended April 30th

By signing below I certify that the information provided is accurate to the best of my knowledge and that the above parent fees have been collected from families with WCHS child care subsidy vouchers, as specified. I understand that the Quality Supplements Program may request receipts to support the above listed payments for the purpose of monitoring on-going eligibility requirements.

Name & Title (Print) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Program Name \_\_\_\_\_

License # \_\_\_\_\_

Office use- Documents Rcvd: \_\_\_/\_\_\_/\_\_\_ By: \_\_\_\_\_ QSDB Documented \_\_\_/\_\_\_/\_\_\_ By: \_\_\_\_\_