## 2022 MICHIGAN Home Heating Credit Claim MI-1040CR-7 Supplemental

Issued under authority of Public Act 281 of 1967, as amended.

INSTRUCTIONS: Complete if you have more than four (4) household members and include with your Form MI-1040CR-7.

. Filer's First Name	M.I. Last Name			2. Filer's Full Social Security No. (Example: 123-45-6789)			
	"""	W.I. Last Name		2.1 lief 3 f uli docial decurity No. (Example: 123-43-0703)			
You MUST enter below the name, So already listed on MI-1040CR-7, line	ocial Securit	y number and age of al	Il household m	nembers	(except for filer a	nd spouse) who are not	
U.S. citizen or qualified alien.	17. Tou Wo	or also check each box	to mulcate ii	lile flous	seriola member is	a dependent and	
					D. Enter "X" for all that apply		
A. Household Member's Name	B. Social Security Number		C. Age in Y	ears/	Dependent	U.S. citizen or qualified a	