## 2023 MICHIGAN Home Heating Credit Claim MI-1040CR-7 Supplemental <br> 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.
Type or print in blue or black ink.
Attachment 08A

| 1. Filer's First Name | M.I. | Last Name | 2. Filer's Full Social Security No. (Example: 123-45-6789) |
| :--- | :--- | :--- | :--- |

3. You MUST enter below the name, Social Security number and age of all household members (except for filer and spouse) who are not already listed on MI-1040CR-7, line 17. You MUST also check each box to indicate if the household member is a dependent and U.S. citizen or qualified alien.

| A. Household Member's Name | B. Social Security Number | C. Age in Years | D. Enter "X" for all that apply |  |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  | Dependent | U.S. citizen or qualified alien |
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