



Doc#: 1515241028 Fee: \$42.00
RHSP Fee: \$9.00 RPRF Fee: \$1.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 06/01/2015 10:00 AM Pg: 1 of 3



ATTORNEYS'
TITLE
GUARANTY
FUND,
INC.

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JOINT TENANCY AFFIDAVIT

STATE OF ILLINOIS
COUNTY OF COOK

MARY MATTICK hereby referred to as the affiant, states under oath that the affiant resides at 208 Grovenor in the Village of Schaumburg, State of Illinois; that the affiant was acquainted with JEFFREY P. MATTICK, the decedent; at the time of death, the decedent was one of the owners of property, by virtue of a properly recorded joint tenancy deed, said property located in Cook County, State of Illinois, and legally described as follows:

LOT 9 IN BLOCK 2 IN N.O. SHIVELY AND COMPANY'S HIGHVIEW ADDITION, BEING A SUBDIVISION OF THE NORTH 1/2 OF THE SOUTHWEST 1/4 OF SECTION 34, TOWNSHIP 41 NORTH, RANGE 10, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

07-34-306-007-0000
1675 MARION
SCHAUMBURG ILL 60193
Y
3
N
K

The decedent had no interest in any business or partnership, nor held any power of appointment at death, nor created any remainder interests in property by transfer with retention of a life interest therein or the creation of interests to take effect in possession or enjoyment after death;

The decedent died on February 25, 2010, leaving a last will and testament;

The total value of decedent's estate, including the taxable interest in the above property was \$ 100,000, and the value of the above property individually was \$ 100,000;

The State and Estate/Inheritance Tax and the Federal Estate Tax, if any, that was due from the decedent's estate, has been paid in full;

The affiant makes this affidavit to induce Attorneys' Title Guaranty Fund, Inc., (ATG®) to issue its policy of title insurance on the above described property.

Attorneys' Title Guaranty Fund, Inc.
150 North Dearborn Street, Suite 200
Chicago, IL 60610-6650
Attention: Claims Department

UNOFFICIAL COPY

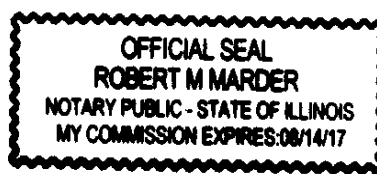
The affiant hereby covenants and agrees, individually, and for the affiants, heirs, personal representatives or assignees, to forever fully indemnify, protect, defend and hold ATG harmless and to reimburse ATG for all loss, costs, damages, suits, attorney's fees, and expenses of every kind and nature that ATG may suffer, expend, or incur by reason of the issuance of said policy, free and clear of the following objections:

1. Claims against the estate of JEFFREY P. MATTICK, the decedent;
2. State Estate/Inheritance Tax and Federal Estate Tax that may be charged against the estate of said decedent;
3. Legacies, if any, created by the will of said decedent;
4. Rights of contribution.

Jeffrey P. Mattick (Seal)
 _____ (Seal)

Subscribed and sworn to before me this

21st day of MAY, 2015
 Day Month Year
Robert M. Marder
 Notary Public



Note: If the decedent left a will, it will be necessary that the original or certified copy thereof be presented to ATG for inspection. A death certificate, together with evidence of payment of death taxes, if any, should accompany this affidavit.

This instrument prepared by:
Marder & Seidler, Ltd.
 Name
1076 S. Roselle Road
 Address
Schaumburg, Illinois 60193
 City, State, Zip

Return to:
Marder & Seidler, Ltd.
 Name
1076 S. Roselle Road
 Address
Schaumburg, Illinois 60193
 City, State, Zip

UNOFFICIAL COPY

CERTIFICATION OF DEATH RECORD

CHICAGO, ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2010 0016109		DATE ISSUED 03/02/2010	
DECEDENT'S LEGAL NAME JEFFREY P. MATTICK		SEX MALE	DATE OF DEATH FEBRUARY 25, 2010
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 51 YEARS	DATE OF BIRTH JULY 05, 1958	
CITY OR TOWN SCHAUMBURG		HOSPITAL OR OTHER INSTITUTION NAME 208 E GROVENOR	
PLACE OF DEATH DECEDENT'S HOME			
BIRTHPLACE CHICAGO, IL	SECURITY NUMBER	MARITAL STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE'S NAME MARY ABBATE
EVER IN U.S. ARMED FORCES? NO			
RESIDENCE 208 E GROVENOR	APT. NO.	CITY OR TOWN SCHAUMBURG	INSIDE CITY LIMITS? YES
COUNTY COOK	STATE IL	ZIP CODE 60193	FATHER'S NAME THOMAS MATTICK
MOTHER'S NAME PRIOR TO FIRST MARRIAGE HELEN JAWORSKI			
INFORMANT'S NAME MARY MATTICK		RELATIONSHIP WIFE	MAILING ADDRESS 208 E GROVENOR, SCHAUMBURG, IL, 60193
METHOD OF DISPOSITION BURIAL	PLACE OF DISPOSITION SAINT MICHAEL THE ARCHANGEL CEMETERY	LOCATION - CITY OR TOWN AND STATE PALATINE, IL	DATE OF DISPOSITION MARCH 01, 2010
FUNERAL HOME SALERNO'S ROSEDALE CHAPELS, 450 WEST LAKE STREET, ROSELLE, IL, 60172			
FUNERAL DIRECTOR'S NAME JOSEPH G SALERNO		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034010202	
LOCAL REGISTRAR'S NAME DAVID ORR		DATE FILED WITH LOCAL REGISTRAR MARCH 1, 2010	
CAUSE OF DEATH PART I. METASTATIC RENAL CELL CARCINOMA			
IMMEDIATE CAUSE (Final disease or condition resulting in death)		Due to (or as a consequence of):	18 MONTHS
		Due to (or as a consequence of):	
		Due to (or as a consequence of):	
		Due to (or as a consequence of):	
PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I.			WAS AN AUTOPSY PERFORMED? NO
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A
DID TOBACCO USE CONTRIBUTE TO DEATH? UNKNOWN	FEMALE PREGNANCY STATUS NOT APPLICABLE	MANNER OF DEATH NATURAL	
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY	INJURY AT WORK?
LOCATION OF INJURY			
DESCRIBE HOW INJURY OCCURRED:			IF TRANSPORTATION INJURY, SPECIFY:
ATTEND THE DECEASED? YES	DATE LAST SEEN ALIVE JANUARY 18, 2010	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED
TIME OF DEATH 12:20 PM			
CERTIFIER PHYSICIAN			DATE CERTIFIED FEBRUARY 26, 2010
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH JOSEPH CLARK, 2160 S 1ST AVENUE, MAYWOOD, ILLINOIS, 60153			PHYSICIAN'S LICENSE NUMBER 036083048

This is to certify that this is a true and correct copy from the official death record filed with Illinois Department of Health.



David Orr
David Orr
Cook County Clerk

