

Confederate Veteran Grave Registration Form

(Please Print Legibly)

(Revised December 2006)

* **Name of Soldier Last** Kincaid **First** Cephas **Middle** G **Suffix** _____

* **Rank** Pvt **Company** I **Regiment** 11th NC Infantry (Bethel) Regiment **State** NC

Branch Army

Enlistment Date 7/4/1863 Discharge Date 3/30/1865

Month Day Year

Month Day Year

Condition of Discharge POW exchange—"swallowed the dog"

Other Wars _____

Birth Date 3/17/1845 City _____ County _____ State NC

Month Day Year

Death Date 5/28/1919 City Douglas County Cochise State AZ

Month Day Year

Age at Death 74 years

Months Days Years

* **Cemetery Name** Calvary **GPS** _____ * _____ N/ _____ * _____ W

* **City** Douglas **County** Cochise **State** AZ

Plot # F Row 13 Section 8

Inscription/epitaph _____

Private Headstone? Yes Veterans Stone? No Iron Cross of Honor? No

Foot Stone? No Flag Holder? No

Reference (Source of Military service) Film number M380, roll 8 National Archives

Spouse Maiden Name _____ First _____ Middle _____

Date of Birth _____ City _____ County _____ State _____

Month Day Year

Marriage Date _____ City _____ County _____ State _____

Month Day Year

Date of Death _____ City _____ County _____ State _____

Month Day Year

Age at Death _____

Months Days Years

Inscription/epitaph _____

2nd Spouse _____ 3rd Spouse _____

Name of Children _____

Name and Address of Known Living Descendents (only two)

No known descendants

* **Indicates mandatory fields**

* **Name of Individual Filing Data:**

Last Griffin First Robert Middle S Suffix _____

Address 921 Madrid St City Douglas State AZ ZIP 85607

E-Mail dixieforever@hotmail.com

State/Division, Name, and Number of SCV Camp (If Applicable) Arizona Division, Confederate Secret Service

Camp 1710

Date Filed 3/24/09