

Confederate Veteran Grave Registration Form

(Please Print Legibly)

(Revised December 2006)

* **Name of Soldier Last** Unknown #1 **First** Unknown **Middle** _____ **Suffix** _____
* **Rank** Private **Company** A **Regiment** Baylor's Reg't, Arizona Rangers **State** AZ
Branch Army

Enlistment Date _____ Discharge Date 5 May 1862
Month Day Year Month Day Year

Condition of Discharge Killed in action in battle with Chiricahua Apaches at Dragoon Springs Stage Station
Other Wars Unknown

Birth Date _____ City _____ County _____ State _____
Month Day Year

Death Date May 5, 1862 City Dragoon Springs County Cochise State Arizona
Month Day Year

Age at Death _____
Months Days Years

* **Cemetery Name** Dragoon Springs **GPS** _____ * _____ N/ _____ * _____ W
* **City** _____ **County** Cochise **State** AZ

Plot # _____ Row _____ Section _____
Inscription/epitaph _____

Private Headstone? No Veterans Stone? No Iron Cross of Honor? Yes
Foot Stone? _____ Flag Holder? Yes

Reference (Source of Military service) _____

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) _____

* **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 3/29/09