

Confederate Veteran Grave Registration Form

(Please Print Legibly)

(Revised December 2006)

* **Name of Soldier Last** Wade **First** Thomas **Middle** Benton **Suffix** _____
* **Rank** Pvt. **Company** G **Regiment** 11 (Holman's) Cav **State** TENN

Branch _____
Enlistment Date unknown Discharge Date unknown
Month Day Year Month Day Year

Condition of Discharge _____
Other Wars _____

Birth Date 04-16-1845 City _____ County _____ State West VA.
Month Day Year

Death Date 10-03-1916 City Humboldt County Yavapai State AZ
Month Day Year

Age at Death 71
Months Days Years

* **Cemetery Name** Citizen's Cemetery **GPS** _____ * _____ N/ _____ * _____ W

* **City** Prescott **County** Yavapai **State** AZ

Plot # _____ Row _____ Section _____

Inscription/epitaph Thomas B. Wade 1845-1916

Private Headstone? yes Veterans Stone? no Iron Cross of Honor? no

Foot Stone? no Flag Holder? no

Reference (Source of Military service) Soldiers Sailors website

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 Garrison First Kenneth Middle Basil Suffix _____

Address 3850 N Civic Dr. NE # 7230 City Prescott Valley State AZ ZIP 86314

E-Mail Chris@jackanddicks.kscoxmail.com

State/Division, Name, and Number of SCV Camp (If Applicable) Arizona Division -

C.W. Lucas - Forrests Escort Camp # 2316

Date Filed 04-22-09