

Graves Survey Summary # 571

Cemetery Information*

Name: Sullivan | Date: 11/4/13

Condition: E: Excelent | G: Good | F: Fair | P: Poor
 V: Very Poor

Size: 1: 1-10 Plots | 2: 11-50 Plots | 3: 51+ Plots

Country: USA | City: Sullivan

County: Hunt | State: Texas

Location & Directions:

Survey Team Roster

1. David Moe
 2.
 3.
 4.
 5.
 6.
 7.
 8.
 9.
 10.

Vol NO:	III
Page No:	36
Cem No:	571

Photos | Biographical File | Unit File

Graves Survey Totals

Marked Confederate	2
Marked Union	0
Able Bodied Men	0
I.D. Confederate	0
I.D. Union	0
Total Confederate	2
Total Union	0
Non-Veteran	0
Total Graves Surveyed	2
Total Veterans	2

Confederate Graves Survey

Cem No: 571

<input checked="" type="checkbox"/> Confederate	<input type="checkbox"/> Federal	<input type="checkbox"/> Able Bodied Male	Date: 11-4-13
Cemetery: Sullivan	City: Sullivan	County: Hunt	State: Texas

Name	Birth	Death	Type	Cond.	Military Unit - Remarks
Sullivan, Patrick	1818	1895		F	Co D. 2 Tex. Cav.
Wife:					Maiden Name:
Mother:					Maiden Name:
Rucker, Edmund T.	—	1885		F	Co E. 12 Ms. Cav.
Wife:					Maiden Name:
Mother:					Maiden Name:
Wife:					Maiden Name:
Mother:					Maiden Name:
Wife:					Maiden Name:
Mother:					Maiden Name:
Wife:					Maiden Name:
Mother:					Maiden Name:
Wife:					Maiden Name:
Mother:					Maiden Name:
Wife:					Maiden Name:
Mother:					Maiden Name:

Marker Type: C=Confederate, M=Marble, G=Granite, B=Bronze, L=Limestone

Marker Condition: G=Good, F=Fair, P=Poor

Sons of Confederate Veterans Confederate Grave Registration Form

Items marked with a * are required

Cemetery Name* Sullivan Cem City Sullivan County* Com Hunt State* Tx

Name of Veteran: First Edmund AKA _____ Middle T Last* Rucker Suffix _____

Enlistment Date _____ Discharge Date _____

Reference(source of military service)* Tom B Strom

Rank _____ Ordinal 12th State Mrs Unit Type CAV Company E

Unit AKA _____

Born Date UNK City _____ County _____ State _____

Died Date 1885 City Sullivan County Hunt State Tx

Cemetery Space _____ Lot _____ Block _____ Marker Type _____

Unit on Marker(Y/N) _____ Last Seen(Yr) 2013 Condition(Good/Fair/Poor) Fair

Name of Wife: First _____ Maiden _____ Mother's Maiden _____

Wife Born(place and date) _____

Married When _____ Where _____

Names of Children _____

Names and Addresses of Known Living Descendants _____

Notes _____

Submitter Full Name* Davis Noe

Submitter Email dnoe@waymark.net

Submitter Phone Number* 214 548-7766

SCV ID# 16028

Other Affiliation _____

Mail to: Andrea Prouse, 27 Enchanted Oaks St, Orange, TX 77630; or email to meowmom@gt.rr.com

Sons of Confederate Veterans Confederate Grave Registration Form

Items marked with a * are required

Cemetery Name* Sullivan City Sullivan County* Hunt State* Tx

Name of Veteran: First Patrick AKA _____ Middle _____ Last* Sullivan Suffix _____

Enlistment Date _____ Discharge Date _____

Reference(source of military service)* Tombston

Rank _____ Ordinal 2nd State Tx Unit Type COV Company D

Unit AKA _____

Born Date 1818 City _____ County _____ State Ireland

Died Date 1895 City Sullivan County Hunt State Tx

Cemetery Space _____ Lot _____ Block _____ Marker Type _____

Unit on Marker(Y/N) _____ Last Seen(Yr) 2013 Condition(Good/Fair/Poor) Fair

Name of Wife: First _____ Maiden _____ Mother's Maiden _____

Wife Born(place and date) _____

Married When _____ Where _____

Names of Children _____

Names and Addresses of Known Living Descendants _____

Notes Immigrated to Republic of Tx in late 1830s - was a Texas Ranger in the Republic

Submitter Full Name* Jay We days

Submitter Email and@waymark.net

Submitter Phone Number* 214-548-7766

SCV ID# 16028

Other Affiliation _____

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