

ARMED FORCES GRAVES REGISTRATION RECORD

BREMER COUNTY

This Record Filed by Soldiers Relief Commission

RECORD No.

County Bremer War Served in Civil

Full Name of Deceased Temple William Henry
(Last) (First) (Middle)

Age Nearest Birthday 77 Race White

Last Known Address Waverly Ia. Bremer
(City or Town) (State) (County)

(Street Number, Etc.)

Place of Death Waverly Ia. Date of Death Mar 14 1919

Place of Burial Bremer Waverly Washington
(County - City - Town or Township)

Name of Cemetery Harlington Block 9 lot 16 grave 4
Grave Location (Section, Lot and Block No.)

Date of Burial

Father of Deceased
(Name and Address)

Mother of Deceased
(Name and Address)

Wife or Husband Helen Martin
(Name and Address)

Other Blood Relatives Son Maude of Waverly Ia. and John Temple of Bodega
(Name and Addresses)

Membership Veterans Organizations G.A.R. Robbins Post 256 Waverly Ia.
(Names and Year)

Serial Number in Armed Forces

Rank at Time of Discharge Pvt.

Birth of Deceased, Date 1842 Place Heath Mass.

Induction into Armed Forces, Date 10-11-62 Place Mass.

Discharged from Armed Forces, Date June 11 1863

Place Discharged New Orleans Ia.

Branch of Armed Forces Inf.

Organization Served with Co. B. 52 Mass Vol. Inf.

Type of Discharge Disability

Remarks: Wounded and Disabled for disability served under Capt. A.P. Nolsons Co. B.

Registered by Franks Sturdevant Waverly Ia.

Enlisted at 19 years. Belonged to A.P. Nolson's Co. B. 52 Mass. Inf.
 Discharged for disability after serving 7 months and 19 days.
 married Mary Martin. Enlisted Aug. 27 1862 Dis. disability June 1st. at New Orleans
 His wife Helen Martin was a Dau. of Mrs. and Mrs Eben Martin of Tripoli. He was
 Married in Waverly Ia. 8-29-1865 For a short time he went to Mass. to live but
 returned again to Waverly Ia. Celebrated their Golden Wedding here 8-23-1915
 It was also her birthday. To them born 2 sons Claude deceased in Waverly 1935
 and James Editor of the Bode Bugle of Bode Ia.

Place of Birth _____
 Date of Birth _____
 Nature of Disability _____
 Month of Discharge _____
 Who he Served For _____
 Other Special Services _____
 Membership Veterans Organization _____
 Social Number in Armed Forces _____
 Rank in Time of Discharge _____
 Date of Discharge _____
 Institution into Armed Forces _____
 Discharged from Armed Forces _____
 From Discharged _____
 Branch of Armed Forces _____
 Description Service with _____
 Type of Discharge _____
 Remarks _____
 Signature _____
 Date _____