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## Leave Summary

**Name:** Komakech Tom

**Email:** ktom@gmail.com

**Program:** Dry land cereals program

Leave Type	Start Date	End Date	Leave Days	Remaining Days	HR Status	Director Status	HR Reason	Director Reason
Annual	2025-10-08	2025-10-22	10.00	20	approved	approved		

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## Approvals

### ROLE

Program Leader

HR

Director

### NAME

Kato Mukalazi

Katooko Sylvia

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