

**Extended Family (3 Days)** 

# Leave Requests

003280

Name	End Date
Lenard Comber	2023-05-05
Туре	Hours
Bereavement	35.00
Start Date	Format
2023-05-01	Deducted

# Immediate Family (5 Days)

Siblings (In Laws)

# Notes

Brother passed.

## Status

Approved

#### Authorized Signature

Bonnie MacDonald