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| **INFORMACIÓN AL:** |  |  |  |

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| **ÓRGANO:** |  | **ÁREA ADMINISTRATIVA:** |  |

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| **NOMBRE** | CATEGORÍA | **ÁREA DE ADSCRIPCIÓN** | TIPO | | | | MOTIVO | PERIODO | | OBSERVACIONES |
| **LICENCIA** | | INCAPACIDAD | COMISIÓN |
| **CON GOCE** | **SIN GOCE** | DEL | AL |
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