

FACSIMILE

TO: MABEL Survey Manager
ORGANISATION: Melbourne Institute of Applied Economic and Social Research
FAX NO: 03/ 8344 2111
DATE:
SUBJECT: **MABEL Survey:**

- **Request for replacement survey or different doctor-type survey from the one received; and/or**
- **Address-change notification**

MABEL Username id:
(Please ensure you provide username id or else we cannot process your request)

Name: (Provide **ONLY** if you cannot locate your username id)

- **Please mail me a MABEL survey for the type of doctor specified below:**
 - General Practitioner & GP Registrar
 - Specialist
 - Hospital Doctor Not Enrolled in a Specialty Training Program (Interns & Medical Officers)
 - Doctor Enrolled in a Specialty Training Program
- **Change of mailing address:** (Only if different from your current mailing address held by AMPCo).
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Change-of-address and doctor-type information supplied above will be forwarded to the Australasian Medical Publishing Company (AMPCo). You can also contact AMPCo directly to notify them of a change of contact details: Tel. 02 9562 6666 or www.ampc.com.au.

