

FACSIMILE

TO:

ORC	GANISATION:	Melbourne Institute of Applied Economic and Social Research
FAX	NO:	03/ 8344 2111
DAT	E:	
SUB	JECT:	 MABEL Survey: Request for replacement survey or <u>different</u> doctor-type survey from the one received; and/or Address-change notification
		id:ovide username id or else we cannot process your request)
Nan	ne: (Provide ONL	Y if you cannot locate your username id)
•	Please mail me	e a MABEL survey for the type of doctor specified below:
	General Practiti	oner & GP Registrar
	Specialist	
	Hospital Doctor Officers)	r Not Enrolled in a Specialty Training Program (Interns & Medical
	Doctor Enrolled in a Specialty Training Program	
•	Change of mailing address : (Only if different from your current mailing address held by AMPCo).	
Medi	cal Publishing Con	doctor-type information supplied above will be forwarded to the Australasian npany (AMPCo). You can also contact AMPCo directly to notify them of a s: Tel. 02 9562 6666 or www.ampco.com.au.

MABEL Survey Manager

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