



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 a different doctor-type survey

PAGES: 1

FROM:

MABEL Username id:

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

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 (Specialist Registrar)

Name: (**Only** if you cannot locate your username id).....

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). Alternatively you can contact AMPCo directly to notify them of your change of mailing address or other contact details: Tel: 02 9562 6666 or: www.ampco.com.au