



## VOTING PREFERENCE ASSOCIATIONS

**PLEASE USE BLOCK LETTERS**

I wish my formal vote for the election of members  
to the Association Executive Committees to go to the  
Association I have nominated below.

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NAME

**TICK ONE BOX ONLY**

- Australian Gastrointestinal Endoscopy Association
- Australian Liver Association
- Australian IBD Association

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Signature

\_\_\_\_\_/\_\_\_\_\_/2009  
Date

**Please complete and return this form to:**

PO Box 508  
Mulgrave VIC 3170

or

**Fax:** 03 9807 2960

or

**Email:** gesa@gesa.org.au