

FACSIMILE FORM

PRIORITY

CLASSIFICATION

TELEFAX CODE AND NUMBER
(011) 484-0982

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TO:	Dr Sevel and Colleagues
ATTENTION:	The Headache Clinic
INFO:	
FROM:	René Channer

FILE REF NO.:	
DATE:	September 5, 2000
COPY:	OF
Your Ref:	

SUBJECT:	Account No. 014031
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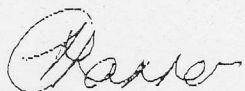
I would really like to say thank you!

I am truly amazed but I feel a totally different person. Headaches/migraines became a part living but are now almost a memory.

I only wished I had the courage to attend your clinic when I first heard about it but we are always so skeptical.

Many thanks!

Regards



René Channer