



**SOLVE-IT!**  
**COMMUNITY MEDIATION SERVICE**  
A PROGRAM OF THE LEADERSHIP CENTRE

450 W. 4<sup>TH</sup> PLACE, MESA AZ 85201 \* (480) 420-MED8  
WWW.THELEADERSHIPCENTRE.ORG

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**INTAKE INFORMATION - Requestor**

*Please Print*

DATE: \_\_\_\_\_

YOUR NAME(S): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

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CONTACT INFORMATION:

HOME ( ) \_\_\_\_\_ MOBILE ( ) \_\_\_\_\_

WORK ( ) \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

BRIEF SUMMARY OF THE DISPUTE:

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ADDRESS OF PARTY(IES) YOU ARE INVITING TO MEDIATION (please make note of EACH party that you would like us to contact or copy on correspondence)

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Have you attempted to work out solutions with the other party(ies)? Yes  No

Are you willing to participate in mediation to resolve this dispute? Yes  No

**Please remit this form, along with your nonrefundable case intake fee, to:**

Solve-It! Community Mediation Service  
450 W. 4<sup>th</sup> Place  
Mesa, AZ 85201  
Tel: 480-420-MED8 (6338)  
Email: wendyh@theleadershipcentre.org

**\*\*PLEASE MAKE CHECKS PAYABLE TO "THE LEADERSHIP CENTRE"\*\***