EXHIBIT "E"

LIMITED POWER OF ATTORNEY

Know all men by these presents, that I, _____, a resident of _____, _____ County, State of _____, do hereby appoint _____, of _____, City of _____, State of _____, to be our true and lawful attorney-in fact with full power in our name and stead for and on our behalf to represent _____ _____ before the Zoning and Annexation Committee and/or the Common Council of the City of South Bend, Indiana, for the purpose of representing us on the pending zoning petition and to answer any and all questions thereon.

I hereby ratify all that my said attorney-in-fact shall lawfully due or cause to be done by virtue hereof.

In Witness Whereof, I have hereunto set my hand and seal this _____ day of _____, 20____.

_____
Signature

STATE OF _____)
)SS:
_____ County)

Before me, the undersigned, a Notary Public in and for said County and State, came _____, and acknowledged the execution of the above Limited Power of Attorney.

Witness my hand and official seal this _____ day of _____, 20____.

My Commission Expires:

_____

_____
Signature

_____
Printed Name of Notary Public

Resident of _____ County

(Seal)