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JAN 11 2008

NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS)

(Please read the instructions before completing.)

COMMISSION ON ETHICS

17826

PERSONAL INFORMATION:

Form with fields: NAME: Kim Toulouse, ADDRESS: 70 Lemming Drive, CITY, STATE, ZIP: Reno, NV 89523, TELEPHONE: 775-345-0828, LENGTH OF RESIDENCE IN NEVADA: 48 years, LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE (NRS 281A.620(1)(a)): 14 years, E-MAIL: aquaticpt@charter.net

SECTION A (Public Office): List all public offices for which this financial disclosure statement is required [NRS 281A.620.1(g)] and check each box accordingly i.e. annual, candidate or appointment filing:

- ANNUAL all elected and appointed public officers (no later than Jan. 15 each year)
CANDIDATE (no later than the 10th day after the last day to qualify as a candidate)
APPOINTMENT to fill unexpired term of an elected or appointed public officer (within 30 days)

Table with columns: Public Office, Elected, Appointed or Appointed to Elective (E, A or A/E), Annual Compensation, Term or Date Appointed, ANNUAL NRS 281A.600.1(b) 281A.610.1(b), CANDIDATE NRS 281A.610.1(a), APPOINTMENT NRS 281A.600.1(a)

SECTION B (Sources of Income): List each source of your income (including any source listed in Section A), or that of any member of your household who is 18 years of age or older. [NRS 281A.620.1(b)]:

Table with columns: Source of Income, Self, Household Member. Includes entries for State of Nevada and Spouse, self employed.

SECTION C (Real Property): List specific location and particular use of all real estate (other than personal residence): (1) in which you or a member of your household has a legal or beneficial interest; (2) the fair market value of which is \$2,500 or more; and (3) located in this state or an adjacent state [NRS 281A.620.1(c)]:

Table with columns: Specific Location, Particular Use. Includes entry for 3220 Mule Ear Rd, Chilcoot, CA with Particular Use: Vacation Cabin.

Kim Toulouse

**Print Name of Public Officer**

**SECTION D (Creditors):** List each creditor to whom you or a member of your household owes \$5,000 or more [EXCEPT: (1) debt secured by mortgage or deed of trust on real property which is not required to be listed in Section C above; and (2) debt for which a security interest in a motor vehicle for personal use was retained by seller] [NRS 281A.620.1(d)]:

	Self	Household Member
Bank of America	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
USAA Insurance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

**SECTION E (Gifts):** List the identity of donor and value of each gift of all gifts received in excess of an aggregate value of \$200 from a donor during the preceding taxable year [EXCEPT: (1) a gift received from a person who is related to you within the third degree of consanguinity or affinity; and (2) ceremonial gifts received for a birthday, wedding, anniversary, holiday or other ceremonial occasion if the donor does not have a substantial interest in your legislative, administrative, or political action] [NRS 281A.620.1(e)]:

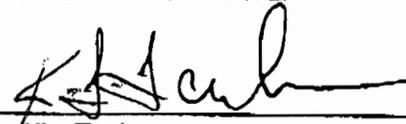
Donor	Gift	Value of Gift
		\$
		\$
		\$
		\$

**SECTION F (Business Entities):** List each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust joint venture, syndicate, corporation or association) with which you or a member of your household is involved as a trustee, beneficiary of a trust, director, officer, owner in whole or in part, limited or general partner, or holder of a class of stock or security representing 1% or more of the total outstanding stock or securities issued by the business entity [NRS 281A.620.1(f)]:

	Self	Household Member
Aquatic Physical Therapy of Nevada	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

**THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.**

Date: 1/11/08

Signature:   
 Print name: Kim Toulouse

**FILE COMPLETED FORM WITH:**

Appointed Public Officers  
 Nevada Commission on Ethics  
 3476 Executive Pointe Way, Suite 10  
 Carson City, Nevada 89706  
 775.687.5469 • 775.687.1279 fax

Elected Public Officers and Candidates for Public Office  
 Nevada Secretary of State, Elections Division  
 101 North Carson Street, Suite 3  
 Carson City, Nevada 89701  
 775.684.5705 • 775.684.5718 fax