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**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

Governmental Ethics Commission
901 S. Kansas Avenue
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
ethics.kansas.gov

This is an (Check one) Initial Appointment Amended Statement

Candidate Candidate Name: **Echo E Van Meteren**
Address: **12400 170th ST**
Address2:
City: **Linwood** Zip: **66052**
Home Phone: Business Phone: Cell Phone: **(913) 683-4939**
County: **Leavenworth** Email Address: **echo@echoforkansas.com**
Office Sought: **State Senator** District No.: **3**

Treasurer Date Appointed: **01/02/2018**
Treasurer Name: **Kristian Van Meteren**
Address: **12400 170th St**
Address2:
City: **Linwood** State: **KS** Zip: **66052**
Home Telephone: Business Phone: Cell Phone: **(913) 307-6720**
Email Address: **vanmeteren@yahoo.com**

Candidate Committee Date Appointed:
Chairperson's Name:
Address:
Address2:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

Date Appointed:
Treasurer's Name:
Address:
Address2:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:

Email Address:

I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.

Executed on:
Date: **1/2/2018 4:34:43 PM** Signature of Candidate: **Echo Van Meteren**

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Address2:
City: **Linwood** Zip: **66052**
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County: **Leavenworth** Email Address: **echo@echoforkansas.com**
Office Sought: **State Senator** District No.: **3**

Treasurer Date Appointed: **07/24/2016**
Treasurer Name: **April Latham**
Address: **15405 Robinson Street**
Address2:
City: **Overland Park** State: **KS** Zip: **66223**
Home Telephone: Business Phone: Cell Phone: **(785) 330-3762**
Email Address: **april@echoforkansas.com**

Candidate Committee Date Appointed:
Chairperson's Name:
Address:
Address2:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

Date Appointed:
Treasurer's Name:
Address:
Address2:
City: State: Zip:
Home Telephone: Business Phone: Cell Phone:
Email Address:

I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.

Executed on:
Date: **7/24/2016 8:42:44 AM** Signature of Candidate: **Echo E Van Meteren**

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