

Fundraiser Compensation Plan—Checklist **DRAFT 9/10/2023 RR**

It is the mission of the National Association of Women's Gymnastics Judges to provide professional development for its members and to support and promote women's gymnastics in the United States.

Estimated net revenue from fundraiser (Income – Expenses): \$ _____

Which state/region? _____ Date of board meeting: ____/____/____

Who from state NAWGJ committee meeting attended? _____

Estimated expenditures from the net revenue:

1. Cost of running office:

- a. Supplies, 25% max internet for assigner/max 25% phone \$ _____
- b. Required NAWGJ meeting travel costs (meals, hotel, flights) \$ _____
- c. Cost to attend affiliated meetings (USAG, AAU, etc.) \$ _____

2. Reimbursement for judges working the fundraiser (receipts required)

Criteria used¹:

- a. NAWGJ Dues \$ _____
- b. Clinics \$ _____
- c. Books, uniforms \$ _____
- d. Reimburse travel/hotel/pay fee for those judging fundraiser \$ _____
- e. Other (describe) \$ _____

3. Reimbursement for ALL State NAWGJ members:

- a. NAWGJ Dues \$ _____
- b. Clinics \$ _____
- c. Books, uniforms \$ _____
- d. Other (describe) \$ _____

4. Donation to Helping Hands \$ _____

5. Send judges/teams to NAWGJ National Judges' Cup \$ _____

6. Monies held in reserve for recertification/NAWGJ Symposium \$ _____

7. Other (describe) \$ _____

TOTAL ESTIMATE EXPENDITURES: \$ _____

Approved by RJD: _____ Date: _____

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1 Examples of criteria for judges working the fundraiser: NAWGJ member in good standing, CPE done, hours worked at Judge's Cup, number of competitions judged, hours volunteering at other NAWGJ events, judge's rating. Note that all judges must have opportunity to participate in the fundraiser.

References:

[NAWGJ-Finance-Committee-Finance-Director-Report-for-SJD-Meeting-July-2023.pdf](#)

(See the FAQ portion of this PowerPoint)

[Microsoft Word - Expenditure Suggestions Update March 4.docx \(nawgj.org\)](#) This lists the kinds of expenses a NAWGJ account can pay for.

Other comments:

Approved by RJD: _____ Date: _____