Edgar Filing: SIMONS DOYLE R - Form 4

SIMONS DO' Form 4	YLE R										
April 02, 2013	3										
FORM	4	~ ~							PPROVAL		
Check this box if no longer subject to Section 16. 									3235-0287		
									urs per		
1(b).											
(Print or Type Re	esponses)										
1. Name and Address of Reporting Person <u>*</u> SIMONS DOYLE R			Symbol	er Name an		or Trading	5. Relationship of Reporting Person(s) to Issuer				
			FISERV INC [FISV]				(Check all applicable)				
(Last) (First) (Middle) 255 FISERV DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 03/31/2013			X_ Director 10% Owner Officer (give title Other (specify below) below)					
	4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 							
BROOKFIEI	LD, WI 53045						Person	wore than one R	epotting		
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivati	ive Securities	Acquired, Disposed	of, or Beneficia	lly Owned		
	. Transaction Date Month/Day/Year)	2A. Deeme Execution I any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Dispos (Instr.	(A) or ed of (D) 3, 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Repor	rt on a separate line	e for each cla	ass of sect	urities bene	Per info req dis	sons who re ormation con uired to res	y or indirectly. espond to the colle ntained in this form pond unless the fo ently valid OMB co	n are not rm	SEC 1474 (9-02)		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8.
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Se
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Securities			(I

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	Derivative Security			Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)							
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Deferred Compensation Notional Units	<u>(1)</u>	03/31/2013		А		200		<u>(1)</u>	(1)	Common Stock	200

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SIMONS DOYLE R 255 FISERV DRIVE BROOKFIELD, WI 53045	Х							
Signatures								
/s/ Charles W. Sprague (attorney-in-fact)		04/02/	2013					
**Signature of Reporting Person		Date	•					

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

These deferred compensation notional units were allocated under the Fiserv, Inc. Non-Employee Director Deferred Compensation Plan (the "Plan"), under which director fees otherwise payable in cash may be deferred in exchange for the allocation of notional units under the Plan. This Form 4 reports the crediting of units under the Plan on March 31, 2013 in respect of \$17,500 of deferred compensation.

(1) The number of notional units credited is calculated by dividing the amount of compensation that is deferred by the closing price of the company's common stock on the date of deferral, or last business day prior. On March 28, 2013, the closing price of Fiserv's common stock was \$87.86 per share. Upon termination of the reporting person's service to the company, each notional unit will be settled in shares of Fiserv common stock on a one-for-one basis.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.