FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

| OMB APPROVAL             |     |  |  |  |  |  |  |
|--------------------------|-----|--|--|--|--|--|--|
| OMB Number: 3235-028     |     |  |  |  |  |  |  |
| Estimated average burden |     |  |  |  |  |  |  |
| hours per response:      | 0.5 |  |  |  |  |  |  |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person*  MUMA LESLIE M  |   |                    |   |  | 2. Issuer Name and Ticker or Trading Symbol FISERV INC [ FISV ] |   |  |   |                                     |        |          |                                     |  | (Chec   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)                              |                |   |  |            |  |
|--|---|--------------------|---|--|---|---|--|---|-------------------------------------|--------|----------|-------------------------------------|--|---|--|----------------|---|--|------------|--|
| (Last)   | (First)   | (Mi                | ddle)   |  |   | 3. Date of Earliest Transaction (Month/Day/Year) 02/20/2004 |  |   |                                     |        |          |                                     |  | X   | Director<br>Officer (g<br>below)   | ive title      |   | 10% Owner Other (specify below)                                    |            |  |
| 255 FISERV DRIVE   |   |                    |   |  |   |   |  |   |                                     |        |          |                                     |  |   | President & CEO  |                |   |  |            |  |
| (Street) BROOKFIELD WI 53045   |   |                    | 4. If <i>A</i>  | 4. If Amendment, Date of Original Filed (Month/Day/Year) |   |   |  |   |                                     |        |          | 6. Indi                             | fividual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than One Reporting Person |   |  |                |   |  |            |  |
| (City)   | (State)   | (Zi <sub>l</sub>   | 0)  |  |   |   |  |   |                                     |        |          |                                     |  |   |  |                |   |  |            |  |
|  |   | Та                 | ble I - Nor   | n-Der  | ivativ  | e Se  | curitie  | s Acqı                                  | uired, l                            | Disp   | osed of, | or E                                | Benefi   | cially Ov   | vned   |                |   |  |            |  |
| Date   |   |                    |   |  | Transaction<br>te<br>onth/Day/Year)                             |   | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year)  | 3.<br>Transaction<br>Code (Instr.<br>8) |                                     |        |          |                                     |  | 5. Amount<br>Securities<br>Beneficiall<br>Following | Fo<br>lly Owned or<br>Reported (In   |                | nership<br>Direct (D)<br>irect (I)<br>4)                          | 7. Nature of Indirect Beneficial Ownership                         |            |  |
|  |   |                    |   |  |   |   |  |   | Code                                | v      | Amount   |                                     | (A) or<br>(D)  | Price   | Transaction(s)<br>(Instr. 3 and 4)   |                |   |  | (Instr. 4) |  |
| Common Stock - \$0.01 par value 02/2   |   |                    |   | /20/2004   |   |   |  | G                                       | V                                   | 339    |          | D                                   | \$0.0  | 469,292   |  |                | D   |  |            |  |
| Common Stock - \$0.01 par value 02/2   |   |                    |   | 2/24/2004  |   |   |  | G                                       | V                                   | 68     |          | D                                   | \$0  | 469,224(1)  |  |                | D   |  |            |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |                    |   |  |   |   |  |   |                                     |        |          |                                     |  |   |  |                |   |  |            |  |
| 1. Title of<br>Derivative<br>Security (Instr. 3)   | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | e (Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |  | 4.<br>Transaction<br>Code (Instr.<br>8)                         |   | 5. Number of<br>Derivative<br>Securities<br>Acquired (A)<br>or Disposed of<br>(D) (Instr. 3, 4<br>and 5) |   | 6. Date I<br>Expiration<br>(Month/I | on Dat |          |                                     | derlying<br>curity<br>)  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number<br>derivative<br>Securities<br>Beneficial<br>Owned<br>Following<br>Reported<br>Transaction | s<br>S<br>Illy | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |            |  |
|  |   |                    | Code  | v  | (A)   | (D)   | Date<br>Exercisable  |   | Expiration<br>Date                  | Title  |          | Amount<br>or<br>Number<br>of Shares | (Instr. 4)   |   |  |                |   |  |            |  |

## **Explanation of Responses:**

1. 33,750 shares - Indirect ownership

Thomas J. Hirsch (attorney-in-

02/25/2004

fact)

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).