FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
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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]									S. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	(First)	(M	iddle)		3. Date of Earliest Transaction (Month/Day/Year) 03/01/2006									24	Officer (give title below)			Other (specify below)	
255 FISERV D	ORIVE		4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person							
(Street) BROOKFIELD) WI	53	045												Form filed by More than One Reporting Perso				
(City)	(State)	(Zi	p)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		Exe	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)			s Acquired (A		5. Amount of Securities Beneficially Following R Transaction		y Owned Forn or In Reported (Inst		Direct (D) rect (I) 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) or (D)	Price		(Instr. 3 and				(111511.4)
Common Stock	- \$0.01 par	r value		03/01	/2006				S		12,309	D	\$43.	0101	405,8	304	4 D		
Common Stock - \$0.01 par value															30,850			I	By Muma Family Foundation Inc.
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	cise (Month/Day/Year)	if any		i. Fransaction Code (Instr. B)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration D (Month/Day/		ate	7. Title and Securities U Derivative S (Instr. 3 and	Jnderlyi Security	ng	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Followin Reported	e Ow ss For ally Dir or g (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amo or Num of Sh	ber		Transaction(s) (Instr. 4)			

Explanation of Responses:

Thomas J. Hirsch (attorney-in-

03/03/2006

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.

 $^{^{\}star}$ 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).