FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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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 * SIMONS DOYLE R					FIS	2. Issuer Name and Ticker or Trading Symbol FISERV INC [FISV]								eck all app	ionship of Reporting P all applicable) Director			(s) to Issuer 10% Ov	vner	
(Last)	(First)	(Middle)				3. Date of Earliest Transaction (Month/Day/Year) 12/31/2010									Officer (give title below)			Other (specify below)		
1300 SOUTH MOPAC					4. If A	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) AUSTIN	TX	78	746											For	n file	d by More	than C	ne Reportin	g Person	
(City)	(State)	(Zip	p)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date				nsaction h/Day/Ye	ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)					ties Acquired d Of (D) (Instr.		5. Amount Securities Beneficial Following Transactio		ly Owned or Reported (In:		nership : Direct (D) lirect (I) . 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price		(Instr. 3 and 4)				(IIISU. 4)	
	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		3A. Deemed Execution Date if any (Month/Day/Ye	ate,	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and A Securities U Derivative So 3 and 4)	Deriva	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	e s illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code		(A)	(D)	Date Exercisal		Expiration Date	Title	Amoun or Numbe of Shar			(Instr. 4)	(e)			
Deferred Compensation Notional Units	(1)	12/31/2010			A		299		(1)		(1)	Common Stock	299	\$58.5	6(1)	4,540)	D		

Explanation of Responses:

1. These deferred compensation notional units were allocated under the Fisery, 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 December 31, 2010 in respect of \$17,500 of deferred compensation. 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. On December 31, 2010, the closing price of Fiserv's common stock was \$58.56 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.

/s/ Charles W. Sprague (attorney-

in-fact)

** Signature of Reporting Person

Date

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

- * 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).

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.