Edgar Filing: Gianoni Michael P - Form 4

Gianoni Mic	hael P											
Form 4												
May 24, 201	1											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL				
UNITED STATES SECUR				RITIES AND EXCHANGE COMMISSION shington, D.C. 20549					OMB Number:	3235-0287		
Check this box if no longer subject to STATEMENT OF CHAN									Expires:	January 31,		
				GES IN BENEFICIAL OWNE				ERSHIP OF	Estimated a	2005 Verage		
Section 16.				SECURITIES					burden hours per			
Form 4 o						_			response (
Form 5 obligation	nc *						•	Act of 1934,				
may cont			•		•	· ·	•	1935 or Section	1			
See Instru 1(b).	uction	30(h) of	the Invest	ment	Compan	iy Ac	t of 1940	J				
(Print or Type I	Responses)											
Gianoni Michael P Symbol FISER				RV INC [FISV]				5. Relationship of Reporting Person(s) to Issuer				
								(Month/D				of Earliest Transaction
5/20/2011	-				Officer (give title Other (specify							
					below) below) EVP, Group President							
			If Amendme	nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check				
								Applicable Line)				
								X Form filed by O Form filed by M				
JERSEY CI	TY, NJ 07302							Person	ore than One Rej	Jorting		
(City)	(State)	(Zip)	Table I -	Non-D	erivative	Secur	ities Acqu	iired, Disposed of,	or Beneficiall	y Owned		
1.Title of		ion Date 2A. Deemed			4. Securit			5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year)	Execution Da						Securities Beneficially	OwnershipIndirectForm: DirectBeneficia(D) orOwnership			
(Instr. 3)		any (Month/Day/	Code (Instr. 3, 4 and 5) /Day/Year) (Instr. 8)			5)	Owned	Ownership				
		```	, ,					Following	Indirect (I)	(Instr. 4)		
						(A)		Reported	(Instr. 4)			
						or		Transaction(s) (Instr. 3 and 4)				
Common			Cod	le V	Amount	(D)	Price \$	(				
Common Stock	05/20/2011		S		385	D	\$ 63.674	8,260	D			

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

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 control number.

 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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
Gianoni Michael P 10 EXCHANGE PLACE JERSEY CITY, NJ 07302			EVP, Group President				
Signatures							
/s/ Charles W. Sprague (attorney-in-fact)	05/24/2011						
<u>**</u> Signature of Reporting Person		Date	e				
Explanation of Poononooo							

## **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).

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.

9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr