#### TOTAL SYSTEM SERVICES INC

Form 4

November 13, 2007

### FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

**OMB APPROVAL** 

response...

if no longer subject to Section 16. Form 4 or Form 5

Check this box

obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

11/12/2007

stock

			2. Issuer Name and Ticker or Trading Symbol TOTAL SYSTEM SERVICES INC						5. Relationship of Reporting Person(s) to Issuer			
	[TSS]								(Check all applicable)			
(Last)	(First) (	Middle)	3. Date of Earliest Transaction (Month/Day/Voor)			_X_ Director Officer (give		Owner er (specify				
P. O. BOX 120			(Month/Day/Year) 11/12/2007						below)	below)		
(Street) 4. If An				f Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
File			Filed(Mo	Filed(Month/Day/Year)					Applicable Line)			
GOLLIN IDLIG GA 21002									_X_ Form filed by One Reporting Person Form filed by More than One Reporting			
COLUMBUS, GA 31902									Person			
(City)	(State)	(Zip)	Tab	le I - Nor	ı-D	erivative	Secui	rities Acq	uired, Disposed o	f, or Beneficial	ly Owned	
1.Title of	2. Transaction Date	e 2A. Deer	ned	3.		4. Securit	ies A	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	ecurity (Month/Day/Year) Execution Date, if		Transaction(A) or Disposed of (D)					Securities	Form: Direct	Indirect		
(Instr. 3)	· · · · · · · · · · · · · · · · · · ·			Code (Instr. 3, 4 and 5)				5)	Beneficially	(D) or	Beneficial	
		(Month/L	Day/Year)	(Instr. 8	3)				Owned	Indirect (I)	Ownership	
									Following Reported	(Instr. 4)	(Instr. 4)	
							(A)		Transaction(s)			
							or		(Instr. 3 and 4)			
				Code	V	Amount	(D)	Price	,			
common	11/12/2007			<b>T</b> (1)		261	٨	\$	6 504 (2)	D		

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

J(1)

Persons who respond to the collection of **SEC 1474** information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

6,504 (2)

D

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

261

Α

28.76

#### Edgar Filing: TOTAL SYSTEM SERVICES INC - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)			ate	7. Title Amoun Under	int of lying ities	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene
	Derivative Security				Securities Acquired			(Instr.	3 and 4)		Owne Follo
					(A) or Disposed						Repo Trans
					of (D) (Instr. 3, 4, and 5)						(Instr
					4, and 3)				Amount		
						Date Exercisable	Expiration Date	Title	or Number of		
				Code V	(A) (D)				Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
reporting Owner Hume / Hudress	Director	10% Owner	Officer	Other			
CLOUGH G WAYNE	v						
P. O. BOX 120 COLUMBUS, GA 31902	X						

# **Signatures**

Garilou Page, Attorney-in-Fact

\*\*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).
- (1) Purchase under issuer's Director Stock Purchase Plan
- (2) Includes shares acquired through dividend reinvestment

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.

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