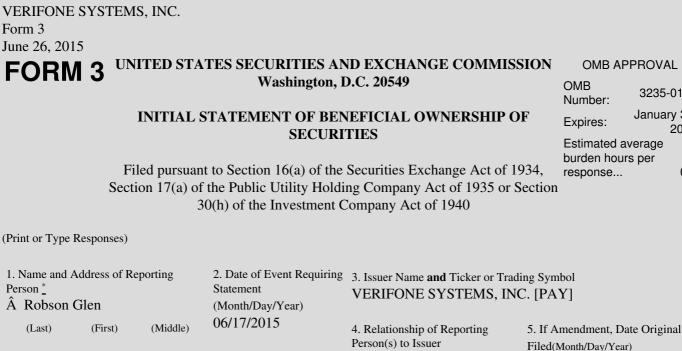
### response...

6. Individual or Joint/Group

Filing(Check Applicable Line)

Person

\_X\_ Form filed by One Reporting



# C/O VERIFONE SYSTEMS, INC., 88 W. PLUMERIA DRIVE

Form 3

Person \*

(Last)

(Street)

# SAN JOSE Â CAÂ 95134

SAN JOSE,A CAA 95154			Form filed by More than One Reporting Person					
(City) (State) (Zip)	Table I - Non-Derivative Securities Beneficially Owned							
1.Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)					
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.		SEC 1473 (7-02	2)					
Persons who respond to the information contained in the required to respond unless currently valid OMB controls	his form are not s the form displays a							
Table II Derivative Securities Pane	ficially Owned (a g nuts call	la warranta ar	tions convertible convrition)					

(Check all applicable)

(give title below) (specify below)

EVP, Terminal Solutions

Director

\_X\_\_Officer

10% Owner

Other

#### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D)	

#### **OMB APPROVAL**

3235-0104 Number: January 31,

2005 Estimated average burden hours per 0.5

# Edgar Filing: VERIFONE SYSTEMS, INC. - Form 3

				Shares		or Indirect (I) (Instr. 5)		
Restricted Stock Units 02/02/2	2015 Â <u>(1)</u>	Com Stocl value \$0.0 share	k, par e l per	84,000	\$ 0 <u>(1)</u>	D	Â	
Reporting Owners								
Reporting Owner Name / Address	Relationships							
	Director 10%	Owner	Office	r		Other		
Robson Glen C/O VERIFONE SYSTEMS, INC. 88 W. PLUMERIA DRIVE SAN JOSE, CA 95134	Â	Â	ÂE	VP, Termin	al Solutions	Â		
Signatures								

/s/ Glen Robson, by Suzanne Tom, his Attorney-in-Fact <u>\*\*</u>Signature of Reporting Person Date

# **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 5(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)  $\frac{50\%}{\text{anniversary of the grant date.}}$   $\frac{50\%}{\text{will vest on the first anniversary of the grant date, the remaining 50\% will vest on the second anniversary of the grant date.}$

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.