FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							
hours per response:	0.5						

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 * GARCIA PAUL R					2. Issuer Name and Ticker or Trading Symbol GLOBAL PAYMENTS INC [GPN]								(Check	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) 10 GLENLA NORTH TOV		,	Middle)	0	3. Date of Earliest Transaction (Month/Day/Year) 09/04/2007								X	Officer (g below)	give title Other (s below) President & CEO		pecify			
(Street) ATLANTA	GA	3	0328	4	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv	ndividual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(State) (2	Zip)																	
		Т	able I - No	n-Deriva	tive S	ecurit	ies Acq	uired,	Disp	osed of	f, or E	Benefic	cially Ow	ned						
D			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and				nd 5) Securities Beneficial Following		6. Owne Form: D or Indire (Instr. 4)	irect (D) ect (I)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock 09.				09/04/2	04/2007			М		10,000		A	\$13.025	269,326		I)			
Common Stock 09			09/04/2	/04/2007			S ⁽¹⁾		10,000		D	\$39.309	259,326		I)				
Common Stock														89	8		I	by Managed Account		
Common Stock														17,021			I	by Trust ⁽²⁾		
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	ercise (Month/Day/Year) of ative	3A. Deemed Execution Dat if any (Month/Day/Yo	Code	Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercise Expiration Date (Month/Day/Yea		Securities Underly		erlying	8. Price of Derivative Security (Instr. 5)	derivativ Securitie Benefici Owned Followin Reported	es Owner Form: ally Direct or Indii g (I) (Institution	wnership	Beneficial Ownership t (Instr. 4)		
				Code	v	Date Expiration (A) (D) Exercisable Date			Title		Amount or Number of Shares		Transacti (Instr. 4)	on(s)						
Non-Qualified Stock Option	\$13.025	09/04/2007		М			10,000	(3)	(06/01/2011		nmon	10,000	\$0	123,95	58	D			

Explanation of Responses:

- $1.\ Pursuant\ to\ 10b (5)-1\ Sales\ Plan\ executed\ by\ reporting\ person,\ when\ he/she\ was\ not\ in\ possession\ of\ material\ nonpublic\ information.$
- 2. These shares are held in a grantor retained annuity trust for the benefit of the reporting person's children. The reporting person's spouse is the trustee of the trust. The reporting person has the sole right to receive annunity payments.
- 3. This option will become exercisable on the anniversary of the grant date in the following increments: 20% on the second anniversary (June 1, 2003), 25% on the third anniversary (June 1, 2004), 25% on the fourth anniversary (June 1, 2005) and 30% on the fifth anniversary (June 1, 2006).

<u>Paul R. Garcia</u> <u>09/05/2007</u>

** 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.