FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL					
	OMB Number:	3235-0287					
l	Estimated average burden						
l	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).

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* <u>Romney M John</u>						2. Issuer Name <b>and</b> Ticker or Trading Symbol EURONET WORLDWIDE INC [ EEFT ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify)						
(Last) (First) (Middle) 4601 COLLEGE BOULEVARD SUITE 300						3. Date of Earliest Transaction (Month/Day/Year) 11/30/2007									X Officer (give title Other (specify below)  Executive Vice President					
(Street) LEAWOOD KS 662			66211		_   4. If	Line)  X Form fi									Joint/Group Filing (Check Applicable filed by One Reporting Person filed by More than One Reporting			on		
(City) (State) (Zip)											Person									
		Tab	le I - Nor	n-Deriv	ative	Se	curiti	es A	cquired,	Disp	osed	of, or B	enefi	cially	Owned	t c				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D			- 1		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (	Transaction Dispos Code (Instr. 5)		urities Acquired (A sed Of (D) (Instr. 3,		, 4 and Secui Benet		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) (D)	or Pi	ice	Transac (Instr. 3	tion(s)			(1130.4)	
Common Stock, par value \$0.02 per share 11/30			<u> </u>		/2007			S <sup>(1)</sup>		1,00			\$33	3 48,000 <sup>(2)</sup>			D			
		7							quired, D s, option						Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	cution Date, Transaction of Expiration Date of Secu Code (Instr. Derivative (Month/Day/Year) Underly htth/Day/Year) 8) Securities Derivati		of Securi Underlyir Derivativ	Securities I nderlying S		B. Price of Derivative Security (Instr. 5) Beneficia Owned Following Reported Transacti (Instr. 4)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)							
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	Amo or Num of Shar	ber						
Employee Stock Option (right to buy)	\$17.66								(3)	05	/08/2012	Common Stock	24,0	000		24,000	)	D		
Employee Stock Option (right to buy)	\$16.4								(4)	11	/27/2011	Common Stock	7,0	00		7,000		D		
Employee Stock Option (right to buy)	\$5.9								11/22/2005	11	/22/2012	Common Stock	6,0	00		6,000		D		
Employee Stock Option (right to buy)	\$10.79								09/24/2005	09	/24/2013	Common Stock	7,2	00		7,200		D		
Employee Stock Option (right to	\$22								(5)	06	/09/2014	Common Stock	22,2	:50		22,250	)	D		

## Explanation of Responses:

- 1. This transaction is a program transaction under a Rule 10b5-1 plan adopted by the Reporting Person in May, 2007.
- 2. A portion of the restricted stock reported on this form may vest once per year upon the Company's satisfaction of certain financial performance criteria.
- 3. The option vests in five equal annual installments beginning on 5/08/03.
- 4. The option vests in five equal annual installments beginning on 11/27/02.
- 5. The option vests in five equal annual installments beginning on 6/09/05.

Jeffrey B. Newman, Attorney

11/30/2007

<u>in fact</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.