FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	OVAL							
	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 an		2. Issuer Name and Ticker or Trading Symbol FLEETCOR TECHNOLOGIES INC [FLT]										Relationship of Reporting Person(s) to Issuer (Check all applicable) Director									
(Last) C/O MAI		3. Date of Earliest Transaction (Month/Day/Year) 12/14/2010										Offic	er (give title w)		Other (below)	(specify					
400 ATLANTIC AVENUE						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) BOSTON	<i>'</i>															X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St																				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea					/ear)	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Fransa Code (3)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and				5. Amount of Securities Beneficially Owned Follow Reported		rities ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								-	Code	v	Amount		(A) or (D) Price			Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 12/14/201					10	0			S		500,000	1)	D	\$21.5	625(2)	8,853,417(1)			I	By Chestnut Hill Ventures LLC ⁽³⁾	
		Та	ble I	I - Derivat (e.g., p						•	posed o	•			-	vned					
1. Title of Derivative Security (Instr. 3)	rative Conversion Date Execution or Exercise (Month/Day/Year) if any			ution Date,		ransaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date				7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amount or Numbe of Title Shares		nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	F D O (I	0. Ownership orm: Direct (D) or Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- 1. The reporting person disclaims beneficial ownership of these securities except to the extent of his pecuniary interest therein, and the inclusion of these securities in this report shall not be deemed an admission of beneficial ownership of all of the reported securities for purposes of Section 16 or for any other purpose.
- 2. This amount represents the \$23.00 public offering price per share of common stock of the issuer less the underwriting discount of \$1.4375 per share.
- 3. These shares are owned directly by Chestnut Hill Fuel, LLC, which is a direct wholly owned subsidiary of GCC Investments, LLC, which is a direct and indirect wholly owned subsidiary of Chestnut Hill Ventures LLC. GCC Investments, LLC and Chestnut Hill Ventures LLC are indirect beneficial owners of the reported securities.

David L. Coombs, as Attorney- 12/16/2010 in-Fact

** 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.