# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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*  WESSEL RICK L						2. Issuer Name and Ticker or Trading Symbol FIRST CASH FINANCIAL SERVICES INC [ FCFS ]										Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last) (First) (Middle) 690 E. LAMAR BLVD. #400						3. Date of Earliest Transaction (Month/Day/Year) 09/05/2012										X Officer (give title Other (specify below)  Chairman & CEO					
(Street) ARLINGTON TX 76011					4. 1											S. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting					
(City) (State) (Zip)						Person															
		Tak	ole I - Nor	ı-Deriv	vativ	e Se	curit	ies A	cqu	ired, I	Disp	osed	of, o	Ben	eficial	ly Owned					
Date							2A. Deemed Execution Date if any (Month/Day/Yea			Code (Inst						Benefici Owned F	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
										Code	v	Amoun	nt	(A) or (D)	Price	Reported Transact (Instr. 3	ion(s)	on(s) nd 4)		(instr. 4)	
Common	5/201	12				S <sup>(1)</sup>		8,90	8,903(1)		\$46	553	3,002		D						
Restricted Stock <sup>(2)</sup>																63	,000		D		
		•	Table II -									sed o				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	Code (Ins		of Deriv Secu Acqu (A) o Disp of (D (Inst	f Exp derivative decurities acquired A) or disposed		ate Exer iration D nth/Day/		and 7. Title and A of Securities Underlying Derivative Se (Instr. 3 and 4		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(A) (D) D		e rcisable	Exp Dat	oiration te	Title	or Nu	nount ımber Shares						
Options	\$15								01/2	28/2005	01/	28/2015	Comn		0,000		90,000	)	D		
Options	\$17.5								01/2	28/2005	01/	28/2015	Comn		0,000		90,000	)	D		
Options	\$20								01/2	28/2005	01/	28/2015	Comn		0,000		90,000	)	D		
Options	\$15								12/2	20/2005	12/.	20/2015	Comn		0,000		90,000	)	D		
Options	\$17								12/2	20/2005	12/	20/2015	Comn		0,000		90,000	)	D		
Options	\$19								12/2	20/2005	12/	20/2015	Comn		0,000		90,000	)	D		
Warrante	¢3.84			İ					05/	00/2003	05/	00/2013	Comn	non 3	10 000		240.00	_	D		

### **Explanation of Responses:**

- 1. These shares were sold pursuant to the provisions of a Rule 10b(5)-1 Plan dated February 1, 2012.
- 2. Non-vested restricted stock award future vesting is performance-based pursuant to terms of the Company's shareholder-approved Executive Performance Incentive Plan.

Shares and per share amounts reflect 2-for-1 stock split effective Feb. 22, 2006.

09/07/2012 /s/ Rick L. Wessel

\*\* 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.