

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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).

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* <b>LOVE JOE R</b>  (Last) (First) (Middle) <b>690 E LAMAR BLVD 400</b>  (Street) <b>ARLINGTON TX 76011</b>  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <b>FIRST CASH FINANCIAL SERVICES INC</b> <b>[ FCFS ]</b>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner  Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <b>01/28/2005</b>	

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	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 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	02/01/2005		M		50,000	A	\$5.33	190,109	D	

**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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Options	\$19.33							01/29/2004	01/29/2014	Common Stock	15,000		292,500	D	
Options	\$6.67							04/12/1999	04/12/2009	Common Stock	37,500		292,500	D	
Options	\$6.67							01/29/2003	01/29/2013	Common Stock	15,000		292,500	D	
Warrants	\$5.33							02/18/1998	02/18/2013	Common Stock	150,000		292,500	D	
Warrants	\$5.33							04/03/2002	04/03/2012	Common Stock	75,000		292,500	D	
Options	\$25	01/28/2005		A		10,000		01/28/2005	01/28/2015	Common Stock	10,000	(1)	302,500	D	
Options	\$30	01/28/2005		A		10,000		01/28/2005	01/28/2015	Common Stock	10,000	(1)	312,500	D	
Options	\$35	01/28/2005		A		10,000		01/28/2005	01/28/2015	Common Stock	10,000	(1)	322,500	D	
Options	\$40	01/28/2005		A		10,000		01/28/2005	01/28/2015	Common Stock	10,000	(1)	332,500	D	
Options	\$45	01/28/2005		A		10,000		01/28/2005	01/28/2015	Common Stock	10,000	(1)	342,500	D	
Options	\$50	01/28/2005		A		10,000		01/28/2005	01/28/2015	Common Stock	10,000	(1)	352,500	D	
Options	\$55	01/28/2005		A		10,000		01/28/2005	01/28/2015	Common Stock	10,000	(1)	362,500	D	
Warrants	\$5.33	02/01/2005		M		50,000		04/03/2002	04/03/2012	Common Stock	50,000	(1)	312,500	D	

**Explanation of Responses:**

1. Issued pursuant to FCFS stock option plan.

Joe R. Love

02/01/2005

\*\* 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.