FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasnington,	D.C.	20549

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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

Name and Address of Reporting Person* BURKE RICHARD T				2. Issuer Name and Ticker or Trading Symbol FIRST CASH FINANCIAL SERVICES INC FCFS									Che	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner Officer (vice title 2000)						
(Last) 690 EAS	,	(First) (Middle) R BLVD., SUITE 400				3. Date of Earliest Transaction (Month/Day/Year) 06/16/2009									Officer (below)	give title		Other (s	specify	
(Street) ARLINGTON TX 76011					4. If Amendment, Date of Original Filed (Month/Day/Year)										6. 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																
		Та	ble I - Nor	n-Deriva	ativ	/e Se	ecur	ities Ad	cquired,	Dis	osed o	f, or	Bene	ficially	Owned					
Date			Date	Transaction ate Ionth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		e, Transaction Dispose Code (Instr.		rities Acquired (A) o			5. Amour Securitie Beneficia Owned F	s Illy ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount (A		(A) or (D)	Price	Transacti (Instr. 3 a	tion(s)			(
Common				06/16	06/16/2009				M		150,0	,000 A		(1)	2,468,000		,000 D			
Common Stock 06/1				06/16	16/2009				M		300,0	0,000 A		(2)	2,768,000		<u> </u>			
Restricted Stock														5,000		00 D				
			Table II -						juired, D s, option						Owned					
Security or Exercis (Instr. 3) Price of	Conversion or Exercise Price of Derivative	on Date se (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Yo	Co	nsaction de (Instr.		Derivative E		6. Date Exercisal Expiration Date (Month/Day/Year		of Securities		curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
				Co	de	v	(A)	(D)	Date Exercisab		xpiration ate	Title	OI N	mount umber Shares		(Instr. 4)				
Options	\$0.67	06/16/2009		N	1			150,000	12/15/200	0 1	2/15/2010	Com		50,000	(1) 0		0			
Warrants	\$2.67	06/16/2009		N	1			300,000	02/18/199	8 0	2/18/2013	Com	mon ck 3	00,000	(2)	0		D		
Options	\$3.33								01/29/200	3 0	1/29/2013	Com		30,000		30,000		D		
Options	\$9.67								01/29/200	4 0	1/29/2014	Com		75,000		75,000		D		
Options	\$12.5								01/28/200	5 0	1/28/2015	Com		30,000		30,00	0	D		
Options	\$15								01/28/200	5 0	1/28/2015	Comi		30,000		30,00	00	D		
Options	\$17.5								01/28/200	5 0	1/28/2015	Com		30,000		30,00	0	D		
Options	\$20								01/28/200	5 0	1/28/2015	Com		30,000		30,00	0	D		
Options	\$15								12/20/200	5 1	2/20/2015	Com		30,000		30,00	0	D		
Options	\$17								12/20/200	5 1	2/20/2015	Com		30,000		30,00	00	D		
Options	\$19								12/20/200	5 1	2/20/2015	Com		30,000		30,00	0	D		
Warrants	\$2.67								04/03/200	2 0	4/03/2012	Com	mon	75,000		75,00	00	D		

Explanation of Responses:

- 1. Issued pursuant to Company stock option plan.
- 2. Issued pursuant to equity compensation arrangement.

/s/ Richard T. Burke

06/18/2009

** Signature of Reporting Person

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.