FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL 3235-0287 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

Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol FIRST CASH FINANCIAL SERVICES									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
POWELL PHILLIP E						INC [FCFS]									Director	•			wner	
(Last) (First) (Middle)										_ X	Officer below)	(give title		Other (s below)	specify					
690 E LAMAR BLVD					Date (L/04/2		iest Fran	saction (Mo	ntn/L	ay/Year)			Chairman & CEO							
(Street)				4.	If Ame	endme	ent, Date	of Original	Filed	(Month/Da	6. Inc	6. Individual or Joint/Group Filing (Check Applicable								
ARLINGTON TX 76011												X		Form filed by One Reporting Person						
(City)	(S	(State) (Zip)											Form fil Person	filed by More than One Reporting			rting			
		Tal	ble I - Noi	n-Deri	vativ	/e Se	curi	ties A	cquired,	Dis	posed o	of, or I	3ene	ficially	Owned					
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		- 1	2A. Deemed Execution Date, if any (Month/Day/Year)		, Transaction Di Code (Instr. 5)			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a 5)			5. Amour Securities Beneficia Owned F	s Illy ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or)	Price	Reported Transacti (Instr. 3 a	ion(s)			(Instr. 4)	
Common	Stock			11/0	04/200	/2003		М		11,20	1,200 A		\$2	71,	200	D				
Common	Stock			11/0)4/20(03			S ⁽²⁾		11,20	00	D	\$25.7	60,	60,000		D		
Common	Common Stock			11/0	5/20	5/2003					14,30	00	A	\$2	74,300		D			
Common	Stock			11/0	5/20	03			S ⁽²⁾		14,30	00	D	\$25.7	60,	000		D		
			Table II -						quired, D s, optior						Owned					
Security or (Instr. 3) Pri	2. Conversion or Exercise Price of Derivative Security	Conversion Date (Month/Day/Year) Price of Derivative		Date,	Code (Ins		ion of Ex		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transacti (Instr. 4)	e s ully g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)		
					0-4-		(0)		Date		xpiration	T:41-	or Nu	mber						
Options	\$2	11/04/2003			Code M	V	(A)	(D) 11,200	12/15/200	+	2/15/2010	Commo Stock	n 1	1,200	(1)	787,30	00	D		
Options	\$2	11/05/2003			M			14,300	12/15/200) 1	2/15/2010	Commo	n 1/	4,300	(1)	787,300		D		
Options	\$10			\dashv					04/12/1999	9 04	4/12/2009	Commo	n 11	5,000		773,00	00	D		
Options	\$20.05			\neg					10/01/2003	3 10	0/01/2013	Commo	ⁿ 10	0,000		773,00	00	D		
Warrants	\$4.625								01/15/199	5 0:	1/15/2011	Commo		8,000		773,00	00	D		
Warrants	\$8								04/03/2002	2 04	4/03/2012	Commo		0,000		773,00	00	D		
Warrants	\$8								02/18/199	3 02	2/18/2013	Commo Stock		0,000		773,00	00	D		
Warrants	\$10.1								04/04/2003	3 04	4/04/2013	Commo Stock	ⁿ 10	0,000		773,00	00	D		

Explanation of Responses:

- 1. Issued pursuant to employee stock option plan.
- 2. Stock sale for purposes of personal financial planning.

Phillip E. Powell

11/06/2003

** 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.