Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

OMB APPROVAL OMB Number: Estimated average burden

0.5

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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* BARRON ALAN						2. Issuer Name and Ticker or Trading Symbol FIRST CASH FINANCIAL SERVICES INC [FCFS]									5. Relationship of Reportin (Check all applicable) Director X Officer (give title			10% Owner Other (specify		
(Last) (First) (Middle) 690 E LAMAR BLVD 400						3. Date of Earliest Transaction (Month/Day/Year) 01/28/2005										CEO & COO				
(Street) ARLINGTON TX 76011					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)									5. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					action	ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,			(A) or	5. Amou Securitie Beneficia	nt of es ally following	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	Transact	Transaction(s) (Instr. 3 and 4)			(111501. 4)	
Common Stock											\perp	$\bot \bot$		162,129		D				
Common Stock															1,500				Owned by son	
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	ise (Month/Day/Year) if any (Month/Day			1. Fransact Code (In 3)		5. Numb of Derivati Securiti Acquire (A) or Dispose of (D) (II 3, 4 and	ive ies ed ed nstr.	6. Date Exercisable Expiration Date (Month/Day/Year)			of Securities Underlying Derivative S (Instr. 3 and		ecurity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				C	Code \	v	(A)	(D)	Date Exercisab		xpiration ate	Title	0 N 0	lumber						
Options	\$19.33								01/29/200	4 0	1/29/2014	Com		7,500		87,000)	D		
Warrants	\$8.67								06/03/200	3 0	6/03/2013	Com		9,500		87,00)	D		
Options	\$25	01/28/2005			A		50,000		01/28/200	5 0	1/28/2015	Com		0,000	(1)	137,00	0	D		
Options	\$30	01/28/2005			A		50,000		01/28/200	5 0	1/28/2015	Com		0,000	(1)	187,00	0	D		
Options	\$35	01/28/2005			A		50,000		01/28/200	5 0	1/28/2015	Com		0,000	(1)	237,00	0	D		
Options	\$40	01/28/2005			A		50,000		01/28/200	5 0	1/28/2015	Com		0,000	(1)	287,00	0	D		
Options	\$45	01/28/2005			A		50,000		01/28/200	5 0	1/28/2015	Com		0,000	(1)	337,00	0	D		
Options	\$50	01/28/2005			A		50,000		01/28/200	5 0	1/28/2015	Com		0,000	(1)	387,00	0	D		
Options	\$55	01/28/2005			A		50,000		01/28/200	5 0	1/28/2015	Com	non 5	0,000	(1)	437,00	0	D		

Explanation of Responses:

1. Issued pursuant to FCFS stock option plan.

Alan Barron

Stock

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.