#### Edgar Filing: LOVE JOE R - Form 4

Form 4 December 22,	2005										
FORM	<b>4</b> UNITED	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								PPROVAL 3235-0287	
Check this if no longe subject to Section 16 Form 4 or Form 5 obligations may contin <i>See</i> Instruct 1(b).	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 20(h) of the Investment Company Act of 1940								burden hou response	Estimated average burden hours per response 0.5	
(Print or Type Re	esponses)										
1. Name and Address of Reporting Person <u>*</u> LOVE JOE R			2. Issuer Name <b>and</b> Ticker or Trading Symbol FIRST CASH FINANCIAL SERVICES INC [FCFS]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 690 E. LAMAR BLVD., #400			3. Date of Earliest Transaction (Month/Day/Year) 12/20/2005					X_ Director10% Owner Officer (give titleOther (specify below)			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
ARLINGTO	N, TX 76011							Form filed by I Person	More than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	ecurities	s Acq	uired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	urity (Month/Day/Year) Executi tr. 3) any				4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock				Code V	Amount	or (D) P	rice	(Instr. 3 and 4) 130,109	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

#### Edgar Filing: LOVE JOE R - Form 4

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. Transactic 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 Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount o Number o Shares
Options	\$ 30	12/20/2005		А	10,000		12/20/2005	12/20/2015	Common Stock	10,000
Options	\$ 34	12/20/2005		А	10,000		12/20/2005	12/20/2015	Common Stock	10,000
Options	\$ 38	12/20/2005		А	10,000		12/20/2005	12/20/2015	Common Stock	10,000
Options	\$ 25						01/28/2005	01/28/2015	Common Stock	10,000
Options	\$ 30						01/28/2005	01/28/2015	Common Stock	10,000
Options	\$ 35						01/28/2005	01/28/2015	Common Stock	10,000
Options	\$ 6.67						04/12/1999	04/12/2009	Common Stock	37,500
Options	\$ 40						01/28/2005	01/28/2015	Common Stock	10,000
Warrants	\$ 5.33						02/18/1998	02/18/2013	Common Stock	125,000
Options	\$ 19.33						01/29/2004	01/29/2014	Common Stock	15,000
Options	\$ 6.67						01/29/2003	01/29/2013	Common Stock	15,000

# **Reporting Owners**

Reporting Owner Name / AddressRelationshipsDirector10% OwnerOfficerOtherLOVE JOE R<br/>690 E. LAMAR BLVD., #400<br/>ARLINGTON, TX 76011XVVV

## Signatures

/s/ Joe R. Love

12/22/2005

<u>\*\*</u>Signature of Reporting Person Date

### **Explanation of Responses:**

- \* 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).
- (1) Issued pursuant to Company stock option plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.