FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL					
OMB Number:	3235-0287				
Estimated average burden					
nours 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

Name and Address of Reporting Person*     COHEN PHILLIP EAN				2. Issuer Name and Ticker or Trading Symbol EZCORP INC [ EZPW ]								onship of Repo Ill applicable) Director Officer (give	Ü	,	10% Ow			
(Last) 350 PARK AVENU	(First) E, 8TH FLO	,	ddle)		3. Date of Earliest Transaction (Month/Day/Year) 05/17/2004						below)		X eholder		pecify below)			
(Street) NEW YORK (City)	NY (State)	100 (Zip		4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individ	ridual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
			Date				3. Transaction Code (Instr. 8) 4. Securities Acqui (D) (Instr. 3, 4 and 5		Acquired (A) or Disposed Of 4 and 5)		5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial			
			•			Code	v	Amount		(A) or (D)	Price			(Instr. 4)	)	Ownership (Instr. 4)		
Class A Non-Voting Common Stock			05/17/	/2004	05/17/	/2004	S		12,55	54	D	\$10.0326	150,637			D		
			Table II -							ed of, o			Owned					
			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)		e	7. Title and Amount of Securities Underlying Derivative Security (I		ying	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitic Benefici Owned Followin	ve es ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
Front on all Downson				Code	v	(A)	(D)	Date Exercis		Expiration Date	Title		Amount or Number of Shares		Reported Transaction(s) (Instr. 4)			

Explanation of Responses:

Remarks:

s/s Philip E. Cohen

\*\* Signature of Reporting Person

05/19/2004

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.

Known all by these presents, that the undersigned hereby makes, constitutes and appoints Laura Jones and Connie Kondik, individually and with the authority to act independently of each other, as the undersigned's true and lawful attorneys-in-fact, with full power and authority as hereinafter described on behalf of and in the name, place and stead of the undersigned to:

- (1) prepare, execute, acknowledge, deliver and file
  Forms 3, 4, and 5 (including any amendments thereto) with respect to the
  securities of EZCORP, Inc., a Delaware corporation (the "Company"), with
  the United States Securities and Exchange Commission, any national
  securities exchanges and the Company, as considered necessary or advisable
  under Section 16(a) of the Securities Exchange Act of 1934 and the rules
  and regulations promulgated thereunder, as amended from time to time (the
  "Exchange Act");
- (2) seek or obtain, as the undersigned's representative and on the undersigned's behalf, information on transactions in the Company's securities from any third party, including brokers, employee benefit plan administrators and trustees, and the undersigned hereby authorizes any such person to release any such information to the undersigned and approves and ratifies any such release of information; and
- (3) perform any and all other acts which in the discretion of such attorney-in-fact are necessary or desirable for and on behalf of the undersigned in connection with the foregoing.

The undersigned acknowledges that:

- (1) this Power of Attorney authorizes, but does not require, such attorney-in-fact to act in their discretion on information provided to such attorney-in-fact without independent verification of such information;
- (2) any documents prepared and/or executed by such attorney-in-fact on behalf of the undersigned pursuant to this Power of Attorney will be in such form and will contain such information and disclosure as such attorney-in-fact, in his or her discretion, deems necessary or desirable;
- (3) neither the Company nor such attorney-in-fact assumes (i) any liability for the undersigned's responsibility to comply with the requirement of the Exchange Act, (ii) any liability of the undersigned for any failure to comply with such requirements, or (iii) any obligation or liability of the undersigned for profit disgorgement under Section 16(b) of the Exchange Act; and
- (4) this Power of Attorney does not relieve the undersigned from responsibility for compliance with the undersigned's obligations under the Exchange Act, including without limitation the reporting requirements under Section 16 of the Exchange Act.

The undersigned hereby gives and grants the foregoing attorney-in-fact full power and authority to do and perform all and every act and thing whatsoever requisite, necessary or appropriate to be done in and about the foregoing matters as fully to all intents and purposes as the undersigned might or could do if present, hereby ratifying all that such attorney-in-fact of, for and on behalf of the undersigned, shall lawfully do or cause to be done by virtue of this Limited Power of Attorney.

This Power of Attorney shall remain in full force and effect until revoked by the undersigned in a signed writing delivered to such attorney-in-fact.

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this \_\_\_\_ day of May, 2004.

/s/ Philip E. Cohen

STATE OF TEXAS

COUNTY OF TRAVIS

On this 17 day of May, 2004, Philip E. Cohen personally appeared before me, and acknowledged that s/he executed the foregoing instrument for the purposes therein contained.

IN WITNESS WHEREOF, I have hereunto set  $\ensuremath{\mathsf{my}}$  hand and official seal.

Printed Name of Notary 8/31/2005		
	Commission expires:	