FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	IN BENEFICIAL	<b>OWNERSHIP</b>

	OMB APPROVAL								
	OMB Number:	3235-0287							
	Estimated average burden								
l	houre por rosponso:	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

1. Name and Address of Reporting Person*  LENNON FRANK T					2. Issuer Name <b>and</b> Ticker or Trading Symbol BRINKS CO [ BCO ]									elationship of eck all applic Director	able)	p Perso	on(s) to Issu 10% Ow Other (s	ner
(Last) (First) (Middle) 1255 FLAT ROCK CROSSING					3. Date of Earliest Transaction (Month/Day/Year) 09/26/2003									below)				
(Street) MANAK SABOT	KIN- V	A	23103	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	ndividual or Joint/Group Filing (Check Applicable a)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)	2	6.		4		inad D			D	- <b>4</b> : - : - !!.	. 0				
			ble I - Non-I		_			cqu	-	<u> </u>		-						
Date		. Transacti ate Month/Day/	Execution Date,		te, Transaction Disposed Of (I Code (Instr.		es Acquired (A) or Of (D) (Instr. 3, 4 and		5. Amour Securitie Beneficia Owned F Reported	s Formully (D) (I) (I)		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
							Code	,	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(30 4)		
			Table II - De (e					•		•		or Benef le secur	-	Owned				
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/Yea	Code (Instr.		of E		Expi	6. Date Exercisabl Expiration Date (Month/Day/Year)		of Sec Under Deriva		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
				Code	v	(A)	(D)	Date Exer	: cisable	Exp	iration e	Title	Amount or Number of Shares					
BCO Stock Units	\$0 <sup>(1)</sup>	09/26/2003		A		282 <sup>(1)</sup>		01/0	1/2004 <sup>(1)</sup>	01/0	01/2004 <sup>(1)</sup>	The Brink's Company Common Stock	282(1)	\$0 <sup>(1)</sup>	56,277	(1)	D	
			•			•				•				•	•			•

## **Explanation of Responses:**

1. This balance reflects an estimation of Units representing shares of The Brink's Company Common Stock ("BCO") to be credited to the Reporting Person's account under the Key Employees' Deferred Compensation Program (the "Program"). Under the terms of the Program, the Reporting Person has chosen to make bi-weekly salary deferrals to an incentive account. As of January 1, 2004, the amount of salary deferred to the account will be converted into Units representing shares of BCO and credited to the Reporting Person's account in accordance with the terms of the Program. Since the amounts contributed by the Reporting Person are in cash and not yet convertible into Units representing shares of BCO, the balance listed above is an estimate based upon trading prices of BCO for the two-week period ended September 26,

## Remarks:

/s/ Tracy R. Foard Tracy R. Foard, Attorney-in-Fact for

09/29/2003

Frank T. Lennon

\*\* 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.