SEC F	form 4
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

PPROVAL

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6. Individual or Joint/Group Filing (Check Applicable

Form filed by One Reporting Person

Form filed by More than One Reporting

Line)

X

Person

	-			PPROVAL				
Check this box if no longer subject to Section 16. Form 5 obligations may continue. See Instruction 1(b).	STATEMENT OF CHANGES IN BENEFICIAL OWN Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934	Eiled pursuant to Section 16(2) of the Securities Exchange Act of 1924						
	or Section 30(h) of the Investment Company Act of 1940							
1. Name and Address of Reporting Person <sup>*</sup> LENNON FRANK T	2. Issuer Name and Ticker or Trading Symbol BRINKS CO [ BCO ]	5. Relationship of R (Check all applicab Director	Reporting Person(s) to Issuer le) 10% Owner					
(Loot) (First) (M	ddle) 3. Date of Earliest Transaction (Month/Day/Year)	X Officer (gir below)		Other (specify below)				
(Last) (First) (M 1801 BAYBERRY COURT P.O. BOX 18100	ddle) 3. Date of Earliest Transaction (Month/Day/Year) 09/10/2004	VP - H	Iuman Res. & A	Admin.				

(Street) RICHMOND VA 23226 (City) (State) (Zip)

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

4. If Amendment, Date of Original Filed (Month/Day/Year)

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	(3-, p,,														
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. Transa Code ( 8)		5. Num of Derivat Securit Acquir (A) or Dispos of (D) (Instr. 3 and 5)	Expiration Date (Month/Day/Year) urities uired or osed )) . 7, 3, 4		Amount of Securities		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Units	\$0.00 <sup>(1)</sup>	09/10/2004		A		176 <sup>(1)</sup>		01/01/2005 <sup>(1)</sup>	01/01/2005 <sup>(1)</sup>	Common Stock	176(1)	\$0.00 <sup>(1)</sup>	61,413 <sup>(1)</sup>	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 the end of each fiscal year, the amount of salary deferred to the account is converted into Units representing shares of BCO and credited to the Reporting Person's account in accordance with the terms of the Program. The balance listed above is an estimate of the value of these Units based upon trading prices of BCO for the two-week period ended September 10, 2004.

## Remarks:

/s/ McAlister C. Marshall, II McAlister C. Marshall, II, Attorney-in-Fact

09/14/2004

\*\* 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.

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