FORM 4

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

<i>N</i> ashington,	D.C.	20549	
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wasnington, D.C. 20549	OMB APPROVAL		
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	323	

OMB Number:	3235-0287
Estimated average bure	den
hours per response:	0.5
	Estimated average bur

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*     ALEWINE BETTY C												5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
ALLY	INE DET	<u> 11 C</u>										X	Director			10% Ow	ner
(Last) (First) (Middle) 1801 BAYBERRY COURT					3. Date of Earliest Transaction (Month/Day/Year) 12/01/2006								Officer ( below)	give title		Other (sp below)	ecify
P.O. BOX 18100					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable					
(Street)												Line)	X Form filed by One Reporting Person				
RICHMO	OND V.	A	23226-8100								Form filed by More than One Reporting Person			ng			
(City)	(S	tate)	(Zip)														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
Date			. Transacti ate Month/Day	Execution Date,		, Transaction Disposed Of (I Code (Instr.		ties Acquire I Of (D) (Ins	es Acquired (A) or Of (D) (Instr. 3, 4 and 5)		Form		Direct Ir Indirect B str. 4) C	'. Nature of ndirect Beneficial Ownership			
					Code V Amount (A) or (D) Price Reported Transaction(s) (Instr. 3 and 4)						(ins		nstr. 4)				
	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)	1. Title of 2. 3. Transaction Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any		Code	sansaction ode (Instr. Securitie Acquired or Disposo of (D) (Ins 3, 4 and 5		e (A) sed str.	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	Jil(3)		
Brink's Units (DSAP)	(1)	12/01/2006		A		6.58 <sup>(1)(2)</sup>		(1)		(1)	Common Stock	6.58(1)(2)	(2)	5,863.3	3	D	

## **Explanation of Responses:**

1. The reporting person, as a participant in the Directors' Stock Accumulation Plan (the "Plan"), will be entitled to receive a distribution in The Brink?s Company common stock in respect of all Brink?s Units in the reporting person's account if, after completing at least five Years of Service as a Non-Employee Director (as such terms are defined in the Plan), the reporting person terminates service on the Board of Directors for any of the reasons described in the Plan.

2. Additional Brink's Units resulting from a dividend payment. The number of additional Brink's Units is calculated based on a per share price of \$55.63.

## Remarks:

/s/ Elizabeth C. Restivo

Elizabeth C. Restivo, Attorney- 12/05/2006

In-Fact

\*\* 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.