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										
hours 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

1. Name and Address of Reporting Person* HARTOUGH JAMES B					2. Issuer Name and Ticker or Trading Symbol BRINKS CO [BCO]							(Che		able)	g Perso	10% Ow Other (s	ner	
(Last) (First) (Middle) 1801 BAYBERRY COURT P.O. BOX 18100					3. Date of Earliest Transaction (Month/Day/Year) 12/19/2003								below)	Corp. Fi	n. and	below)		
(Street) RICHMOND VA 23226				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	6. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transa Date			. Transacti	2A. Deemed Execution D		med on Dat	te,	3. 4. Securiti Transaction Code (Instr.		es Acquired Of (D) (Instr.	(A) or	5. Amour Securitie Beneficia Owned F	s llly ollowing	Form:	Direct I Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	/	Amount	(A) or (D)	Price		saction(s) r. 3 and 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Yea	Code		5. Number 6. of Ex		Exp	6. Date Exercisabl Expiration Date (Month/Day/Year)		of Securities		es J Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exe	e rcisable	Ex Da	piration te	Title	Amount or Number of Shares					
BCO Stock Units	\$0 ⁽¹⁾	12/19/2003		A		167 ⁽¹⁾		01/0	01/2004 ⁽¹⁾	01/	/01/2004 ⁽¹⁾	The Brink's Company Common Stock	167(1)	\$0 ⁽¹⁾	33,020)(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 December 19,

Remarks:

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

** Signature of Reporting Person

12/22/2003

James B. Hartough

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.