FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington, D.C. 20549	
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Washington, D.C. 20549	OMB APPROVAL		
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235	

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	OMB Number:	3235-0287
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	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* <u>CAZER MICHAEL J</u>											5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify						
(Last) 1801 BA P.O. BO	YBERRY (	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 11/03/2008								X Officer (give title below)  Vice President and CFO				Decity
(Street) RICHMOND VA 23226  (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  X 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																
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				Execution Date,		Transaction Disposed Code (Instr.		ties Acquired (A) or d Of (D) (Instr. 3, 4 and 5		5. Amount of Securities Beneficially Owned Following Reported		Form:	Direct Indirect Etr. 4)	'. Nature of ndirect Beneficial Ownership Instr. 4)			
				Code V Amount (A) or (D)			r Price	Transaction(s) (Instr. 3 and 4)				msu. 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/Year	Code (Inst				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amoun of Securities Underlying Derivat Security (Instr. 3 at 4)			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod	de V	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount of Number of Shares		(Instr. 4)			
Units	(1)	11/03/2008		А		239.45 <sup>(1)</sup>		(1)		(1)	Common Stock	239.45	\$48.94(2)	932.	18	D	

## **Explanation of Responses:**

1. Under the terms of the Key Employees' Deferred Compensation Program (the "Program"), the Reporting Person has chosen to make salary deferrals to an incentive account. On the first business day of each month, the amount of salary deferred to the Reporting Person?s account during the previous month, plus any matching amounts, is converted into Units representing shares of The Brink?s Company ("BCO") Common Stock and credited to the Reporting Person's account in accordance with the terms of the Program. Dividends are calculated and credited to the Reporting Person's total account balance in accordance with the terms of the Program.

2. The number of Units credited to the Reporting Person's account on the Transaction Date is based upon a share price of \$48.94, which is the average trading price of BCO Common Stock for the month of October 2008, calculated in accordance with the terms of the Program.

## Remarks:

/s/ Elizabeth C. Restivo

Elizabeth C. Restivo, Attorney- 11/05/2008

in-Fact

\*\* Signature of Reporting Person

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.