FORM 4

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

Washingto STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

on. D.C. 20549	-
UII, D.C. 20549	OMB APPROVAL
	ONB APPROVAL

OMB Number:	3235-0287
Estimated average burder	1

0.5

hours per response:

## 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*  BRESLAWSKY MARC C				2. Issuer Name and Ticker or Trading Symbol BRINKS CO [ BCO ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
BRESL	AWSKY	MARCC		- 1			L -						X	Director			10% Ow	ner	
-														Officer (g	ive title		Other (sp	ecify	
(Last)	(F	First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)								7	below)		below)		·	
1801 BAYBERRY COURT					08/01/2005														
P.O. BOX	X 18100																		
				—⊦							n		0			(			
(Street)				- 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								I	6. Individual or Joint/Group Filing (Check Applicable Line)					
RICHMO	OND V	/A	23226-8100										X				_		
														Form file	d by More	than C	ne Reportir	ig Person	
(City)	(5	State)	(Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date				. Transac							5. Amount				. Nature of				
				Date   (Month/Day/Year		Execution Date if any (Month/Day/Yea		Code (Instr.		Dispose	ed Of (D) (Instr. 3, 4 a		, 4 and 5)	Beneficiall Following		y Owned (D) or (I) (Ins		ndirect Beneficial Dwnership	
								Code	v	Amount	(A)	(A) or (D)		Reported Transaction	n(s)		(1	Instr. 4)	
								Code	Ľ	Amount (D)		Price	(Instr. 3 and 4)						
			Table II - De	erivati	ive Se	curities	Acq	uired, C	ispo	sed of	, or Bei	nefic	ially Ov	vned					
			(е	.g., pu	ıts, ca	ılls, warr	ants	, optio	1s, c	onverti	ble sec	uriti	es)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amoun Securities Underlyi Derivative Security (Instr. 3 and 4)		lerlying urity	8. Price of Derivative Security (Instr. 5)	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)	
				Code	v	(A)	(D)	Date Exercisal		xpiration ate	Title	Nu	ount or mber of ares		(Instr. 4)				
Brink's Units (DSAP)	(1)	08/01/2005		A		1,185.61 <sup>(1)</sup>		(1)		(1)	Common	1,:	185.61(1)	(1)	6,340	.44	D		

## **Explanation of Responses:**

1. Supplemental allocation of Brink's Units in accordance with the terms of the Directors' Stock Accumulation Plan (the "Plan"). The number of additional Brink's Units is calculated based on the Directors' annual retainer and the total Brink's Units balance in the reporting person's account as of August 1, 2005. The Brink's Units entitle the reporting person to receive a distribution in The Brink's Company common stock in respect of all Brink's Units in the reporting person's account when, 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.

## Remarks:

/s/ Elizabeth C. Restivo

08/03/2005 Elizabeth C. Restivo, Attorney-

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.