

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

1. Name and Address of Reporting Person* <u>RITTER ROBERT T</u>  (Last) (First) (Middle) 1801 BAYBERRY COURT P.O. BOX 18100  (Street) RICHMOND VA 23226  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>BRINKS CO [ BCO ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner Officer (give title below) Other (specify below) Vice President and CFO
	3. Date of Earliest Transaction (Month/Day/Year) 11/15/2007	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	11/15/2007		M		1,891	A	\$32.68	1,891	D	
Common Stock	11/16/2007		M		109	A	\$32.68	2,000	D	
Common Stock	11/16/2007		M		8,000	A	\$35.79	10,000	D	
Common Stock	11/15/2007		S		1,291	D	\$60.4	8,709	D	
Common Stock	11/15/2007		S		400	D	\$60.45	8,309	D	
Common Stock	11/15/2007		S		200	D	\$60.48	8,109	D	
Common Stock	11/16/2007		S		409	D	\$59.81	7,700	D	
Common Stock	11/16/2007		S		4,500	D	\$59.9	3,200	D	
Common Stock	11/16/2007		S		2,100	D	\$59.92	1,100	D	
Common Stock	11/16/2007		S		900	D	\$60	200	D	
Common Stock	11/16/2007		S		200	D	\$60.01	0	D	
Common Stock								4,205.12 <sup>(1)</sup>	I	401(k) Plan

**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)	4. Transaction Code (Instr. 8)		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 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) (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
Employee Stock Option (Right to Buy)	\$32.68	11/15/2007		M		1,891		07/08/2007	07/08/2010	Common Stock	1,891	\$0.00	109	D	
Employee Stock Option (Right to Buy)	\$32.68	11/16/2007		M		109		07/08/2007	07/08/2010	Common Stock	109	\$0.00	0	D	
Employee Stock Option (Right to Buy)	\$35.79	11/16/2007		M		8,000		07/07/2006	07/07/2011	Common Stock	8,000	\$0.00	37,000 <sup>(2)</sup>	D	

**Explanation of Responses:**

1. As of November 19, 2007.

2. The Reporting Person held options (vested and unvested) for a total of 112,000 shares as of November 16, 2007 following the Reported Transactions.

**Remarks:**

/s/ Elizabeth C. Restivo

Elizabeth C. Restivo, Attorney- 11/19/2007

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.**