VIAD CORP

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 8/8/2003 For Period Ending 8/6/2003

Address 1850 NORTH CENTRAL AVE SUITE 800

PHOENIX, Arizona 85004-4545

Telephone (602) 207-4000

CIK 0000884219

Industry Business Services

Sector Services

Fiscal Year 12/31





[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

Option-right to buy	\$10.1118	8/6/2003		M		10916		8/19	/1995	8/18	/2003	Common Stock	10916.00	\$21.41	0.00 (1)	D	
				Code	V (` 	Date Exerc		e Expiration rcisable Date		Title	Amount or Number of Shares		Reported Transaction (s) (Instr. 4)	(I) (Instr. 4)		
1. Title of Derivate Security (Instr. 3)	2. 3. Trans. Conversion or Exercise Price of Derivative Security			4. Trai	ns. 5 I 8) S	. 5. Number of Derivative		6. Date Exercisable and Expiration Date			le	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	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
Tabl	le II - Dei	rivative	Securiti	es Be	enef	icially (Own	ed (e.g. ,	puts	s, ca	lls, warr	ants, options	, convert	ible secur	ities)	
Common Stock 8/6				8/6/2	003		A	-	1091	6.00	A	610.1118	11916.00			D	
				Date, if any		Coo		V Amo		(A) or (D)	Price	(Ilisti. 3 and 4))		Direct (D)	Ownership (Instr. 4)	
			Deriv 2. Tra Date		2A. Deemed Execution	3. Tr Code	3. Trans. 4. Code (A		A. Securities Acquaration of Disposed of Instr. 3, 4 and 5)		quired :	or Beneficially 5. Amount of Secu Owned Following (Instr. 3 and 4)	icially	6. Ownership Form:	7. Nature of Indirect Beneficial		
(City) (State) (Zip)												Form filed by More than One Reporting Person					
LAKE FORES	,	60045-	4811										X Form fi	iled by One	Reporting Per	rson	
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)						ed		6. Individual or Joint/Group Filing (Check Applicable Line)				
BRUNSWICK N. FIELD CO		PORA	TION,	1				8/6	6/200)3			below)				
(Last) (First) (Middle)					3. Date of Earliest Transaction (MM/DD/YYYY)							X _ Director 10% Owner Officer (give title below) Other (specify below)					
REICHERT J	ACK F					D CO							W D:			100/	
1. Name and Address of Reporting Person *				2	2. Issuer Name and Ticker or Trading Symbol						ng Symb		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				

Explanation of Responses:

Granted August 1993 pursuant to 1993 Stock Incentive Plan. This Option was originally reported as covering 2,900 shares at an exercise (1) price of \$38.0625 (current exercise price of \$10.1118), but as adjusted as previously reported, and all Options remaining unexercised 08-15-96 were further adjusted to reflect the spin-off of the Consumer Products Business of the Corporation occurring on that date.

Ke	por	ung	U	vners

Paparting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10%	Owner	Officer	Other			
REICHERT JACK F								
BRUNSWICK CORPORATION								
	X							
1 N. FIELD COURT								
LAKE FOREST, IL 60045-4811								

Signatures

Scott E. Sayre, Attorney-in-Fact

8/7/2003

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 control number.

End of Filing



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