FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

shington,	D.C.	20549	

OMB A	PPROVAL
OMB Number:	3235-028

37 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)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* MOISON FRANCK J						2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]								(Check	all app Direc	olicable) ctor		Owner
	•	LMOLIVE CON	(Middle) MPANY				of Earlies 2007	st Trans	saction (n/Day/Year)			X	Officer (give title below) Pres., Glob. Bus		Other (specify below) s. Dev. & Tech.		
(Street) NEW YC			10022 (Zip)		_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check App Line) X Form filed by One Reporting Person Form filed by More than One Report									rson			
		Tab	le I - N	on-Deriv	/ative	Se	curitie	es Ac	quired	d, Di	sposed o	f, or E	Benefic	ially	Owne	ed		
Date		2. Transac Date (Month/Da		Execution Da		Date,	3. 4. Securitie Transaction Code (Instr. 8)					Beneficially Owned Fol		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) o (D)	Price		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common Stock 09/10			09/10/	2007	007			F ⁽¹⁾		37	D	\$6	6.69	5	66,410	D		
Common	Stock			09/11/	2007				S ⁽²⁾		2,425	D	\$67	.2333	5	53,985 D		
Common	Stock															1,189	I	By Issuer's 401(k) Plan Trustee
		Ta	able II -								osed of, convertib				wned		,	•
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Exe (Month/Day/Year) if an	if any	eemed 4. tion Date, Tra		ction Instr.	5. Number of		6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deri Sec (Ins	vative (urity Str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	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	Amour or Number of Title Shares						

Explanation of Responses:

- 1. Payment of tax liability by withholding shares of stock from award of restricted shares vesting under the issuer's stockholder-approved Executive Incentive Compensation Plan. The overall net effect of the vesting of restricted shares, after the withholding and sale of shares to pay income taxes associated with such vesting reported on this Form, was to increase Mr. Moison's non-restricted holdings (i.e., common shares held outright) of Colgate stock.
- 2. Sale of shares (with proceeds delivered to the Company) for payment of tax liability above minimum required statutory withholding (but not in excess of full applicable statutory tax rates) resulting from vesting of award of restricted shares under the Company's stockholder-approved Executive Incentive Compensation Plan. The overall net effect of the vesting of restricted shares, after the withholding and sale of shares to pay income taxes associated with such vesting reported on this Form, was to increase Mr. Moison's non-restricted holdings (i.e., shares held outright) of Colgate common stock.

Remarks:

Nina D. Gillman by power of <u>attorney</u>

09/12/2007

** 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.