FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* TOBEN EDMUND D						2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 02/09/2007								X Officer (give title Officer (specify below) Chief Information Officer						
(Street)			10022		4. If Amendment, Date of				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					
(City)	(S	tate)	(Zip)																
		Tab	le I - N	1		_			quire	d, Di	_			Ily Owned	t				
Da		Date			2A. Deemed Execution Date, r) if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 at 5)			5. Amount Securities Beneficial Owned Fo	ly	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) or (D)	Price	Reported Transactio (Instr. 3 ar				(Instr. 4)			
Common Stock			02/09/	2007	007				M ⁽¹⁾		3,279	A	\$52.78	5 41,508		D			
Common Stock		02/09/	09/2007				F ⁽²⁾		234	D	\$66.92	41,274		D					
Common Stock		02/09/	02/09/2007				F ⁽³⁾		2,587	D	\$66.92	38,687(4)		D					
Common Stock													1,515		I		By Issuer's 401(k) Plan Trustee		
Common Stock													2,38	2,387		I	By Daughter ⁽⁵⁾		
		Т	able II								posed of converti			y Owned					
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/E						Date Exercisable and Expiration Date (Month/Day/Year)		ite	7. Title and Amount of Securities Underlying Derivative Secur (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. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)				
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares	1					
Stock Option (Right to Buy)	\$52.785	02/09/2007			M ⁽¹⁾			3,279	07/13/2	2003	09/10/2008	Common Stock	3,279	\$0	()	D		

Explanation of Responses:

- $1. \ Exercise \ of \ stock \ options \ awarded \ under \ the \ issuer's \ employee \ stock \ option \ plan.$
- 2. Payment of tax liability by delivering or withholding shares of stock incident to the exercise of the option under the issuer's employee stock option plan.
- 3. Payment of exercise price of stock option by delivering or withholding shares of stock incident to the exercise of the option under the issuer's employee stock option plan.
- 4. As a result of the reported transactions, the reporting person's Common Stock ownership has increased by 458 shares.
- 5. The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

Remarks:

Nina D. Gillman by power of attorney

02/13/2007

** 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.