FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D | D.C. 2 | 0549 |
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| STATEMENT OF (| CHANGES IN BENEFI | ICIAL OWNERSHIP |
|----------------|-------------------|-----------------|

OMB APPROVAL OMB Number: 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).

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* BELASCO STEVEN R (Last) (First) (Middle) C/O COLGATE-PALMOLIVE COMPANY 300 PARK AVENUE | | | | | 2. Issuer Name and Ticker or Trading Symbol COLGATE PALMOLIVE CO [CL] 3. Date of Earliest Transaction (Month/Day/Year) 11/08/2004 | | | | | | | | | | below) | | | g Person(s) to Issuer 10% Owner Other (specify below) and Real Estate | | |
|---|--|--|---------------|---|--|---|-------|-----------------------------|---|--------|---------------------|--------------------------------------|---|-----------------------|---|--|----|---|----------------------------------|------------|
| (Street) NEW YC | | | 10022 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indi Line) X | ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Tabl | e I - No | n-Deriv | ative | Se | curit | es Ac | quire | l, Dis | posed o | f, o | r Be | enefi | cially | Owne | ed | | | |
| | | 2. Transaction Date (Month/Day/Year) | | ar) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code | Transaction Code (Instr. | | | | | 4 and Secu Bene Own | | icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | · v | Amount | | (A) o (D) | or Pri | ce | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) |
| Common Stock 11/0 | | | | 11/08 | 3/2004 | /2004 | | D | | 5,000 | 5,000 D | | \$ | 45.35 | 60,097 | | | D | | |
| Common Stock | | | | | | | | | | | | | | | 10,812 | | | Ι | By Issuer's 401(K) Plan | |
| Common Stock | | | | | | | | | | | | | | | 200 | | | | I | By Child |
| | 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 Security 1. Title of Conversion Date Date (Month/Day/Year) 2. Conversion Date Execution Date, if any (Month/Day/Year) | | 4. Transa Code (8) | | tion of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable an Expiration Date (Month/Day/Year) Date Exercisable Expiration Date Date Date | | | Amount of Securities Underlying Derivative Security (Instr. and 4) | | Deri Sec (Ins | rice of vative urity tr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | F I | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |

Explanation of Responses:

Remarks:

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

11/09/2004

** 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.